



CST Corporate Solutions Pty Ltd

ABN 83 096 444 478
Locked Bag 2, Narellan NSW 2567
Telephone: 1-300 554 321
Facsimile: 1-300 554 322

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 also provide SMSF Deed Update Loan Agreement New Super Fund Incorporate security trustee

Applicant Details: Customer No:

Firm Name:

Contact Person: Phone:

Street Add: Fax:

Postal Add: DX:

Email Address: tick for PDF Only, No Register

Please Deliver to: 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: Bankcard Visa Mastercard Amount:

Card Number: Expiry Date:

name of cardholder signature

SMSF CORPORATE TRUSTEE DETAILS

Name of Trustee:

A.C.N. Please incorporate corporate trustee

Registered Address: C/- Applicant or

Town: State Postcode

CORPORATE SECURITY (BARE) TRUSTEE DETAILS

Name of Trustee:

A.C.N. Please incorporate security trustee

Registered Address: C/- Applicant or

Town: State Postcode

DETAILS OF PROPERTY BEING PURCHASED

Address:

Town: State Postcode

LENDERS DETAILS

Westpac NAB ANZ St George Bankwest Other (please detail below)

Name of Lender:

A.C.N.

Address:

.....

Town: State Postcode

Initial Loan Amount: \$

ASSOCIATED INDIVIDUALS

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

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

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

Date of Birth Place of Birth

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

..... (Signature)

If there are more members please photocopy this sheet and attach to your order.

Once completed please fax this order to CST Corporate Solutions Pty Ltd on 1-300 554 322

or post it to us at

Locked Bag 2

Narellan NSW 2567

More associated individuals attached (Tick if yes)