

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

1		Company details									
Company number	0 0 3 7 5 7 1 1										
Company name in full	Clifton Clinic Limited										
→ Filling in this form Please complete in typescript or in bold black capitals.											
2		Liquidator's name									
Full forename(s)	Bijal										
Surname	Shah										
3		Liquidator's address									
Building name/number	27 Church Street										
Street											
Post town	Rickmansworth										
County/Region	Hertfordshire										
Postcode	W D 3 1 D E										
Country											
4		Liquidator's email address or telephone number ^①									
Email address	bijal.shah@edgerecovery.com										
Telephone number	+44 (0)1923 776 223										
5		Insolvency practitioner number									
Number	8 7 1 7										

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

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6 Liquidator's name		Other Liquidator's details Use this section to tell us about another liquidator
Full forename(s)		
Surname		
7 Liquidator's address		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.
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		
8 Liquidator's email address or telephone number		You must give an email address or telephone number. All information on this form will appear on the public record.
Email address		
Telephone number		
9 Insolvency practitioner number		
Number		
10 Statement of appointment		
I confirm the appointment of the liquidator(s) on		
Date	<div>1</div> <div>4</div> <div>1</div> <div>0</div> <div>2</div> <div>0</div> <div>2</div> <div>0</div>	
11 Appointment details		
(Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors		
The appointment was made by		

12

Type of liquidation

- ☒ Members
☐ Creditors

Tick to confirm the liquidation type

13

Sign and date

Liquidator's signature

X



X

Signature

Signature date

20

10

2020

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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.

Bijal Shah

Edge Recovery Limited

27 Church Street

Rickmansworth

Hertfordshire

Postcode

W

D

3

1

D

E

DX

+44 (0)1923 776 223



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 or email 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