

Campaign Code (if applicable)

## THE SERVICE

### About the service

Our Fund Establishment only service includes everything you need to get your SMSF up and running and includes:

- SuperConcepts comprehensive and highly flexible SMSF Trust Deed
- Member packs (including application forms, pro-forma Product Disclosure Statements and binding death nomination forms) and
- Relevant letters, minutes & templates (including a sample fund investment strategy)
- Application to the ATO to register the Fund for an ABN & TFN if required.

If you require a Sole Purpose SMSF Trustee Company to be incorporated, SuperConcepts can facilitate this process for you. Simply complete the relevant sections on the application form and pay the additional fee.

If you require annual accounting, regulatory and ATO compliance services, please visit [superconcepts.com.au](http://superconcepts.com.au)

### For more information

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

Visit our website [superconcepts.com.au](http://superconcepts.com.au)

Call us on 1300 023 170

Email us at [trusteeservices@superorganised.com.au](mailto: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 X.
- ▶ 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

By mail: SuperConcepts  
GPO Box 9981, Adelaide SA 5001

By email: [trusteeservices@superorganised.com.au](mailto:trusteeservices@superorganised.com.au)

## 1. FUND DETAILS

Any name can be used, but it is best to keep it simple and concise. Please be very precise in relation to spelling and use of capital letters, abbreviations and spaces. Full stops should be avoided. It is not necessary to include 'The' as the first word of your fund name.

The ATO recommend including words or letters to denote the Fund as a Super Fund - for example; SMSF, Super Fund or Superannuation Fund.

Fund name

Please indicate if you require SuperConcepts to complete the ABN & TFN application for your fund.

## 2. FUND TRUSTEE DETAILS

▶ Individual Trustee/s - Go to **section 5**

or

▶ Existing Trustee Company - Go to **section 3**

▶ New Trustee Company - Go to **section 4**

### 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.

Go to section 5

### 4. NEW SOLE PURPOSE SMSF TRUSTEE COMPANY DETAILS

Please do not use this service if you wish to order a Company for purposes other than being a trustee of a SMSF

- 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 a Sole Purpose SMSF Trustee Company.
- All Directors will be issued with ten (10) Ordinary Shares as standard unless otherwise advised.
- 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).
- All directors of a SMSF corporate trustee (special purpose company), are required to obtain a Director Identification Number (director ID) before being appointed as Director. Please ensure each individual has obtained their director ID through myGovID and provided this where requested before submitting your application.

Preferred company name  Pty Ltd

Alternate preferred name  Pty Ltd

Registered business number  State of registration  Please select

Registered office address

Name of occupier

Principal business address

By signing, each person nominated in section 5, consents to act as Director of the Sole Purpose SMSF Trustee Company.

### 5. FUND STRUCTURE

A self managed fund is limited to four (4) members or less and **all** members must be Trustees as individuals or as Director/s of a Trustee Company. The first named Director will be appointed as Public Officer and Secretary where a new SMSF Trustee Company is requested.

If the fund has only one member and the Trustee is **not** a company there **must be one other individual Trustee**. Alternatively, where there is a **Corporate Trustee**, a **second Director** can be appointed. This person can be a relative **or** any other person who is not an employer of the member.

#### TRUSTEE 1

Capacity  Individual Trustee or  Director of Trustee Company

Fund member  Yes or  No

Name

Gender  Male  Female

Residential address

Phone -- Email

Tax File Number -- **Note:** Please refer to page 5 for our Tax File Number Collection Notice.

Director ID  Date of birth

Place of birth City  State  Country  Please select

Type and quantity of Shares to be issued if standard allocation listed in section 4 is not suitable

Signature

X

**Note:** Place of birth is only required if a New Sole Purpose SMSF Trustee Company is being established in section 4.

5. FUND STRUCTURE (CONTINUED)

TRUSTEE 2

Capacity  Individual Trustee or  Director of Trustee Company

Fund member  Yes or  No Gender  Male  Female

Name

Residential address

Phone           Email

Tax File Number    -    -     **Note:** Please refer to page 5 for our Tax File Number Collection Notice.

Director ID  Date of birth

Place of birth City  State  Country

Type and quantity of Shares to be issued if standard allocation listed in section 4 is not suitable

Signature  **Note:** Place of birth is only required if a New Sole Purpose SMSF Trustee Company is being established in section 4.

TRUSTEE 3

Capacity  Individual Trustee or  Director of Trustee Company

Fund member  Yes or  No Gender  Male  Female

Name

Residential address

Phone           Email

Tax File Number    -    -     **Note:** Please refer to page 5 for our Tax File Number Collection Notice.

