

# Property Trust Application Form

## Part A: SMSF Details

Name of SMSF:

ABN:

Name of the SMSF Trustee:

ACN:

## Part B: Property Trust Details

Name of Property Trust:

Name of the Corporate Trustee for the Property Trust:

## Payment Details

I agree to the Sapient Superannuation terms and conditions outlined in Part E of this application form to charge my nominated credit card below.

### Credit Card

Mastercard  Visa  Cheque

Credit Card Number:

Name on Credit Card:

Expiry:

CVV Number:

Signature:

Please make a cheque payable to 'Sapient Superannuation Pty Ltd'.

### Address

No/Street:

Suburb:

State:

Postcode:

## Part C: Details of the Property Being Purchased

### Address

No/Street:

Suburb:

State:

Postcode:

### Loan Details

Name of Lender:

Loan Amount:

## ACT & TAS & VIC

Volume No:  Folio No:

## NSW

Lot No:  DP No:

## NT

Volume No:  Folio No:

Lot No:  Plan Ref:

Location:

## QLD

Lot No:  Country:

Parish:

Title Ref:  Plan Ref:

## SA

Prefix:

Volume No:  Folio No:

## WA

Volume No:  Folio No:

Lot No:  Plan Ref:

## Part D: Member/Trustee/Director Details

### 1. Member/Trustee/Director 1

Mr  Mrs  Ms  Miss  Other

Family Name:

Given Name:

Gender  Male  Female

City of Birth:  DOB:

Occupation:

TFN:

#### Registered Address

No/Street:

Suburb:

Postcode:  State:

#### Contact details

Mobile:

Telephone (H/W):

Email:

Trustee & Member  Trustee Only

### 2. Member/Trustee/Director 2

Mr  Mrs  Ms  Miss  Other

Family Name:

Given Name:

Gender  Male  Female

City of Birth:  DOB:

Occupation:

TFN:

#### Registered Address

No/Street:

Suburb:

Postcode:  State:

#### Contact details

Mobile:

Telephone (H/W):

Email:

Trustee & Member  Trustee Only

### 3. Member/Trustee/Director 3

Mr  Mrs  Ms  Miss  Other

Family Name:

Given Name:

Gender  Male  Female

City of Birth:  DOB:

Occupation:

TFN:

#### Registered Address

No/Street:

Suburb:

Postcode:  State:

#### Contact details

Mobile:

Telephone (H/W):

Email:

Trustee & Member  Trustee Only

### 4. Member/Trustee/Director 4

Mr  Mrs  Ms  Miss  Other

Family Name:

Given Name:

Gender  Male  Female

City of Birth:  DOB:

Occupation:

TFN:

#### Registered Address

No/Street:

Suburb:

Postcode:  State:

#### Contact details

Mobile:

Telephone (H/W):

Email:

Trustee & Member  Trustee Only

## Part E: Adviser/Representative Details

### 5. Adviser/representative

Name:

Company Name:

AFSL Number:

### Postal Address

No/Street:

Suburb:

State:

Postcode:

## Part F: Authority to Proceed

I/We declare that the information contained within this application to be true and accurate as at the date of signing.

I/we authorise Sapient Superannuation Pty Ltd to proceed with the Property Trust and Corporate Trustee establishment.

I/We authorise Sapient Superannuation Pty Ltd to register the Property Trust and Corporate Trustee with the relevant regulatory bodies.

I/We understand that Sapient Superannuation may collect and store personal information for the purpose of establishing the Property Trust and Corporate Trustee. All collection and storage complies with relevant regulations and with the Sapient Superannuation Privacy Policy.

I/We agree to the release of information by Sapient Superannuation Pty Ltd to my listed advisor/representative in Part E of this form.

I/We have been supplied with, have read, and understand the Sapient Superannuation Pty Ltd Schedule of Fees, and consent to the payment terms and conditions.

I/We authorise Sapient Superannuation Pty Ltd to deduct fees from the SMSF's bank account in accordance with the Schedule of Fees.

I/We understand that Sapient Superannuation Pty Ltd will not be liable for any loss, outgoing or otherwise suffered by the fund or any of its Members as a result of the fund establishing and investing through the Property Trust.

I/We understand that Sapient Superannuation Pty Ltd is not licenced to provide investment advice and has not provided any investment advice in relation to establishing this Property Trust.

I/We understand that we should seek personal financial advice before establishing and investing through the Property Trust.

### 6. Member/Trustee/Director 1

Name:

Signature:

Date:

### 7. Member/Trustee/Director 2

Name:

Signature:

Date:

### 8. Member/Trustee/Director 3

Name:

Signature:

Date:

### 9. Member/Trustee/Director 4

Name:

Signature:

Date:

### Please include with you application one of the following ID requirements;

- Certified copy of your Driver's Licence
- Certified copy of your Passport
- Certified copy of your Birth Certificate

### Please return your completed application to;

info@sapientfinancial.com.au

or

PO Box R1405  
Royal Exchange NSW 1225  
P – 02 8205 7857 | F – 02 8205 7867

or

PO Box 18092  
Melbourne VIC 3001  
P – 03 9013 0049 | F – 02 8205 7867