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



Companies House



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A11

26/05/2020

#249

COMPANIES HOUSE

to

### 1 Company details

Company number 1 0 0 8 8 0 7 9

Company name in full Clath U.k. Limited

#### → Filling in this form

Please complete in typescript or in  
bold black capitals.

### 2 Liquidator's name

Full forename(s) Stephen

Surname Powell

### 3 Liquidator's address

Building name/number 8a Carlton Crescent

Street

Post town Southampton

County/Region

Postcode S O 1 5 2 E Z

Country

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

Email address Stephen.Powell@btguk.com

Telephone number 023 8021 9820

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 0 0 9 5 6 1



600

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<b>6</b>	<b>Liquidator's name <sup>①</sup></b>		<b>① Other Liquidator's details</b> Use this section to tell us about another liquidator.
Full forename(s)	Julie		
Surname	Palmer		<b>② Other Liquidator's details</b> Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
<b>7 Liquidator's address <sup>②</sup></b>			
Building name/number	Units 1-3 Hilltop Business Park		
Street	Devizes Road		
Post town	Salisbury		
County/Region	Wiltshire		
Postcode	S P 3 4 U F		
Country			
<b>8</b>	<b>Liquidator's email address or telephone number <sup>③</sup></b>		<b>③ You must give an email address or telephone number. All information on this form will appear on the public record.</b>
Email address	Julie.Palmer@btguk.com		
Telephone number	023 8021 9820		
<b>9</b>	<b>Insolvency practitioner number</b>		
Number	0 0 8 8 3 5		
<b>10</b>	<b>Statement of appointment</b>		
	I confirm the appointment of the liquidator(s) on		
Date	d 0 7 m 0 4 y 2 0 2 0		
<b>11</b>	<b>Appointment details</b>		
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors		
<b>12</b>	<b>Type of liquidation</b>		
	Tick to confirm the liquidation type <input type="checkbox"/> Members <input checked="" type="checkbox"/> Creditors		
<b>13</b>	<b>Sign and date</b>		
Liquidator's signature	Signature X  X		
Signature date	d 0 9 m 0 4 y 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

Stephen Powell

Company name

Begbies Traynor (Central) LLP

Address

8a Carlton Crescent

Post town

Southampton

County/Region

Postcode

S O 1 5 2 E Z

Country

DX

Telephone

023 8021 9820



## 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)