

COMPANY REGISTRATION

Person Ordering	
Name	
Company Name (if applicable)	
Street address	
Phone	
Email	

COMPANY DETAILS	
Company name (1 st Choice)	
Company name (2 nd Choice)	
Company type	
State of Incorporate	NSW / VIC / QLD / WA / TAS / SA / ACT / NT
What is the main industry that the company operate in? (Describe the company's main activities)	

Registered office	
Street address (PO Box is not accepted)	
Does the company occupy these premises? Yes / No	
If no, occupier's name	

Principal place of business	
Address	

Company share structure	
Share class	ORD Ordinary shares (commonly used)
Others (please specify)	
Number issued	
Total amount paid	\$
Total amount unpaid	\$

CKL Accounting

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650 George Street, Sydney, NSW 2000

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Are these shares issued for cash? Yes No
If no, please provide details of the consideration.

Appendix A – Shareholder details	
For individual shareholder	
Family Name	
Given Name	
Gender	
Date of Birth	
Address	
Number of shares taken	
For company shareholder	
Company Name	
Place of incorporations	
Address	
Name of ultimate holding company and place of incorporation	
Number of shares taken	
Please copy this page if there are more than one company officers	

Appendix B – Company Officer			
Family Name		Given Name	
	Mr/Mrs/Ms		
Former Name (if any):			
Position	Director / Secretary		
Residential address			
Gender			
Date of Birth			
Place of Birth			
	Town	Country	
Tax File Number (If there is no TFN, please provide certified true copy of 2 Identify documents)			
Please sign the consent of appointment			
I consent to act as Director and/or Company Secretary of			
Signed Date			
Please copy this page if there are more than one company officers			

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Note:

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