

SMSF BARE TRUST INSTRUCTIONS

To CST Corporate Solutions Pty Ltd. You are appointed to act as our agent to procure a Deeds and ancillary legal documentation from a solicitor, the particulars for such deeds and legal documents being set out hereunder.

SMSF Fund Name:

- Please provide:
- Bare Trust/Instalment Documents (PDF Format)
 - Fully Bound Bare Trust Register
 - New Super Fund (if the SMSF does not already exist)
 - SMSF Rules Update (most lenders require specific clauses in your SMSF rules)
 - New Company as SMSF Trustee
 - New Company as Security (Bare) Trustee
 - Loan Agreement (where there is a non arms length loan to be set up)
 - Change to trustees of SMSF (to corporate trustee)

Applicant Details:

Firm Name:.....
 Contact Person:..... Phone:.....
 Street Add:..... Fax:.....
 Postal Add:..... DX:.....
 Email Address:.....
 Please Deliver Street Address Postal Address Other:.....
 The applicant hereby accepts full responsibility for any amount payable to CST Corporate Solutions Pty Ltd for the enclosed instructions.
 signed:..... date:.....

Payment Details:

Chq Encl. Chq in Mail Direct Deposit
 or Charge our Credit Card: Visa Mastercard Amount:.....
 Card Number:..... Expiry Date:.....
 name of cardholder..... signature.....

DETAILS OF PROPERTY BEING PURCHASED

Address:.....
 Town:..... State .. Postcode

CORPORATE SECURITY (BARE) TRUSTEE DETAILS (if any)

Name of Trustee:.....
 A.C.N.
 Registered Address: C/- Applicant or
 Town:..... State .. Postcode

Principal Place of Business: Same as Registered Office Same as 1st Individual shown below

LENDERS DETAILS

NAB The Rock Other Bank (name below) Other Lender (detail below)

Name of Lender:

A.C.N.

Address:

Town

Initial Loan Amount: \$.....

Extras: Div 7A 7 year Div 7A 25 year Zero Interest No Mortgage

SMSF CORPORATE TRUSTEE DETAILS (if any)

Name of Trustee:

A.C.N.

Registered Address: C/- Applicant or

Town: State Postcode

Principal Place of Business: Same as Registered Office Same as 1st Individual shown below

ASSOCIATED INDIVIDUALS

In this section please include
All the members or directors of the trustee company of the SMSF
All the directors of the Security Trustee

Only complete Date of Birth, Place of Birth & Director's consents if setting up a trustee company as part of this order

Name:

Address:

Town: State Postcode

SMSF trustee/director of trustee Security trustee/ Director of security trustee Loan Guarantor
(Is this person a trustee of the SMSF) (Is this person a security trustee) (If guaranteeing the loan)

Date of Birth Place of Birth

I hereby consent to act as a director / secretary / shareholder of the company

..... (Signature)

Name:

Address:

Town: State Postcode

SMSF trustee/director of trustee Security trustee/ Director of security trustee Loan Guarantor
(Is this person a trustee of the SMSF) (Is this person a security trustee) (If guaranteeing the loan)

Date of Birth Place of Birth

I hereby consent to act as a director / secretary / shareholder of the company

..... (Signature)

Once completed please fax this order to CST Corporate Solutions Pty Ltd on **1-300 554 322**
If there are more associated individuals please attach an SMSF Bare Trust Instructions Additional Persons form.

More associated individuals attached (Tick if yes)

SMSF BARE TRUST INSTRUCTIONS

ADDITIONAL INDIVIDUALS

SMSF Fund Name:

Name:

Address:

Town: State Postcode

SMSF trustee/director of trustee
(Is this person a trustee of the SMSF) Security trustee/ Director of security trustee
(Is this person a security trustee) Loan Guarantor
(If guaranteeing the loan)

Date of Birth Place of Birth

I hereby consent to act as a director / secretary / shareholder of the company

..... (Signature)

Name:

Address:

Town: State ... Postcode

SMSF trustee/director of trustee
(Is this person a trustee of the SMSF) Security trustee/ Director of security trustee
(Is this person a security trustee) Loan Guarantor
(If guaranteeing the loan)

Date of Birth Place of Birth

I hereby consent to act as a director / secretary / shareholder of the company

..... (Signature)

Name:

Address:

Town: State ... Postcode

SMSF trustee/director of trustee
(Is this person a trustee of the SMSF) Security trustee/ Director of security trustee
(Is this person a security trustee) Loan Guarantor
(If guaranteeing the loan)

Date of Birth Place of Birth

I hereby consent to act as a director / secretary / shareholder of the company

..... (Signature)

Please fax to: **1-300 554 322**

or email to: orders@cst.com.au

* Please note that all bare trusts are provided as a PDF. However for an additional fee we can provide a fully bound bare trust register