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



Companies House

THURSDAY



A9231L4Z

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02/04/2020

#81

COMPANIES HOUSE

1 Company details

Company number 0 8 6 5 7 6 4 2

Company name in full Charnwood Thermal Insulation Services Limited

→ Filling in this form

Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) John

Surname Harlow

3 Liquidator's address

Building name/number 29 New Walk

Street Leicester

Post town LE1 6TE

County/Region

Postcode

Country

4 Liquidator's email address or telephone number ^①

Email address

Telephone number 0116 275 5021

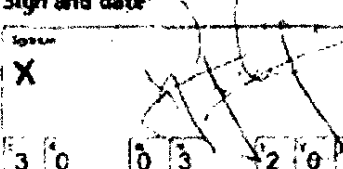
^① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 8 3 1 9

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6 Liquidator's name *		* Other liquidator's details Use this section to tell us about another liquidator.
Full forename(s)		
Surname		
7 Liquidator's address *		* 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.
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
8 Liquidator's email address or telephone number *		* You must give an email address or telephone number. All information on this form will appear on the public record.
Email address		
Telephone number		
9 Insolvency practitioner number		
Number		
10 Statement of appointment		
I confirm the appointment of the liquidator(s) on		
Date	2 9 0 3	2 0 2 0
11 Appointment details		
The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input 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 date	3 0 0 3	2 0 2 0

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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 **Donna Lee**

Company name **John Harlow Insolvency and Corporate Recovery**

Address **29 New Walk
Leicester**

Post town **LE1 6TE**

County/Region

Postcode

Country

DX

Telephone **0116 275 5021**

**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