

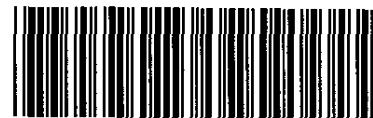
600

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



Companies House

SATURDAY



\*A74C2HE1\*

A29

21/04/2018

#114

COMPANIES HOUSE

**1** Company details

Company number 0 5 7 6 6 9 6 9 /

Company name in full Basware Solutions Limited /

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

**2** Liquidator's name

Full forename(s) Mark

Surname Newman /

**3** Liquidator's address

Building name/number 4 Mount Ephraim Road

Street Tunbridge Wells

Post town Kent

County/Region

Postcode T N 1 1 E E

Country

**4** Liquidator's email address or telephone number ①

Email address Mark.Newman@crowecw.co.uk

Telephone number 01892 700200

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 8 7 2 3

600

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

## 6 Liquidator's name <sup>①</sup>

Full forename(s) Vincent John

Surname Green

**① Other Liquidator's details**  
Use this section to tell us about another liquidator.

## 7 Liquidator's address <sup>②</sup>

Building name/number 4 Mount Ephraim Road

Street Tunbridge Wells

Post town Kent

County/Region

Postcode T N 1 1 E E

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 Vince.Green@crowecw.co.uk

Telephone number 01892 700200

**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 0 0 9 4 1 6

## 10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date 1 6 0 4 2 0 1 8

## 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

1 7 0 4 2 0 1 8

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



## 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	Mark Newman
Company name	CCW Recovery Solutions
Address	4 Mount Ephraim Road Tunbridge Wells
Post town	Kent
County/Region	
Postcode	T N 1 1 E E
Country	
DX	
Telephone	01892 700200



## 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)