Instructions for establishing a Self managed superannuation fund

Your details

Name	Date
Organisation	ACN/ABN
Member No.	

* Want to become a Member? See our website www.documentshop.com.au.

Street Address
Delivery Address (if different)

Phone	Facsimile
Email	
Your Ref No.	

Delivery options

(please tick the appropriate box)

☐ DIY Print - Please deliver all documents to me via e-mail **$440***

☐ Hard copy - Please print, bind and deliver all documents to me in a binder via courier **$517***

***Prices are GST inclusive. Prices do not include any stamp duty that may be payable.**

Name of fund

Commencement date

Members
[Maximum of six]

Name	Address	Date of birth

What you need to know
No member may be an employee of another member, unless they are * *relatives*.
* ***relatives*** include, amongst others, a parent, child, grandparent, sibling, aunt, uncle, spouse and former spouse.

Trustee(s) details
(Individual(s) or Corporate Trustee) [please tick the appropriate box]

☐ **Individuals**

Full Name/s:

Address/es:

☐ **Company**

Name:

ACN:

Registered Office Address:

Name of each director:

Will the Company execute the deed by affixing the common seal? Y/N

Meeting Address

What you need to know:

Sole member fund

If the trustees of the fund are to be individuals, there must be two trustees – the sole member and a non-member (the sole member must not be an employee of the other trustee unless they are * *relatives*).

If the trustee of the fund is to be a corporation, the sole member must be:

- the sole director of the corporation; or
- one of two directors (the sole member not being an employee of the other director, unless they are * *relatives*).

Multiple member fund

If the trustees of the fund are to be individuals, each trustee must be a member of the fund (and vice versa).

If the trustee of the fund is to be a corporation, each director must be a member of the fund (and vice versa).

No member of the fund may be an employee of another member, unless they are * *relatives.*

* *relatives* include, amongst others, a parent, child, grandparent, sibling, aunt, uncle, spouse and former spouse.

Contributing Employer
(if any)

Name	ACN	Address

Which jurisdiction's laws will apply to the SMSF ?

(State or Territory]

Stamping

The SMSF Trust deed may be required to be stamped in the relevant jurisdiction. Please advise if you require our assistance with this process and we can provide you with a quote to do so.

Logo

Would you like us to include your logo on the documents?

☐ Yes - please e-mail to us your logo for insertion

☐ No – we will include the Document Shop logo

Other requirements

(if any)

Identity verification

As part of our obligations as a professional services provider under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act) we are required to gather certain information to ensure compliance with anti-money laundering and counter-terrorism financing obligations.

Please provide the following information by email to info@documentshop.com.au:

- Please provide a copy of photographic ID (eg drivers licence or passport) for each Trustee and Member.

Acceptance of terms and conditions

☐ By ticking this box, I/we acknowledge that I/we have read and agree to the Document Shop Pty Ltd *terms and conditions and acknowledgement* [available on our website at www.documentshop.com.au or contact us on 08 7423 6868 or info@documentshop.com.au and we will e-mail or post a copy to you].

Payment

Please debit the following credit card by the amount of $ _____(GST inclusive):

Type of Card ☐ Mastercard ☐ Visa ☐ Bankcard

Card Number_____ Expiry Date_____CSC_____

Name on Card_____ Signature_____

Please return this order form to **info@documentshop.com.au** or call 1300 667 817 with any questions.
Your order will be processed once payment has been received.