



Sole Member Funds: The member must be one of two people acting as trustee. Alternatively, the trustee may be a company in which the member of the fund is the sole director or one of only two directors.

All Other Funds (maximum of 4 members): All members must be trustees and all the trustees must be members. Alternatively, if a corporate trustee is used then all members must be directors of the trustee company and all directors must be members of the Fund.

SUPERFUND NAME

Name of superannuation entity

State of Fund

CORPORATE TRUSTEE DETAILS

Trustee Name ACN Chairman for the minutes (if company) Street No. and Name Suburb/City Postcode

MEMBER/TRUSTEE 1

Given Names	Surname
Gender	
Street No. and Name	
Suburb/City	State/Territory
Postcode	Country (if not Australia)

MEMBER/TRUSTEE 2

Given Names
Gender
Street No. and Name
Suburb/City
Postcode

MEMBER/TRUSTEE 3

Given Names	
Gender	
Street No. and Name	
Suburb/City	
Postcode	

MEMBER/TRUSTEE 4

Given Names Gender Street No. and Name Suburb/City Postcode Surname

Surname

State/Territory

Country (if not Australia)

State/Territory

Country (if not Australia)

State/Territory Country (if not Australia)

Surname

State/Territory Country (if not Australia)



ADDITIONAL SERVICES (if required please also complete page 3 of this form)

Would you like your documents printed, bound and delivered?

Do you require stamping? South Australia only

Do you require registration for an ABN?

Do you wish to register a business name to trade under - 1 year?

Do you wish to register a business name to trade under - 3 years?

For pricing, please refer to our online price list (Click Here)

ADDITIONAL NOTES

Provide additional notes and/or instructions

DECLARATIONS

Appointment of Agent

To ABN Australia: You are appointed to act as our agent to procure a Trust Deed and ancillary legal documentation from a solicitor, the particulars for such trust deed and legal documents being set out hereinbefore. In consideration for you acting as our agent, payment of solicitors costs, attending to compliation of materials in a register and delivery of same we shall pay you such amounts as agreed.

Legal Disclaimer

Disclaimer – We do not provide legal, accounting, financial or stamp duty advice and therefore take no responsibility for your taxation, legal or other liabilities which may arise from the work we perform on your instructions. We urge you to first obtain legal and accounting advice in relation to your affairs and in particular this transaction.

APPLICANT DETAILS

Firm/organisation (if appl	icable)			
Please select your industr	ry type			
Contact Person		Phone Number		
Email Address				
Street No. and Name				
Suburb/City		State/Territory		
Postcode		Country (if not Australia)		
PAYMENT DETAI	LS			
Total Value of Order (\$)				
Payment Method	Visa	Mastercard	Bank Transfer	

.,							
Name of Cardholder	Cre	edit Card Number					
Expiry		CCV					
BANK ACCOUNT DETAILS							
Please make bank transfers to:							

Bank: ANZ Banking Group

BSB: 015-056

Account: 225324305

Ref: Please use name of Trust



ABN REGISTRATION

Describe your main business activities (in detail)

Authorised Email Address Authorised Contact Person Authorised Phone Number Est. annual turnover (\$)

Wish to apply for GST? GST accounting method

BUSINESS NAME REGISTRATION

Business Name Contact Email Address Contact Person

DOMAIN NAME REGISTRATION

Domain Name Contact Person Contact Email Address Domain Suffix

Contact Phone Number

ABN & BUSINESS NAME REGISTRATION DECLARATION

Business Name Registration

I declare that ABNAustralia.com.au (ABN 58 615 782 799) is, if required, authorised to submit a business name application to the Australian Securities & Investments Commission (ASIC) on my behalf. I understand that ABNAustralia.com.au will utilise information supplied by me in this form to apply for a business name as instructed.

ABN Registration

I also declare that ABNAustralia.com.au is, if required, authorised to submit an ABN application to the Australian Tax Office on my behalf. I confirm that I have received the consent of all individuals referred to in this application form, to the submission of their personal information contained in this form to ABNAustralia.com.au and to the ATO and ASIC as necessary to process this application. I also confirm:

- I am not disqualified from managing corporations under Section 206B(1) of the Corporations Act 2001.
- Within the last 5 years I have not been convicted of, or released from prison after being convicted of, and serving a term of imprisonment for, any of the criminal offences referred to in Section 32(1)(c) or (d) of the Business Names Registration Act 2011.
- This application is submitted under, and is compliant with, the terms and conditions of the ASIC Electronic Lodgement Protocol.
- The information supplied is, to the best of my knowledge, accurate and complete.
- I understand the best structure for my business (Company).
- I have the TFN, date of birth and name, OR name, address and date of birth for all key people in my business.
- I am not applying just because I have been asked to get an ABN as a condition of employment.
- I meet a number of the key characteristics of a business, or will once started, for example sourcing my own clients, I can delegate
 my work to others if I choose, I will invoice for my work and set my rate of pay, I will have a bank account for my business separate
 from my own bank account, I am responsible for my own public liability, professional indemnity and/or workers compensation/
 income protection insurance.
- I can provide evidence that I am entitled to an ABN if requested.
- To provide true and correct information in my ABN application. Penalties of up to \$12,600 can apply for each false or misleading statement made in an ABN application.
- Once I have an ABN I must keep it up to date (within 28 days of any change) and cancel it once I am no longer trading or carrying on an enterprise.

ADDITIONAL NOTES

Provide additional notes and/or instructions