

ESTABLISHMENT OF BARE TRUST WITH A CORPORATE TRUSTEE

Name of Your SMSF:

SMSF Trustee:

Directors' Names:

Primary Contact's Name, Ph & email:

BARE TRUST & TRUSTEE DETAILS

Proposed Company Name:



We recommend checking the name availability with ASIC by clicking on the logo & searching within "Organisation & Business Names" from the dropdown

Bare Trust Name:

(If left blank we will nominate a name similar to the Bare Trust Company name nominated. ie. XYZ Holding Trust / XYZ Bare Trust)

Place of Business (not a PO Box):

Note: This will also be the Registered Office unless advised otherwise.

Street Address:

Suburb:

State:

Postcode:

Do you nominate Green Frog Super as the ASIC Agent for the company? Yes No

If Yes, a fee of \$55pa is applicable and will be the default response if left blank.

Registered Office Address:

(If left blank this will default to the Place of Business nominated above)

Does the Company occupy the premises? Yes No

If not, who occupies the premises?

Does the Company have the occupier's consent for the premises? Yes No

CORPORATE SHAREHOLDING

Share Ownership:

(Who is to own the shares? We will assume 'directors in equal shares' if left blank)

Share Class: ORD (Ordinary shares):

If other, please specify:

No. of shares:

Price per share: \$

N.b. will assume 10 x \$1.00 shares if left blank

Are the shares beneficially held? Yes No

Yes

No

ie. if they are held on your own behalf & you are to receive the direct benefit from the shares, they are beneficially held (most common). If they are held in trust or for the benefit of someone else, select No.

OFFICE HOLDERS

N.b. The first Officeholder (Director 1) will default as the Chairperson and Public Officer.

Please provide a separate Email address and mobile number per person for Online Portal access.

DIRECTOR 1

Title ie. Mr/Ms	<input type="text"/>	D.O.B	<input type="text"/>
First Name	<input type="text"/>		
Preferred Name	<input type="text"/>		
Middle Name	<input type="text"/>		
Surname	<input type="text"/>		
TFN	<input type="text"/>		
Mobile	<input type="text"/>		
Email	<input type="text"/>		
Country of Birth	<input type="text"/>		
State of Birth	<input type="text"/>		
City of Birth	<input type="text"/>		
Director ID	<input type="text"/>		
<i>Required before applying for a Corporate TTEE</i>			
Residential address	<input type="text"/>		
<i>If different to the SMSF address</i>			
Director / Secretary:	<input type="checkbox"/>	Share Holder:	<input type="checkbox"/>

DIRECTOR 2

Title ie. Mr/Ms	<input type="text"/>	D.O.B	<input type="text"/>
First Name	<input type="text"/>		
Preferred Name	<input type="text"/>		
Middle Name	<input type="text"/>		
Surname	<input type="text"/>		
TFN	<input type="text"/>		
Mobile	<input type="text"/>		
Email	<input type="text"/>		
Country of Birth	<input type="text"/>		
State of Birth	<input type="text"/>		
City of Birth	<input type="text"/>		
Director ID	<input type="text"/>		
<i>Required before applying for a Corporate TTEE</i>			
Residential address	<input type="text"/>		
<i>If different to the SMSF address</i>			
Director / Secretary:	<input type="checkbox"/>	Share Holder:	<input type="checkbox"/>

DIRECTOR 3

Title ie. Mr/Ms	<input type="text"/>	D.O.B	<input type="text"/>
First Name	<input type="text"/>		
Preferred Name	<input type="text"/>		
Middle Name	<input type="text"/>		
Surname	<input type="text"/>		
TFN	<input type="text"/>		
Mobile	<input type="text"/>		
Email	<input type="text"/>		
Country of Birth	<input type="text"/>		
State of Birth	<input type="text"/>		
City of Birth	<input type="text"/>		
Director ID	<input type="text"/>		
<i>Required before applying for a Corporate TTEE</i>			
Residential address	<input type="text"/>		
<i>If different to the SMSF address</i>			
Director / Secretary:	<input type="checkbox"/>	Share Holder:	<input type="checkbox"/>

DIRECTOR 4

Title ie. Mr/Ms	<input type="text"/>	D.O.B	<input type="text"/>
First Name	<input type="text"/>		
Preferred Name	<input type="text"/>		
Middle Name	<input type="text"/>		
Surname	<input type="text"/>		
TFN	<input type="text"/>		
Mobile	<input type="text"/>		
Email	<input type="text"/>		
Country of Birth	<input type="text"/>		
State of Birth	<input type="text"/>		
City of Birth	<input type="text"/>		
Director ID	<input type="text"/>		
<i>Required before applying for a Corporate TTEE</i>			
Residential address	<input type="text"/>		
<i>If different to the SMSF address</i>			
Director / Secretary:	<input type="checkbox"/>	Share Holder:	<input type="checkbox"/>

CLIENT AGREEMENT AND AUTHORISATION

By signing this form:

I declare that the information in this Application is true and correct at the time of completion;

I declare that I have never been convicted of an offence involving dishonesty, have never been subject to a civil penalty order under the SIS Act, am not an undischarged bankrupt and have not been disqualified by a regulator.

I agree that Green Frog Super may collect, use and store my personal information for the purposes of processing this application and to provide ongoing services;

I consent to the role of member and/or office holder as noted in this application and authorise Green Frog Super to register the Company on my/our behalf and act as the ASIC registered agent unless advised otherwise.

I agree to the release of information between Green Frog Super and my adviser or their firm, if details of an adviser have been provided or if the application was submitted by the adviser;

I confirm that I have made my own decision to establish this trust based on my personal and financial circumstances and have obtained financial, legal or other advice where necessary.

APPLICANT'S SIGNATURE

Please digitally sign below

Director 1

Name:

Director 2 – if applicable

Name:

Director 3 – if applicable

Name:

Director 4 – if applicable

Name:


CHECKLIST

- All member/director details completed
- All authorisations above signed and dated
- Completed payment details, including the credit card signature, if applicable
- Copy of Photo ID for each Director, if not already on file

PAYMENT DETAILS

Price is inclusive of GST and the cost of ASIC registration.
 Documents will be emailed to you in PDF form.
 Access to a printer will be required to sign and date by hand.

Please select from the following options to arrange the \$1,328 payment

<input type="checkbox"/>	DIRECT CREDIT	"Green Frog Super"	BSB: 014-221	A/C # 381583042	Ref: <i>Fund name</i>
<input type="checkbox"/>	-or- CREDIT CARD	Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard	Expiry Date: MM/YY		
		Card Holder Name:			
		Credit Card Number:			
		Card Holder Signature:			
<input type="checkbox"/>	-or- BY CHEQUE	Cheques should be made payable to Green Frog Super			

The order will be placed once payment has been received.

Please send this completed form to:

support@greenfrogsuper.com.au -or- PO BOX 227, BALLINA NSW 2478