

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)

<b>1 Company details</b>	
Company number	0 2 7 4 4 9 6 5
Company name in full	EUROPEAN SHEETING LIMITED
<b>2 Liquidator's name</b>	
Full forename(s)	Victoria Louise
Surname	Galbraith
<b>3 Liquidator's address</b>	
Building name/number	Bridgestones
Street	125/127 Union Street
Post town	Oldham
County/Region	
Postcode	O L 1 1 T E
Country	United Kingdom
<b>4 Liquidator's email address or telephone number <sup>①</sup></b>	
Email address	mail@bridgestones.co.uk
Telephone number	0161 785 3700
<b>5 Insolvency practitioner number</b>	
Number	1 2 4 7 0

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

**① You must give an email address or  
telephone number. All information  
on this form will appear on the  
public record.**

600

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

## 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

d	2	d	7	m	0	m	4	y	2	y	0	y	2	y	2
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

## 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

d	2	d	8	m	0	m	4	y	2	y	0	y	2	y	2
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

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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

Victoria Galbraith

Company name

Bridgestones

Address

125/127 Union Street

Post town

Oldham

County/Region

Postcode

O L 1 1 T E

Country

United Kingdom

DX

Telephone

0161 785 3700



## 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)

## 600 - continuation page

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<b>1</b>	<b>Company details</b>	
Company number	<input type="text"/>	
Company name in full	<input type="text"/>	
	<input type="text"/>	
<b>2</b>	<b>Liquidator's name</b>	
Full forename(s)	<input type="text"/>	
Surname	<input type="text"/>	
<b>3</b>	<b>Liquidator's address</b>	
Building name/number	<input type="text"/>	
Street	<input type="text"/>	
	<input type="text"/>	
Post town	<input type="text"/>	
County/Region	<input type="text"/>	
Postcode	<input type="text"/>	
Country	<input type="text"/>	
<b>4</b>	<b>Liquidator's email address or telephone number</b> <sup>①</sup>	
Email address	<input type="text"/>	<b>①</b> You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	<input type="text"/>	
<b>5</b>	<b>Insolvency practitioner number</b>	
Insolvency practitioner number	<input type="text"/>	