

Request for limited recourse borrowing – Bare Trust

a. Contact Details

Order contact person _____ signature _____
(documents & invoice will be directed to this person, unless otherwise stated)

Company/firm name (if applicable) _____

Postal Address _____ Postcode _____

Street Address (if different) _____ Postcode _____

Phone _____ Fax _____ Email _____

b. Bare Trust

Name of Bare Trust _____

c. SMSF Details (Beneficiary)

Name of Fund _____

Address _____

Fund abn _____ Fund Establishment Date ____/____/____

d. SMSF Corporate Trustee Details

Full Name of Company (if applicable) _____

acn _____

e. Fund Individual Trustees Details or Directors of Trustee Company

1. Full Name (Mr/Mrs/Ms) _____ Date of Birth ____/____/____

Individual Trustee*

or

Director of Company Trustee**

2. Full Name (Mr/Mrs/Ms) _____ Date of Birth ____/____/____

Individual Trustee*

or

Director of Company Trustee**

3. Full Name (Mr/Mrs/Ms) _____ Date of Birth ____/____/____

Individual Trustee*

or

Director of Company Trustee**

4. Full Name (Mr/Mrs/Ms) _____ Date of Birth ____/____/____

Individual Trustee*

or

Director of Company Trustee**

f. Corporate Trustee for Bare Trust (trustee/s of the smsf cannot be the trustee/s of the bare trust)

Name of Company (if applicable) _____ acn _____

Registered Address _____ Postcode _____

g. Individual Trustees or Directors of Bare Trust

1. Full Name (Mr/Mrs/Ms) _____ Date of Birth ____/____/____

Residential Address _____ Postcode _____

2. Full Name (Mr/Mrs/Ms) _____ Date of Birth ____/____/____

Residential Address _____ Postcode _____

3. Full Name (Mr/Mrs/Ms) _____ Date of Birth ____/____/____

Residential Address _____ Postcode _____

4. Full Name (Mr/Mrs/Ms) _____ Date of Birth ____/____/____

Residential Address _____ Postcode _____

h. Details of Asset to be Acquired

Date of Purchase ____/____/____ Purchase price \$ _____

Address _____

Title particulars certificate of Title Volume particulars _____ Folio _____

Please provide copy of contract of sale (unsigned unless purchased under and/or nominee)

i. Lender Details

Lender _____ acn _____

Address _____

If finance is to be provided by a related party and a loan Agreement is required please complete

loan amount \$ _____ period of loan _____

date of repayment of loan ____/____/____ interest rate _____%

interest only Principle and interest variable fixed period _____years

j. Application Fees \$1,650

Please forward cheque with request for Bare Trust

k. Trust Deed

Please provide a copy of current Trust Deed#

The trust deed may require amendment which will incur an additional fee of \$330

Complete and return this form to: Super Matters

Address: PO BOX 1086 Carlton VIC 3053 or Email: info@supermatters.com.au