

ESTABLISHMENT OF SMSF WITH INDIVIDUAL TRUSTEES

Name of the SMSF:

Can be name of choice but needs to end with: 'Superannuation Fund'; 'Super Fund'; 'Pension Fund'; or 'Retirement Fund'. Ideally, the word 'The' should not be included in the name.

Fund Physical Address (not a PO Box):

Street Address:

Suburb/City:

State:

Postcode:

Postal Address: *If the same as Physical address; write "as above"*

Alt. Address:

Suburb/City:

State:

Postcode:

MEMBER & TRUSTEE DETAILS

N.b. Full legal names. Please provide a separate Email and mobile per person for Online Portal access.

TRUSTEE 1

Title *ie. Mr/Ms*

D.O.B

First Name

Preferred Name

Middle Name

Surname

TFN

Mobile

Email

Residential address: *if different to the SMSF*

Tick if you only intend to act as Trustee, and not as a Member of the Fund with a super balance

TRUSTEE 2

Title *ie. Mr/Ms*

D.O.B

First Name

Preferred Name

Middle Name

Surname

TFN

Mobile

Email

Residential address: *if different to the SMSF*

Tick if you only intend to act as Trustee, and not as a Member of the Fund with a super balance

TRUSTEE 3

Title *ie. Mr/Ms*

D.O.B

First Name

Preferred Name

Middle Name

Surname

TFN

Mobile

Email

Residential address: *if different to the SMSF*

Tick if you only intend to act as Trustee, and not as a Member of the Fund with a super balance

TRUSTEE 4

Title *ie. Mr/Ms*

D.O.B

First Name

Preferred Name

Middle Name

Surname

TFN

Mobile

Email

Residential address: *if different to the SMSF*

Tick if you only intend to act as Trustee, and not as a Member of the Fund with a super balance

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 trustee as noted in this application;

I authorise Green Frog Super to apply to register the SMSF with the ATO, apply for an ESA with BGLSF360 and be appointed as the registered tax agent for the Fund;

I acknowledge that the service provided by Green Frog Super is a documentation only service and does not constitute advice;

I acknowledge that Green Frog Super does not provide Investment advice and has not provided a recommendation that this Fund be established;

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

APPLICANT'S SIGNATURE

Please digitally sign below

Trustee 1

Name:

Trustee 2 – if applicable

Name:

Trustee 3 – if applicable

Name:

Trustee 4 – if applicable

Name:



CHECKLIST

- All trustee details completed
- All authorisations above signed and dated
- Completed payment details, including the credit card signature, if applicable
- Copy of Photo ID for each Trustee

PAYMENT DETAILS

Please select from the following options to arrange the \$535 payment

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

DIRECT CREDIT	"Green Frog Super"	BSB: 014-221	A/C # 381583042	Ref: <i>Fund name</i>
-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:			
-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