Director ID  Date of birth

Place of birth City  State  Country

Type and quantity of Shares to be issued if standard allocation listed in section 4 is not suitable

Signature  **Note:** Place of birth is only required if a New Sole Purpose SMSF Trustee Company is being established in section 4.

TRUSTEE 4

Capacity  Individual Trustee or  Director of Trustee Company

Fund member  Yes or  No Gender  Male  Female

Name

Residential address

Phone           Email

Tax File Number    -    -     **Note:** Please refer to page 5 for our Tax File Number Collection Notice.

Director ID  Date of birth

Place of birth City  State  Country

Type and quantity of Shares to be issued if standard allocation listed in section 4 is not suitable

Signature  **Note:** Place of birth is only required if a New Sole Purpose SMSF Trustee Company is being established in section 4.

## 6. FEES (prices quoted are inclusive of GST)

	Fees
Fund Establishment service	<input type="checkbox"/> \$485
Establishing a Sole Purpose Company to act as Trustee	<input type="checkbox"/> \$880
<b>Optional</b> – Hard copy delivery of documents <i>We provide an electronic copy of the kit free of charge. Please indicate if you would like an additional hard copy format.</i>	<input type="checkbox"/> \$50

## 7. PAYMENT DETAILS

**Please note:** If you are an existing administration client of SuperConcepts we will invoice your fund directly. If SuperConcepts is not your administrator, we require payment upfront before proceeding with the request. Non-Administration clients must indicate their preferred payment method below.

**Credit Card payment**

We will call you once you have submitted the application to arrange payment over the phone.

**Please note,** this expense can be reimbursed from the fund.

**Electronic Funds Transfer (EFT)** – Please provide a copy of the payment confirmation receipt (**Please note:** Non-Administration clients must contact our office to arrange payment via EFT)

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

## 8. PRIMARY CONTACT DETAILS

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

**Trustee**

**Nominated representative** e.g. Adviser (please specify below)

Name

Company

Dealer group

Address

Postal address

Phone

Email

Mobile

Fax

## 9. CHECKLIST

Before submitting your application, please ensure you have:

- Attached a copy of the current ASIC statement (if you answered “Existing Trustee Company” in **section 3**)
- Completed all trustee & member details, including signatures, if you are establishing a new Sole Purpose Trustee Company (refer to **sections 4 & 5**)
- Included payment details (refer to **section 7**)
- Ensure each Director has provided their individual Director ID.

**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.

## 10. PRIVACY NOTICE

We collect personal information from you, from other members of the fund or from a financial planner or broker. We collect your name, contact information, date and place of birth, and your gender.

We collect your personal information to provide SMSF administration services. We also collect and use your personal information for direct marketing purposes.

We may be required by law to collect your personal information. Various financial services laws may apply and include Corporations, Superannuation and Taxation Law.

Besides our staff, we share this information with:

- external service providers who both here and overseas, the countries where they are likely to be located can be accessed via our privacy policy
- regulators such as the ATO
- other members of your fund, your financial planner or broker (if any)
- anyone else you authorise or if required by law.

Providing some information is optional. If you choose not to provide required personal information, we'll be unable to provide the services you are applying for.

Our privacy policy available at [superconcepts.com.au/privacy](https://superconcepts.com.au/privacy) explains how you can access or update your personal information or make a complaint about a breach or potential breach of our privacy obligations. You can contact us at 1300 023 170.

## 11. TAX FILE NUMBER COLLECTION NOTICE

Under the Taxation and Superannuation Laws, we are authorised to collect, use and disclose your Tax File Number (TFN). If you transfer your superannuation to another SMSF administrator or fund, we will give them your TFN, unless you tell us not to in writing.

You do not have to give us your TFN, however by providing your TFN we can accept all permitted types of contributions, apply ordinary tax rates and it will assist to locate all your superannuation accounts, making it easier to combine accounts.

If you don't provide us your TFN:

- Contributions from your before-tax salary will be taxed at up to 47%
- You won't be able to make after-tax contributions to your super
- You may not receive any co-contributions to which you're entitled
- It may be more difficult to find your super if you change address without notifying us or to combine any multiple super accounts you may have.

## 12. DECLARATION

By signing below, I, on behalf of the trustees (or prospective Trustees) of the Fund:

- declare that I am authorised to make declarations on behalf of the persons (and prospective Trustees) 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](https://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.

Signature

Print Name

Date