

Trust Establishment - Data Capture Form



General Information:

Trust Name	
Address	
Will the Trust be a Trading Entity	<input type="checkbox"/> YES <input type="checkbox"/> NO
State of Operation of the Trust	
ABN Registration , if applicable - Details of Industry - Main Activity	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>

Trustees and Members:

Particulars	Associate 1	Associate 2	Associate 3	Associate 4
First Name:				
Middle Name				
Last Name				
Title				
Former name (if any):				
TFN:				
ABN (If any):				
Residential Address:				
Email Address				
Phone No.				
Date of Birth:				
Place of Birth : <i>(Country, State, Suburb)</i>				
Position to be held:	Trustee <input type="checkbox"/>	Trustee <input type="checkbox"/>	Trustee <input type="checkbox"/>	Trustee <input type="checkbox"/>
<i>* Tick all positions, as applicable</i>	Beneficiary <input type="checkbox"/>	Beneficiary <input type="checkbox"/>	Beneficiary <input type="checkbox"/>	Beneficiary <input type="checkbox"/>
ACN : <i>(If the trustee is a company)</i>				

Trustee Consent/Resolution:

I/We consent to act as trustee of the above-mentioned Trust pursuant to the trust deed.

I/We resolve to execute the trust deed, and any ancillary documents required to establish the trust.

I/We authorise, **FinPro Consultant Group**, it's employees, consultants and its associates, to attend to the establishment of the entity listed above and further request to attends to the registration of the entities with the Australian Taxation Office as required.

Trustee
Date: _____

Trustee
Date: _____

Trustee
Date: _____

Trustee
Date: _____

This completed form should be signed and returned to our office. Please feel free to contact us should you require any assistance completing this form.

DISCLAIMER:

AS TRUSTEE/S ITS YOUR RESPONSIBILITY FOR THE ACCURACY OF THE ITEMS COMPLETED ON THIS FORM. AS SUCH, PLEASE ENSURE THAT ALL THE INFORMATION SUPPLIED IS ACCURATE. WE WILL ATTEND TO THE ESTABLISHMENT OF YOUR ENTITY USING THE EXACT DETAILS PROVIDED ABOVE. IF ANY CHANGES ARE REQUIRED AFTER YOUR ENTITY HAS BEEN ESTABLISHED DUE TO THE INACCURATE COMPLETION OF THIS FORM, THIS WILL INCUR AN ADDITIONAL CHARGE.