

## SMSF Change of Trustee - Order Form

### What you are required to do to order your Document:

1. Complete all relevant fields in BLOCK LETTERS
2. Attach a copy of the Fund's most recent Trust Deed, as well as any documentation recording a change in the Fund's Trusteeship/Membership, or the Fund's Principal Employer/Employer Sponsor, since your last Trust Deed Upgrade.
3. Mail this form, along with the documentation outlined above, to Superannuation Support. Alternatively, email this form and the required documentation to Superannuation Support at [admin@supersupport.com.au](mailto:admin@supersupport.com.au)

### SECTION A(I): PERSON/ADVISOR ORDERING TRUSTEE CHANGE

<b>YOUR NAME</b>				<b>Signature</b>	
<b>YOUR POSTAL ADDRESS</b>					
<b>YOUR COMPANY NAME</b>					
<b>DATE OF ORDER</b>				<b>Your Ref.</b>	
Phone		Fax		Email	

### SECTION A (II): PAYMENT DETAILS

Enclosed is Payment for a SMSF CHANGE OF TRUSTEE for the sum of \$

Direct Debit       Visa Card       MasterCard       Cheque

Card Holder Name			
Credit Card Number	-	-	-
Expiry Date	/	<b>Authorised Card Signature</b>	

\*To pay by Direct Debit you must have a current Direct Debit arrangement with Superannuation Support Pty Ltd.

If you would like to arrange for Direct Debit for future purchases please contact Superannuation Support Pty Ltd on 1300 762 663

### SECTION B: FUND DETAILS

<b>NAME OF FUND</b>	
Meeting address of the CURRENT TRUSTEES of the Fund	
Establishment Date of the Fund	
Trust Deed Variation Dates	
Australian Business Number of the Fund	
State Law Governing the Fund	
Date the Trustee Change is to occur	

## SECTION C(I): TRUSTEE DETAILS

Current Trustee Type (please tick where appropriate)	Individuals	<input type="checkbox"/>	Corporate	<input type="checkbox"/>
New Trustee Type (please tick where appropriate)	Individuals	<input type="checkbox"/>	Corporate	<input type="checkbox"/>
Will you be removing any Members from the Fund during the Trustee Change?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Will you be Admitting any new Members/Trustees to the Fund during the Trustee Change?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

## SECTION C(II): CURRENT TRUSTEE DETAILS – CORPORATE TRUSTEE

If the CURRENT Trustee is a Company, ensure you enter the details of the Company Directors in Section D.

Company Name		ACN	-	-
Registered Office				
Company Chairman				

## SECTION C(III): CURRENT INDIVIDUAL TRUSTEE / CORPORATE TRUSTEE DIRECTOR DETAILS

Current Individual Trustee/ Corporate Trustee 1				
Title		Full Name		
Address				
Date of Birth		Tax File Number*	-	-
Individual Trustee (please tick if appropriate)	<input type="checkbox"/>	Director of Corporate Trustee (please tick if appropriate)	<input type="checkbox"/>	
Is the Trustee a Member of the Fund?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

Current Individual Trustee/ Corporate Trustee 2				
Title		Full Name		
Address				
Date of Birth		Tax File Number*	-	-
Individual Trustee (please tick if appropriate)	<input type="checkbox"/>	Director of Corporate Trustee (please tick if appropriate)	<input type="checkbox"/>	
Is the Trustee a Member of the Fund?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

Current Individual Trustee/ Corporate Trustee 3				
Title		Full Name		
Address				
Date of Birth		Tax File Number*	-	-
Individual Trustee (please tick if appropriate)	<input type="checkbox"/>	Director of Corporate Trustee (please tick if appropriate)	<input type="checkbox"/>	
Is the Trustee a Member of the Fund?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

Current Individual Trustee/ Corporate Trustee 4			
Title		Full Name	
Address			
Date of Birth		Tax File Number*	- -
Individual Trustee (please tick if appropriate)		<input type="checkbox"/>	Director of Corporate Trustee (please tick if appropriate) <input type="checkbox"/>
Is the Trustee a Member of the Fund?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Which Individual Trustee/ Director of the Corporate Trustee, will sign the Tax Office form, notifying the ATO of the change in Trusteeship?	
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## SECTION D: NEW TRUSTEE DETAILS – NEW CORPORATE TRUSTEE

Complete this section if the NEW TRUSTEE is a Company. Otherwise continue to Section E.

