

# 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](http://www.gov.uk/companieshouse)

### 1 Company details

Company number 0 5 6 3 9 1 5 2

Company name in full ART Delta Phillips Limited

#### → Filling in this form

Please complete in typescript or in  
bold black capitals.

### 2 Liquidator's name

Full forename(s) David

Surname Kerr

### 3 Liquidator's address

Building name/number 9 Ensign House

Street Admirals Way

Post town Marsh Wall

County/Region London

Postcode E 1 4 9 X Q

Country

### 4 Liquidator's email address or telephone number <sup>①</sup>

Email address

Telephone number 020 7538 2222

<sup>①</sup> 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 9 1 6 1

600

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## 6 Liquidator's name<sup>①</sup>

Full forename(s)

Surname

### ① Other Liquidator's details

Use this section to tell us about another liquidator.

## 7 Liquidator's address<sup>②</sup>

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<sup>③</sup>

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

<sup>d</sup> 1 <sup>d</sup> 7 <sup>m</sup> 0 <sup>m</sup> 3 <sup>y</sup> 2 <sup>y</sup> 0 <sup>y</sup> 2 <sup>y</sup> 3

## 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

Liquidator's signature

Signature

X 

X

Signature date

<sup>d</sup> 2 <sup>d</sup> 2 <sup>m</sup> 0 <sup>m</sup> 3 <sup>y</sup> 2 <sup>y</sup> 0 <sup>y</sup> 2 <sup>y</sup> 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

S F P

Address

9 Ensign House

Admirals Way

Post town

Marsh Wall

County/Region

London

Postcode

E 1 4 9 X Q

Country

DX

Telephone

020 7538 2222

## **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](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.gov.uk/companieshouse)**