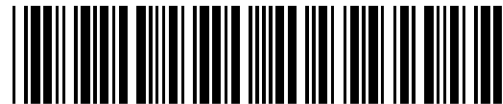




**Notice of Individual Person  
with Significant Control**

Company Name: **Private Health Insurance (NI) Ltd**

Company Number: **NI072414**



Received for filing in Electronic Format on the: **25/07/2017**

X6BETBBV

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## Notification Details

Date that person became **06/04/2016**  
registrable:

Name: **MR MICHAEL DOW**

Service Address: **55 THORNLEIGH GARDENS  
BANGOR  
CO DOWN  
UNITED KINGDOM  
BT20 4NW**

Country/State Usually  
Resident: **UNITED KINGDOM**

Date of Birth: **\*\*/12/1963**

Nationality: **BRITISH**

## **Nature of control**

The person holds, directly or indirectly, 75% or more of the shares in the company.

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## **Authorisation**

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor