In accordance with section 109 of the Insolvency Act 1986

600



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

EDNESDAY



A07 01/05/2024 COMPANIES HOUSE

#99

1	Company details			
Company number	1 2 2 8 0 4 1 6	→ Filling in this form Please complete in typescript or in		
Company name in full	Cliffe Construction Ltd	bold black capitals.		
2	Liquidator's name			
Full forename(s)	Gareth			
Surname	Howarth			
3	Liquidator's address			
Building name/number	2nd Floor			
Street	9 Portland Street			
Post town	Manchester			
County/Region				
Postcode	M 1 3 B E			
Country				
4	Liquidator's email address or telephone number •	1 You must give an email address or		
Email address		telephone number. All information on this form will appear on the		
Telephone number	0161 413 0999	public record.		
5	Insolvency practitioner number			
Number	18816			
	·			

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6	Liquidator's name [©]	-
Full forename(s)		Other Liquidator's details
Surname		Use this section to tell us about another liquidator.
7	Liquidator's address [©]	1
Building name/number		Other Liquidator's details
Street	•	 Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town		
County/Region		
Postcode		
Country		
8	Liquidator's email address or telephone number ©	You must give an email address or
Email address		telephone number. All information on this form will appear on the
Telephone number		public record.
9	Insolvency practitioner number	
Number		
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	1 9 6 4 2 6 4	
11	Appointment details	
	The appointment was made by (Tick one) ☐ Company ☐ Creditors	
12	Type of liquidation	
	Tick to confirm the liquidation type ☐ Members ☐ Creditors	
13	Sign and date	
iquidator's signature	Signature X C.H-L	K
ignature date	1 9 0 4 y2 y0 y2 y4	

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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	Sahil Nadeem	
Company name	Path Business Recovery Limited	
Address	2nd Floor	
	9 Portland Street	
Post town	Manchester	
County/Region		
Postcode	M 1 3 B E	
Country		
DX		
Telephone	0161 413 0999	

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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.

7 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