

ALLAN'S OFF THE SHELF

The Incorporation Professionals

Date: _____ Page 1 of _____
First Name: _____ Last Name: _____
Firm: _____
Phone: _____ Fax: _____
Email: _____
Delivery Add: _____

Note: We're constantly monitoring lender requirements for bare trust deed content & adapting our documents to suit all lenders' requirements as they are updated. This reduces the requests for amendments significantly, but borrowers will always be at the whim of lenders' ever changing lending documentary requirements

Delivery Options:

- Email Only Version \$608
Please note to settle in QLD you must select Physical Version
- Physical Version \$485

For preparation of a Custodian Trust Deed under s.67(4A) of the Superannuation Industry (Supervision) Act 1993

A. Trustee Details

Name: _____ ACN (if trustee is a company): _____
Phone: _____ Mobile: _____
Address: _____

B. Self Managed Super Fund details

Name of SMSF: _____ Date of Birth: _____
Trustee Name(s): _____ ACN (if trustee is a company): _____

2nd Trustee Name (if any): _____ Date of Birth: _____
Address: _____

3rd Trustee Name (if any): _____ Date of Birth: _____
Address: _____

4th Trustee Name (if any): _____ Date of Birth: _____
Address: _____

Directors of SMSF (if trustee is a company): _____

C. Name of Trust: _____

D. Property to be purchased details:

Address: _____
Legal Description: _____

BARE TRUST ORDER FORM

PAYMENT OPTIONS

Approved 30 day account clients \$608

Credit Card - Please debit the following credit card by \$608 (includes merchant fee) or \$485 (PDF version)

TYPE OF CARD: Visa Mastercard Bankcard

CARD NUMBER: _____ EXPIRY DATE: (____ / ____) CVV Code: _____

NAME ON CARD: _____ SIGNATURE: _____

Direct Deposit - \$608.00

BSB: 012 349 ACC#: 221 604 238 Account Name: Allans off the Shelf

PLEASE COMPLETE Date: _____ Name: _____

Phone: _____ Fax: _____ Email: _____

Delivery Address: _____