

FINANCING STATEMENT DETAILS

Financing Statement Registration No: FA865YR022N4749V/C0002
Time of Registration: 02-Feb-2015 15:55:20
Time of Change: 11-Feb-2015 00:41:16
Date of Expiry: 02-Feb-2020 15:55:20
Status: Registered

DEBTOR

Organisation Name: MUSE ON ALLEN LIMITED
Organisation Type: Company
Incorporation Number: 3933441

Debtor Reference: 0000949336
Email Address: samuel@muserestaurant.co.nz
Fax:
Contact Telephone No: 04-3841181

Contact Address: 21 WHA STREET
Suburb: LYALL BAY
City/Town: WELLINGTON
Post Code: 6022
Country: New Zealand

Mailing Address:
Suburb:
City/Town:
Post Code:
Country:

Person Acting on behalf of:

First Name: SAMUEL
Middle Names:
Last Name: NORTH
Email Address: samuel@muserestaurant.co.nz
Fax:
Contact Telephone No: 64-04-3841181
Contact Address: 21 WHA STREET
Suburb: LYALL BAY

City/Town: WELLINGTON
Post Code: 6022
Country: New Zealand

Mailing Address:
Suburb:
City/Town:
Post Code:
Country:

COLLATERAL (Current)

Collateral Type: Goods - Motor Vehicles

[Collateral History](#)

Registration: HYE837
Vin: WBAPC72020WG59433
Chassis: WBAPC72020WG59433
Make: BMW
Model: X3
Year: 2007
Colour: BLACK
Description: BMW X3 2007 Reg HYE837 Vin WBAPC72020WG59433

[Item History](#)

COLLATERAL (Removed)

No removed collateral found

SECURED PARTY

Organisation Name: MOTOR TRADE FINANCES LIMITED

Email Address: ppsr@mtf.co.nz

Fax: +64(3)471-7203

Contact Telephone No: (03) 477 0530

Contact Address: PO BOX 885

Suburb:

City/Town: DUNEDIN

Post Code:

Country: New Zealand

Mailing Address:

Suburb:

City/Town:

Post Code:

Country:**Person Acting on behalf of:**

First Name: PPSR
Middle Names:
Last Name: ADMINISTRATOR
Email Address: ppsr@mtf.co.nz
Fax: +64(3)471-7203
Contact Telephone No:
Contact Address: PO BOX 885
Suburb:
City/Town: DUNEDIN
Post Code:
Country: New Zealand

Organisation Name: SPINKS BROWN LIMITED

Email Address: ppsr@mtf.co.nz
Fax: +64(3)471-7203
Contact Telephone No: (03) 477 0530

Contact Address: PO BOX 885
Suburb:
City/Town: DUNEDIN
Post Code:
Country: New Zealand

Mailing Address:

Suburb:
City/Town:
Post Code:
Country:

Person Acting on behalf of:

First Name: PPSR
Middle Names:
Last Name: ADMINISTRATOR
Email Address: ppsr@mtf.co.nz
Fax: +64(3)471-7203
Contact Telephone No:
Contact Address: PO BOX 885
Suburb:
City/Town: DUNEDIN
Post Code:
Country: New Zealand

Organisation Name: TRUSTEES EXECUTORS LIMITED

Email Address: tel.ppsa@trustees.co.nz

Fax: +64(3)471-7203

Contact Telephone No: 03 477-0530

Contact Address: LEVEL 5 MARITIME TOWER

Suburb: 10 CUSTOMHOUSE QUAY

City/Town: WELLINGTON

Post Code:

Country: New Zealand

Mailing Address:

Suburb:

City/Town:

Post Code:

Country:

Person Acting on behalf of:

First Name: THE PPSR

Middle Names:

Last Name: ADMINISTRATOR

Email Address: tel.ppsa@trustees.co.nz

Fax: +64(3)471-7203

Contact Telephone No:

Contact Address: LEVEL 5 MARITIME TOWER

Suburb: 10 CUSTOMHOUSE QUAY

City/Town: WELLINGTON

Post Code:

Country: New Zealand