



New Company Instructions

Company Name:

Business Name Exists **Yes / No** If yes provide States & Numbers:

Applicant Details:

Customer No:

Firm Name:

Contact Person: Phone:

Street Add: Fax:

Postal Add: DX:

Email Address:

Please Deliver to: Street Address / Postal Address / Other:

The applicant hereby accepts full responsibility for any amount payable to CST Online Pty Ltd for the incorporation of the above company.

signed: date:

Payment Details:

Chq Encl. Chq in Mail Direct Deposit

or Charge our Credit Card: Bankcard Visa Mastercard Amount \$

Card Number: Expiry Date:

Name of Cardholder Signature

Company Addresses:

Registered Office:
(leave blank if C/- Applicant)

Occupier's name (if the company does not occupy the reg'd office):

Principal Place of Business:
(leave blank if reg'd office)

Company Members and Officeholders and Consents to Act:

(If more than one person please attach page 2)

I hereby consent to act as a director / secretary / shareholder of the company and provide the following particulars:

Surname: Given Names:

or Coy/Trust Name:

Former Names: Occupation

Address:

Suburb: State: P/Code

Date of Birth Place of Birth (Town/State/Country):

Director Secretary (if any) Chairman Public Officer

1st Class Share Type: Number: 2nd Class Share Type: Number:

Signed: Date:



Company Name: Page 2 of 2

Extra Company Members and Officeholders and Consents to Act:

I hereby consent to act as a director / secretary / shareholder of the company and provide the following particulars:

Surname: Given Names:

or Coy/Trust Name:

Former Names: Occupation

Address:

Suburb: State: P/Code

Date of Birth Place of Birth (Town/State/Country):

Director Secretary (if any) Chairman Public Officer

1st Class Share Type: Number: 2nd Class Share Type: Number:

Signed: Date:

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Director Secretary (if any) Chairman Public Officer

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