

Campaign Code (if applicable)

THE SERVICE

About the service

A fully integrated, flexible and comprehensive SMSF borrowing arrangement documentation service for the purchase of property by your SMSF which includes:

- Written resolutions to establish the arrangement and appoint the Holding Trustee
- Holding Trust Deed (Bare Trust)
- Detailed information pack, including guidelines for conveyancers
- Stamping pack
- Lease pack
- Loan agreement and mortgage documentation (related party loans)
- Step by step completion instructions

For more information

If you have any questions about the service or completing this form

Visit our website www.superconcepts.com.au

Call us on 1300 023 170

Email us at trusteeservices@superorganised.com.au

APPLYING FOR THE SERVICE

Complete this form

- ▶ Please write clearly and use black pen to complete the form.
- ▶ Please mark boxes like this with a ✓ or ✗.
- ▶ Where you see a box like this ▶ skip to the section shown.
- ▶ Please ensure that you complete all required sections, provide all supporting documents and have signed and dated this form.

Return this form

Please check to ensure that you have answered all required sections, provided supporting documents and signed and dated this form.

By mail: SuperConcepts

By fax: 1300 660 528

PO Box R476, Royal Exchange NSW 1225

By email: trusteeservices@superorganised.com.au

1. FUND DETAILS

Fund name

Fund ABN

Fund establishment date

 / /

SuperConcepts Fund ID

2. FUND TRUSTEE DETAILS

▶ Individual Trustee/s - Go to Section 4

or

▶ Existing Trustee Company - Go to Section 3

3. EXISTING FUND TRUSTEE COMPANY DETAILS

Full company name

ACN - -

Please attach a copy of the current ASIC company statement to confirm Directors and registered office details.

4. FUND STRUCTURE

TRUSTEE 1 Individual Trustee or Director of Trustee Company

Name

Residential Address

TRUSTEE 2 Individual Trustee or Director of Trustee Company

Name

Residential Address

TRUSTEE 3 Individual Trustee or Director of Trustee Company

Name

Residential Address

TRUSTEE 4 Individual Trustee or Director of Trustee Company

Name

Residential Address

5. HOLDING TRUSTEE DETAILS

Important: The Holding Trustee/s cannot be the same individuals/company as the SMSF Trustee/s.

Individual Trustee/s - Go to Section 8

Existing Trustee Company - Go to Section 6

New Trustee Company - Go to Section 7

6. EXISTING COMPANY TO ACT AS HOLDING TRUSTEE COMPANY

Your SMSF Trustee Company cannot be the Holding Trustee. If you would like to establish a new company to act as Holding Trustee, please complete section 7.

Full Company Name

ACN - -

Registered office address

Go to Section 8

7. ESTABLISHING A NEW COMPANY TO ACT AS HOLDING TRUSTEE

Please do not use this service if you wish to order a Company for purposes other than to act as Holding Trustee.

- It is your responsibility to ensure that your company name does not conflict with any existing company name, business name, trade mark or domain name. Please refer to the ASIC Check Name Availability Search and to IP Australia's Trade Mark On-line Search System for assistance.
- If the preferred company name is identical to that of an Australian registered business and the owner(s) of that business is one of the Directors below, the business number and registered state must be supplied in order to complete incorporation.
- The Company will be registered with ASIC as Propriety Limited Company.
- Ordinary Shares will be issued and allocated to each Director in equal proportions.
- A Company Seal will not be issued (not required under the *Corporations Act 2001*).
- Each person must provide their written consent to act as a Director and Shareholder prior to appointment (provided for on this Order Form).

Preferred company name	<input type="text"/>	
Alternate preferred name	<input type="text"/>	
Registered business number	State of registration	<input type="text"/>
Registered office address	<input type="text"/>	
Name of occupier	<input type="text"/>	
Principal business address	<input type="text"/>	
	<input type="checkbox"/> Go to Section 8	

By signing, each Trustee nominated in Section 8, consents to act as Director of the Company.

8. HOLDING TRUSTEE DETAILS

HOLDING TRUSTEE 1	<input type="checkbox"/> Individual Trustee	<input type="checkbox"/> Director of Existing Company	<input type="checkbox"/> Director of New Company
Name	<input type="text"/>		
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Residential address	<input type="text"/>		
Phone	<input type="text"/>		
Email	<input type="text"/>		
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Place of birth	City <input type="text"/>	State <input type="text"/>	Country <input type="text"/>
Signature	<input type="text"/>	Note: A signature is only required if a New Holding Trustee Company is being established in section 7.	
	X		
HOLDING TRUSTEE 2	<input type="checkbox"/> Individual Trustee	<input type="checkbox"/> Director of Existing Company	<input type="checkbox"/> Director of New Company
Name	<input type="text"/>		
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Residential address	<input type="text"/>		
Phone	<input type="text"/>		
Email	<input type="text"/>		
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Place of birth	City <input type="text"/>	State <input type="text"/>	Country <input type="text"/>
Signature	<input type="text"/>	Note: A signature is only required if a New Holding Trustee Company is being established in section 7.	
	X		

8. HOLDING TRUSTEE DETAILS (CONTINUED)

HOLDING TRUSTEE 3

Individual Trustee Director of Existing Company Director of New Company

Name

Gender

Male Female

Residential address

Phone

Email

Date of birth

Place of birth

City State Country

Signature

Note: A signature is **only** required if a New Holding Trustee Company is being established in section 7.

