

600

Notice of appointment of liquidator in a
members' or creditors' voluntary winding up



Companies House

For further information, please refer to
our guidance at
www.gov.uk/companieshouse

1	Company details	
Company number	1 0 9 8 5 7 5 7	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	Kilpatrick-Elliott Limited	
2	Liquidator's name	
Full forename(s)	Claire Louise	
Surname	Foster	
3	Liquidator's address	
Building name/number	7 Jetstream Drive	
Street	Auckley	
Post town	Doncaster	
County/Region	South Yorkshire	
Postcode	D N 9 3 Q S	
Country		
4	Liquidator's email address or telephone number ^①	
Email address		
Telephone number	01302 965485	
5	Insolvency practitioner number	
Number	9 4 2 3	

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6	Liquidator's name ^①	
Full forename(s)		
Surname		
		① Other Liquidator's details Use this section to tell us about another liquidator.
7	Liquidator's address ^②	
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
		② Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
8	Liquidator's email address or telephone number ^③	
Email address		
Telephone number		
		③ You must give an email address or telephone number. All information on this form will appear on the public record.
9	Insolvency practitioner number	
Number		
10	Statement of appointment	
I confirm the appointment of the liquidator(s) on		
Date	<div> <div>d</div> <div>0</div> </div> <div> <div>d</div> <div>4</div> </div> <div> <div>m</div> <div>0</div> </div> <div> <div>m</div> <div>3</div> </div> <div> <div>y</div> <div>2</div> </div> <div> <div>y</div> <div>0</div> </div> <div> <div>y</div> <div>2</div> </div> <div> <div>y</div> <div>2</div> </div>	
11	Appointment details	
The appointment was made by (Tick one) <input type="checkbox"/> Company <input checked="" type="checkbox"/> Creditors		
12	Type of liquidation	
Tick to confirm the liquidation type <input type="checkbox"/> Members <input checked="" type="checkbox"/> Creditors		
13	Sign and date	
Liquidator's signature	Signature <div> <div>X</div> <div>Ce</div> <div>X</div> </div>	
Signature date	<div> <div>d</div> <div>0</div> </div> <div> <div>d</div> <div>4</div> </div> <div> <div>m</div> <div>0</div> </div> <div> <div>m</div> <div>3</div> </div> <div> <div>y</div> <div>2</div> </div> <div> <div>y</div> <div>0</div> </div> <div> <div>y</div> <div>2</div> </div> <div> <div>y</div> <div>2</div> </div>	

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Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name

Company name

Revive Business Recovery
Limited

Address

7 Jetstream Drive
Auckley

Post town

Doncaster

County/Region

South Yorkshire

Postcode

D N 9 3 Q S

Country

DX

Telephone

01302 965485



Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.



Important information

All information on this form will appear on the public record.



Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House,
Crown Way, Cardiff, Wales, CF14 3UZ.
DX 33050 Cardiff.



Further information

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse