

Self Managed Superannuation Takeover of Existing SMSF Application

Previous Administrator/Accountant Details

Advisor/Contact Name _____

Name of Company _____

Address of Company _____

Email of Company _____

Self Managed Super Fund Details

Name of SMSF _____

ABN of SMSF _____ TFN of SMSF _____

Is the trustee individual or corporate? Individual Corporate

SMSF establishment date (if known) _____

Fund Contact Email _____

Trustee Details

Corporate Trustee (if applicable)

Name of Corporate _____

ACN of Company _____

Registered Address of Company _____

Main Cash Account of SMSF

Account Name _____

Bank Name _____ Branch _____

BSB _____ Account Number _____

Share Trading Account (if applicable)

Name of Broker (e.g. CommSec) _____

Account Number _____ HIN _____

Trustee/Director/Member Details

Member 1

Member Name _____
Date of Birth ____ / ____ / ____ City of Birth* _____ * And country if outside Australia
Street Address _____
Phone Number _____ Email _____
Tax File No _____ Occupation _____

Member 2

Member Name _____
Date of Birth ____ / ____ / ____ City of Birth* _____ * And country if outside Australia
Street Address _____
Phone Number _____ Email _____
Tax File No _____ Occupation _____

Member 3

Member Name _____
Date of Birth ____ / ____ / ____ City of Birth* _____ * And country if outside Australia
Street Address _____
Phone Number _____ Email _____
Tax File No _____ Occupation _____

Member 4

Member Name _____
Date of Birth ____ / ____ / ____ City of Birth* _____ * And country if outside Australia
Street Address _____
Phone Number _____ Email _____
Tax File No _____ Occupation _____

Declaration for all new self managed super applicants

- I/we hereby declare that the above information is true and correct.
- I/we agree for Best Interest Advice Pty Limited to undertake the ongoing Administration and Taxation Service of my/our new SMSF for a minimum period of 12 months.
- I/we agree I/we have received, read and understood Best Interest Advice Pty Limited's Financial Services Guide (FSG) and schedule of SMSF fees (attached).
- I/we agree to Best Interest Advice Pty Limited's pricing schedule provided and agree to all fees associated with Best Interest Advice Pty Limited's Administration, Taxation and Audit Service.
- I/we authorise Best Interest Advice Pty Limited to deduct all applicable Administration and Audit fees from my/our SMSF's bank account.
- I/we authorise Best Interest Advice Pty Limited's administration partners, Baumgartner Partners, to act as our registered tax agent, in relation to the preparation and lodgement of the superannuation fund income tax return.
- I/we agree that Best Interest Advice Pty Limited has not provided me with financial advice and that Best Interest Advice Pty Limited is not responsible for the investment decisions I/we make and the investment products I/we select to invest in.
- I/we have read and agree with the terms and conditions of the Selfmanagedsuper.com.au website and its privacy statement.
- I/we understand all the responsibilities of being a self-managed superannuation fund trustee.

(1) Signature _____ (2) Signature _____

(3) Signature _____ (4) Signature _____

Please forward the completed form on to Selfmanagedsuper.com.au using the following options:

-  **Email** Scan and email this form to info@selfmanagedsuper.com.au
-  **Post** Post to **Selfmanagedsuper.com.au, PO Box 115 North Ryde BC NSW 1670**
-  **Fax** Fax the completed form to **(02) 9870 7556**