HOLDING TRUSTEE 4

Individual Trustee Director of Existing Company Director of New Company

Name

Gender

Male Female

Residential address

Phone

Email

Date of birth

Place of birth

City State Country

Signature

Note: A signature is **only** required if a New Holding Trustee Company is being established in section 7.

9. PROPERTY DETAILS

Type of Property Residential Commercial

Address

Purchase Price \$

Title Reference (refer to purchase contract)

Is this an off the plan purchase? Yes No

Are you purchasing 100% of the property? Yes No

Full Vendor Name(s)

ACN (if applicable) - -

10. LOAN DETAILS

Is this the only loan being used to acquire the property? Yes No

If no, please specify

Are there any other mortgages on this property? Yes No

If yes, please specify

Is the vendor associated, related or connected with the Fund in any way? Yes No

If yes, please describe the relationship

Is this a Div. 7A loan? Yes No

Commercial Lender

Please complete if you are borrowing from a financial institution.

Lender Name

Go to Section 11

Related Party Loan

Please complete if a related party (e.g. member, member family trust or company) is the lender.

Lender Name(s)

Lender Company (if applicable)

ACN (if applicable) - -

Lender Address

Amount to be borrowed \$ Period of loan yrs

Initial Interest Rate % Fixed Variable

Principal and interest Interest Only

Default Interest Rate (please specify the number of basis points above the RBA cash rate) bps

11. DELIVERY - BORROWING ARRANGEMENT KIT

We provide an electronic copy of the kit free of charge, please indicate if you would like additional Hard Copy format.

Hard Copy – \$50 additional fee

12. FEES (prices quoted are inclusive of GST)

	Fees
Commercial Lender	\$880
Related Party Lender	\$1,540
Corporate trustee incorporation	\$880
Optional Hard Copy delivery of documents	\$50

13. PAYMENT DETAILS

Cheque

Please enclose a cheque made payable to “**SuperConcepts Administration**”.

Credit Card

Type of card	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	Amount	\$	<input type="text"/>
Credit card number	<input type="text"/>				
CCV	<input type="text"/>	Expiry date	<input type="text"/>	/	<input type="text"/>
Name on card	<input type="text"/>				
Signature	<input type="text" value="X"/>				

Electronic Funds Transfer (EFT)

Account Name: SuperConcepts
BSB: 032-099
Account number: 615086
Please quote: Your Superannuation Fund Name (as detailed in **section 1**)

14. PRIMARY CONTACT DETAILS

These details will be used for all correspondence, contact, delivery and billing purposes.

<input type="checkbox"/> Trustee	<input type="checkbox"/> Nominated representative e.g. Adviser (please specify)				
<input type="text"/>					
Name	<input type="text"/>				
Company	<input type="text"/>				
Dealer Group	<input type="text"/>				
Address	<input type="text"/>				
Postal Address	<input type="text"/>				
Phone	<input type="text"/>	Fax	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>				

15. CHECKLIST

Before submitting your application please ensure you have:

- Attached a copy of the current ASIC statement for your Fund Trustee Company (if you answered "Existing Trustee Company" in **section 3**)
- If you are establishing a New Holding Trustee Company, that all member details sections are complete with each member signing against their details (refer to **section 8**)
- Attached a copy of the current ASIC statement for your Holding Trustee Company (if you answered "Existing Company" in section 6)
- Attached a copy of the Contract of Sale (if you have completed Section 9)
- Included payment details (refer to **section 13**)

Important Note: Providing incomplete details will delay the processing of your application. Please ensure that you have completed all relevant sections and provided all additional information where required.

16. DECLARATION

By signing below, I, on behalf of the trustees of the Fund:

- declare that I am authorised to make declarations on behalf of the persons named in this application form;
- declare that the information completed on this Application Form is complete and to the best of my knowledge, accurate and correct. To the extent that any information is subsequently identified as incorrect or found to be omitted from this Application Form, I authorise SuperConcepts to correct any errors and complete any omissions on this Application Form, following my confirmation (either orally or in writing);
- acknowledge that I have read and understood the Terms and Conditions for the Service and the Service Material, as updated from time to time, and agree to be bound by them;
- have read and understood the Fee Schedule applicable for the Services, found at www.superconcepts.com.au as updated from time to time and agree to be bound by them;
- authorise the collection, use and disclosure of my personal information for the purpose of the assessment of the application and if accepted, the management and administration of services in which I have applied. I understand that unless I consent to the collection, use and disclosure of this information, SuperConcepts will not be able to process my application or deliver the relevant Service(s);
- understand that SuperConcepts may routinely disclose my personal information to third parties such as: organisations undertaking compliance functions of SuperConcepts' information; organisations maintaining SuperConcepts' information technology system; authorised financial institutions; organisations providing mailing and printing services and my nominated representative (if applicable); and,
- accept that SuperConcepts or any of its related bodies corporate may send me information about its services from time to time. I understand that I may notify SuperConcepts of my decision not to receive further information by contacting SuperConcepts directly.
- If you are applying to set up a new Company to act as Holding Trustee, by signing below:
 - I confirm that the persons named above have consented to act as a Director of the Holding Trustee Company.
 - I confirm that no person has become disqualified from acting as a Director of the Holding Trustee Company.

Signature

X

Date

/ /

Print Name

Mailing address PO Box R476
Royal Exchange NSW 1225
Phone 1300 023 170
Fax 1300 660 528
Email trusteeservices@superorganised.com.au
Website superconcepts.com.au



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