

# 600

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



Companies House

SATURDAY



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A22

03/04/2021

#152

COMPANIES HOUSE

### 1 Company details

Company number 0 9 8 2 3 9 3 2

Company name in full The Granulation Company Limited

→ Filling in this form

Please complete in typescript or in  
bold black capitals.

### 2 Liquidator's name

Full forename(s) Peter John

Surname Harold

### 3 Liquidator's address

Building name/number Suite 6

Street 1-7 Taylor Street

Post town Bury

County/Region

Postcode B L 9 6 D T

Country

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

Email address

Telephone number 01204 238236

<sup>①</sup> 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 1 0 8 1 0



600

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**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	d	m	m	y	y	y	y
3	1	0	3	2	0	2	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** **X**

Signature date

d	d	m	m	y	y	y	y
0	1	0	4	2	0	2	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 **Jessica Hodgson**

Company name **Bespoke Insolvency Solutions**

Address **Suite 6**

**1-7 Taylor Street**

Post town **Bury**

County/Region

Postcode **B L 9 6 D T**

Country

DX

Telephone **01204 238236**



## 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)

