

Please complete in typescript, or in bold black capitals

Form revised July 1998

# 288a

# **APPOINTMENT** of director or secretary (NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

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CHFP029 Company Number		11476											
Compa	any Name in full	North I	British a	and I	Mercantile	Insuran	ce Comp	oany Lii	mited				
Data af		Day Month Year					<b>-</b>	Day	Month Year				
Appointment	Date of appointment	1 4	1 1	2	0 0 0		Date of Birth	1 2	0 6	1	9 5	5 0	
form Appointment as director		X as secretary Please mark the appropriate box. If appointment as a director and secretary mark both boxes.										intment is es.	
NAME *Style / Title Notes on completion		MR *Ho						onours etc					
appear on reverse.  Forename(s)		PATRICK JOSEPH ROBERT											
Surname		SNOWBALL											
	Previous Forename(s)						Previous name(s)						
	Usual residential address	THE OL	D RECTO	ORY,	LONGHAM								
	EAST DEREHAM				Po	Postcode NR19 2RG							
	NORFOLK						ountry	untry					
†Nationality		BRITISH †Busine					ness occ	s occupation INSURANCE COMPAI				PANY	
†Other directorships (additional space overleaf)		SEE CONTINUATION PAGE  I consent to act as ** director / secretary of the above named company											
0-		conse	nt to ac	t as	** director	/ secreta					npany	<u>'</u>	
Co	nsent signature		<b>}</b> ~~					l	53111	<b>126</b>			
* Voluntary details. † Directors only. **Delete as appropriate  Signed		A director, secretary etc must sig				ust sign		Date	v. 28	Π,	જ	Q.	
	(	(** a directo	ar / secreta	ary / au	lministrator / a	dministrative	receiver /	eceiver m	anager / rec	eiver)			
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.  SCT SEIAKW7L D105 COMPANIES HOUSE 06/12/00		GROUP LI	EXUTP	ÖŔ	séd'sig	KATOK	NDERSHAF	T, LONDO	N, EC3P 3D	Q 			
		FOR AND ON BEHALF OF											
		CGNU COMPANYel											
		SECRETARIAL SERVICES LIMITED DX number DX exchange											
		When you have completed and signed the form please send it to the Registrar of Companies at:  Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh											

# **Company Number**

11476

† Directors only.

† Other directorships

BRITISH & EUROPEAN REINSURANCE COMPANY LIMITED/THE

**CGU BONUS LIMITED** 

CGU CREDIT SERVICES LIMITED

CGU RISK MANAGEMENT LIMITED

CGU UNDERWRITING LIMITED

COMMERCIAL UNION ASSURANCE COMPANY LIMITED

COMMERCIAL UNION CORPORATE MEMBER LIMITED

EMPLOYERS' LIABILITY ASSURANCE CORPORATION LIMITED/THE

FINE ART AND GENERAL INSURANCE COMPANY LIMITED

GENERAL ACCIDENT REINSURANCE COMPANY LIMITED

INDEMNITY MARINE ASSURANCE COMPANY LIMITED/THE

INSURANCE DATABASE SERVICES LIMITED

INXL LIMITED

LONDON & EDINBURGH INSURANCE GROUP LIMITED

LONDON AND EDINBURGH INSURANCE COMPANY LIMITED

LONDON AND EDINBURGH LIFE ASSURANCE COMPANY LIMITED

LONDON AND EDINBURGH SERVICES LIMITED

LONDON AND EDINBURGH TRUSTEES LIMITED

LONDON AND SCOTTISH ASSURANCE CORPORATION LIMITED

MACALISTER & DUNDAS LIMITED

# **NOTES**

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:
- for a married woman, the name by which she was known before marriage need not be given.

- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

# Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.

# **Company Number**

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† Directors only.

† Other directorships

NATIONAL GUARANTEE AND SURETYSHIP ASSOCIATION LIMITED/THE

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NORWICH UNION HOLDINGS LIMITED

MOTOR INSURERS' BUREAU

NORWICH UNION INSURANCE LIMITED

NORWICH UNION MORTGAGES (GENERAL) LIMITED

NORWICH UNION PLC

NORWICH UNION SERVICES LIMITED

NUI INVESTMENTS LIMITED

OCEAN ACCIDENT AND GUARANTEE CORPORATION LIMITED/THE

OCEAN MARINE INSURANCE COMPANY LIMITED/THE

PARTNERS AGAINST CRIME TASKFORCE

**POLARIS** 

RAILWAY PASSENGERS ASSURANCE COMPANY

ROAD TRANSPORT & GENERAL INSURANCE COMPANY LIMITED /THE

SABRE INSURANCE COMPANY LIMITED

SCOTTISH BOILER AND GENERAL INSURANCE COMPANY LIMITED

SCOTTISH GENERAL INSURANCE COMPANY LIMITED

SCOTTISH INSURANCE CORPORATION LIMITED

SCOTTISH UNION AND NATIONAL INSURANCE COMPANY

SPIG LIMITED

# **Company Number**

11476

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TRAVELLERS' INSURANCE ASSOCIATION, LIMITED
ULSTER MARINE INSURANCE COMPANY LIMITED /THE
UNION ASSURANCE SOCIETY LIMITED
WEST OF SCOTLAND INSURANCE OFFICE LIMITED
WHITE CROSS INSURANCE COMPANY LIMITED/THE
WORLD AUXILIARY INSURANCE CORPORATION LIMITED/THE
YORKSHIRE INSURANCE COMPANY LIMITED /THE