Company Name		ACN	- -
Address or Registered Office			
Address where the meetings of the Company will be held			
Who will act as Chairman of the Company?			

## SECTION E: REMOVAL OF AN INDIVIDUAL FROM THE FUND

DO YOU WANT TO REMOVE ANY INDIVIDUALS FROM THE FUND?  YES  NO

Removed Individual 1 Name	
Removed Individual 2 Name	
Removed Individual 3 Name	

## SECTION F: ADMISSION OF NEW INDIVIDUAL TO THE FUND

DO YOU WANT TO ADMIT ANY NEW INDIVIDUALS TO THE FUND?  YES  NO

New Individual 1			
Title		Full Name	
Address			
Date of Birth		Tax File Number*	- -
Individual Trustee (please tick if appropriate)		<input type="checkbox"/>	Director of Corporate Trustee (please tick if appropriate) <input type="checkbox"/>
Will this Individual be a Member of the Fund?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

New Individual 2			
Title		Full Name	
Address			
Date of Birth		Tax File Number*	- -
Individual Trustee (please tick if appropriate)		<input type="checkbox"/>	Director of Corporate Trustee (please tick if appropriate) <input type="checkbox"/>
Will this Individual be a Member of the Fund?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

New Individual 3				
Title		Full Name		
Address				
Date of Birth		Tax File Number*	-	-
Individual Trustee (please tick if appropriate)		<input type="checkbox"/>	Director of Corporate Trustee (please tick if appropriate)	
Will this Individual be a Member of the Fund?		YES	<input type="checkbox"/>	NO
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\* It is not mandatory to supply the Tax File Number of the Members. However after 1 July 2007, if a new Member does not provide their TFN to their Fund, they will be taxed at top marginal tax rates on concessional contributions made to the fund, and the fund will not be able to accept non-concessional contributions from the Member.

## SECTION G: ADDITIONAL PARTY DETAILS

Does the Fund have any of the following parties?

Founder                       Principal                       Principal Employer                       Employer Sponsor

Name/s		ACN	-	-
Registered Office				
<b>Director 1</b>		<b>Director 2</b>		
<b>Director 3</b>		<b>Director 4</b>		
<b>Which Director will Chair the Meeting of the Company?</b>				

### PLEASE ANSWER THE FOLLOWING QUESTIONS IF THE NEW TRUSTEE/S ARE INDIVIDUALS:

- Does the Fund have an individual Trustee who is a legal person representative, or a parent or guardian acting on behalf of a member under a legal disability?  YES  NO
- Have any of the Trustees been convicted of an offence in respect of dishonest conduct in the Commonwealth or any state, territory or foreign country?  YES  NO
- Has a civil order penalty ever been made in relation to any of the Trustees?  YES  NO
- Are any of the Trustees an undischarged bankrupt?  YES  NO
- Have any of the Trustees been notified that they are a disqualified person by a regulator (APRA or the Commissioner of Taxation)?  YES  NO
- Does the Fund intend to be a self managed superannuation fund for 12 months or longer?  YES  NO

### PLEASE ANSWER THE FOLLOWING QUESTIONS IF THE NEW TRUSTEE IS A COMPANY:

- Does the Fund have a corporate trustee which has a director who is a legal personal representative or a parent or guardian acting on behalf of a member under a legal disability?  YES  NO
- Does the company know or have reasonable grounds to suspect, that a person who is, or is acting as, a responsible officer of the body corporate is a disqualified person? in the Commonwealth or any state, territory or foreign country?  YES  NO
- Has a receiver, or a receiver and manager of the company been appointed?  YES  NO
- Has the company been placed under official management?  YES  NO
- Has a provisional liquidator of the company been appointed?  YES  NO
- Is the company being wound up?  YES  NO
- Does the Fund intend to be a self managed superannuation fund for 12 months or longer?  YES  NO