

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 | 0 3 9 5 7 4 8 2 | → Filling in this form Please complete in typescript or in bold black capitals. |
| Company name in full | KS Project Management Limited | |
| 2 | Liquidator's name | |
| Full forename(s) | Timothy | |
| Surname | Heaselgrave | |
| 3 | Liquidator's address | |
| Building name/number | Darwin House | |
| Street | | |
| Post town | 7 Kidderminster Road | |
| County/Region | Bromsgrove | |
| Postcode | B 6 1 7 J J | |
| Country | | |
| 4 | Liquidator's email address or telephone number ^① | |
| Email address | | ① You must give an email address or telephone number. All information on this form will appear on the public record. |
| Telephone number | 01527 314050 | |
| 5 | Insolvency practitioner number | |
| Number | 9 1 9 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

| | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| d | 0 | d | 9 | m | 0 | m | 2 | y | 2 | y | 0 | y | 2 | y | 3 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

11 Appointment detailsThe appointment was made by
(Tick one)

- ☐ Company
☒ Creditors

12 Type of liquidation

Tick to confirm the liquidation type

- ☐ Members
☒ Creditors

13 Sign and date

Liquidator's signature

Signature

X

T Me

X

Signature date

| | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| d | 1 | d | 4 | m | 0 | m | 2 | y | 2 | y | 0 | y | 2 | y | 3 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

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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

The Timothy James Partnership
Ltd

Address

Darwin House

7 Kidderminster Road

Post town

Bromsgrove

County/Region

Postcode

B 6 1 7 J J

Country

DX

Telephone

01527 314050



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