

New Company Form

We appreciate you taking the time to complete the following details.

If you have any questions in relation to the form, please do not hesitate to ask for assistance. *Please refer to the glossary on page 3 for further information on certain terms*.

Company Details				
Company Name (Subject to availability)i				
Alternative Company Name (if preferred name is ta	iken)			
Has the name been reserved with ASIC?		Yes		No
State of incorporation				
Will the company act as trustee for a trust or superfund?		Yes		No
If yes, Name of the trust/superfund				
Is the company a special purpose company?ii		Yes		No
<u>If yes</u> , please provide the company name and ACN		Name:		ACN:
Would you like Kinsella to be the registered office and ASIC Agent?iii		Yes		No
If no, please provide the registered office street address for the company.				
Place of Business (Street address)				
Officeholder Details 1				
Title	Mr/M	rs/Miss/Ms/Dr		
Given Name/s				
Surname				
Date of Birth				
Place of Birth	City:		State:	Country: (if not Australia)
Current Residential Address				
Director Identification Number Should you not yet have a DIN, please see the glossary iv				
TFN (If applying for a TFN for the Company this is required)				
Roles	Direc	tor 🗆	Secretary	Public Officer □



New Company Form

Officeholder Details 2						
Title	Mr/Mrs/Miss/Ms/D	r				
Given Name/s						
Surname						
Date of Birth						
Place of Birth	City:	State:	Country: (if not Australia)			
Residential Address						
Director Identification Number (For more information please see the index)						
TFN (If applying for a TFN for the Company this is required)						
Roles	Director	Secretary	Public Officer			
Shareholder Details						
If Shareholder is a company						
Company Name						
A.C.N.						
Registered Office						
Date of incorporation						
Number of shares						
Class (if not ordinary shares) ^v						
Are the shares beneficially held	Y/ N / N/A					
If the Shareholder is an individual						
Given Name						
Surname						
Residential Address						
If the shareholder is a trust						
Name of Trust						
Trustee company name and A.C.N or						
Individual Trustee details						
Registered office Address and date of						
incorporation						
Officeholder details of trustee company						
Given Name(s)						
Surname						
Date of Birth and Place of birth						
Director Identification Number						



New Company Form

Company register						
Would you like a hard copy company register or	Hard copy register	Online register				
electronic copy?		-				
Would you like Kinsella to hold the company	Kinsella to hold	Client to hold				
register?						

Glossary of Terms

ⁱ To check name availability, please search ASIC's using the following link to ASIC connect. https://connectonline.asic.gov.au/RegistrySearch/faces/landing/NameAvail.jspx?adf.ctrl-state=007k2eg0s-4

Is your company going to be a special purpose company? Please see the ASIC website for more information. https://asic.gov.au/for-business/registering-a-company/steps-to-register-a-company/special-purpose-companies/

For more information about ASIC Registered Agents and responsibilities of an Agent, please see the ASIC website https://asic.gov.au/online-services/registered-agents/

^{iv} Please see the ABRS website for more information for applying for a Director Identification Number should you not already have obtained one. https://www.abrs.gov.au/director-identification-number/who-needs-apply-and-when

^v Please see ASIC's website for the class of shares register. https://asic.gov.au/for-business/running-a-company/shares/