

Public Company (Limited by Shares)

Note: All directors must comply with the Director ID requirements. Visit www.abrs.gov.au

Firm (If any)	_____	Date	_____
Contact Person	_____	Phone	_____
Email	_____	Ref No.	_____

SHELF COMPANY SERVICES AUSTRALIA PTY LTD provides a document preparation and registration service. SHELF COMPANY SERVICES AUSTRALIA PTY LTD does not provide legal or professional advice. Any person wishing to register a company should obtain advice from a legal practitioner or accountant to ensure the Company is suitable for its intended use.

Name required

(ASIC register all names in upper case only. If you wish the company register to show the name partly or wholly in lower case please indicate in 'Special instructions'.)

Is the proposed name identical to an existing business name? ☐ Yes ☐ No if YES, please complete number below

BN/ABN	_____	State	_____
BN/ABN	_____	State	_____

☐ I DECLARE that I/we make this application for the company name as, or on behalf of, and with the authority of the registered owner/s of the above identical business name/s.

Name	_____	Signed	_____
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Company Options

Standard company includes fully completed register preparation of all necessary ASIC lodgements, Bank account kit, 3 copies of the constitution deluxe A4 binder and couriered to your door.

Please tick non-standard option(s) required (See current fee schedule)

- ☐ Common seal required (Additional Fee)
- ☐ No Constitution (company will rely entirely on replaceable rules)

State Please nominate the State the company is to be registered in _____

Method of registration (one box must be selected)

- ☐ Consents (signed) officers/ shareholders are attached. Verification of Identity (VOI) & Customer Due Diligence (CDD) checks have been performed.
- ☐ I/We are holding the required consents from all proposed officers and shareholders. Verification of Identity (VOI) & Customer Due Diligence (CDD) checks have been performed.

Registered office

At the office of:	_____		
Unit/Suite/Level/Building	_____		
Street	_____		
Place	State	Postcode	
_____	_____	_____	

Principal place of business ☐ as above or

Unit/Suite/Level/Building	_____		
Street	_____		
Place	State	Postcode	
_____	_____	_____	

Ultimate holding company (if any)

Company name	_____	ACN	_____
Country of origin	_____		

Special instructions

DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 1

Surname

Given names

Date of birth

Place of birth

(Place and State for Australian Birthplaces)

Company name

(Shareholder only)

ACN

Address

(full residential address)

Unit/Suite/Level/Building

Street

Place

State

Postcode

Country

(ASIC require all location addresses to include a unit and street or lot numbers. A post office box is acceptable for shareholders only.)

Positions Held ☐ Director ☐ Secretary ☐ Public Officer ☐ Shareholder

Shareholdings

Number of ORDINARY Class Shares

Paid \$1.00 p/share or \$

Unpaid \$

Number of OTHER Class Shares

Class of Share

Paid \$1.00 p/share or \$

Unpaid \$

Are the shares beneficially held? (This must be completed) ☐ Yes ☐ No

If no, please provide name of holder (Optional)

Signed Consent

- I hereby consent to be named in the ASIC application for registration as a company as:
- An officer of the company in the capacities indicated above and if a Director, the Director has a Directors ID;
 - (if indicated above) A shareholder who has agreed to take up the shares listed above and (if the company has elected to have a constitution) who has agreed to the terms of the proposed Shelf Company Services Australia Pty Ltd standard constitution.

Date Sign Here Dir ID

DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 2

Surname

Given names

Date of birth

Place of birth

(Place and State for Australian Birthplaces)

Company name

(Shareholder only)

ACN

Address

(full residential address)

Unit/Suite/Level/Building

Street

Place

State

Postcode

Country

(ASIC require all location addresses to include a unit and street or lot numbers. A post office box is acceptable for shareholders only.)

Positions Held ☐ Director ☐ Secretary ☐ Public Officer ☐ Shareholder

Shareholdings

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Unpaid \$

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Class of Share

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DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 3

Surname

Given names

Date of birth

Place of birth

(Place and State for Australian Birthplaces)

Company name

(Shareholder only)

ACN

Address

(full residential address)

Unit/Suite/Level/Building

Street

Place

State

Postcode

Country

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DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 4

Surname

Given names

Date of birth

Place of birth

(Place and State for Australian Birthplaces)

Company name

(Shareholder only)

ACN

Address

(full residential address)

Unit/Suite/Level/Building

Street

Place

State

Postcode

Country

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DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 5

Surname

Given names

Date of birth

Place of birth

(Place and State for Australian Birthplaces)

Company name

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DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 6

Surname

Given names

Date of birth

Place of birth

(Place and State for Australian Birthplaces)

Company name

ACN

Address

(full residential address)

Unit/Suite/Level/Building

Street

Place

State

Postcode

Country

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DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 7

Surname

Given names

Date of birth

Place of birth

(Place and State for Australian Birthplaces)

Company name

ACN

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(full residential address)

Unit/Suite/Level/Building

Street

Place

State

Postcode

Country

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DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 8

Surname

Given names

Date of birth

Place of birth

(Place and State for Australian Birthplaces)

Company name

ACN

Address

(full residential address)

Unit/Suite/Level/Building

Street

Place

State

Postcode

Country

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