

# 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

Company name in full

→ **Filling in this form**  
Please complete in typescript or in  
bold black capitals.

### 2 Liquidator's name

Full forename(s)

Surname

### 3 Liquidator's address

Building name/number

Street

Post town

County/Region

Postcode

Country

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

Email address

Telephone number

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

600

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## 6 Liquidator's name <sup>1</sup>

Full forename(s) Dean Anthony

Surname Nelson

**1 Other Liquidator's details**  
Use this section to tell us about another liquidator.

## 7 Liquidator's address <sup>2</sup>

Building name/number St. Helen's House

Street King Street

Post town Derby

County/Region Derbyshire

Postcode D E 1 3 E E

Country United Kingdom

**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 dean.nelson@smithcooper.co.uk

Telephone number 01332 332021

**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 9 4 4 3

## 10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date d 0 d 5 m 0 m 5 y 2 y 0 y 2 y 1

## 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 M. P. L. X

Signature date

d 0 d 6 m 0 m 5 y 2 y 0 y 2 y 1

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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 **Kimberley Waplington**

Company name **Smith Cooper**

Address **2 Lace Market Square**

Post town **Nottingham**

County/Region **Nottinghamshire**

Postcode **N G 1 1 P B**

Country **United Kingdom**

DX

Telephone **0115 945 4300**



## 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)