



Application for registration of a registrable Australian body

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement

Lodgement details

Who should ASIC contact if there is a query about this form?

Firm/organisation

Contact name/position description

ASIC registered agent number (if applicable)

Telephone number

Postal address or DX address

1 Application

I apply for registration of the body as a registrable Australian body under the Corporations Act 2001 as it applies Part 5B.2 (Division 1) of the Corporations Act 2001.

2 Details of the body

Body corporate name

State or territory of incorporation/registration

Legislation under which the body was formed or incorporated

Has a name reservation been lodged to reserve the body's name?

Yes

If yes, provide name reservation number

No

If no, is the proposed name identical to a registered business name(s) in Australia?

Yes

No

If yes, provide business name(s) registration details (see following page)

2 Continued ... Provide further details of the body

I declare that I own, or am registering the body name for the owner(s) of the identical business name(s), the registration details of which are listed below.

| State/Territory business number | State/Territory of registration |
|---------------------------------|---------------------------------|
| | |
| | |
| | |

Registered office for purposes of the Corporations Act 2001

You cannot use a PO Box address

At the office of, C/- (if applicable)

Office, unit, level

Street number and street name

Suburb/City

State/Territory

Postcode

Does the company occupy the premises?

Yes

No

If no, name of occupier

Occupier's consent (Select box to indicate the statement below is correct)

The occupier of the premises has consented in writing to the use of the specified address as the address of the registered office of the company and has not withdrawn that consent.

Office hours

a. Registered office open to the public each business day from at least 10 am to 12 noon and 2 pm to 4 pm.

b. Registered office open to the public each business day for at least 3 hours between 9 am and 5 pm.

If b, insert hours open

from am/pm

to am/pm

Registered office in State/Territory of incorporation or - if no registered office - the principal place of business in State/Territory where incorporated

At the office of, C/- (if applicable)

Office, unit, level

Street number and street name

Suburb/City

State/Territory

Postcode

3 Details of director or their equivalent

Family and given names or corporation name. If a corporation give ACN or ARBN if applicable.

If the officeholder is a person give their usual residential address.

| | |
|---|---|
| Office held <input type="text"/> | Date of appointment <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> [D] [D] / [M] [M] / [Y] [Y] |
| Family name <input type="text"/> | Given names <input type="text"/> |
| Former name <input type="text"/> | |
| or Corporation name <input type="text"/> | |
| ACN/ARBN (if applicable) <input type="text"/> | |
| Street number and street name <input type="text"/> | |
| Suburb/City <input type="text"/> | State/Territory <input type="text"/> |
| Postcode <input type="text"/> | Country (if not Australia) <input type="text"/> |
| Date of birth <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> [D] [D] / [M] [M] / [Y] [Y] | |
| Place of birth (town/city) <input type="text"/> | (state/country) <input type="text"/> |

3 Continued... Details of further directors or their equivalent

Family and given names or corporation name. If a corporation give ACN or ARBN if applicable.

If the officeholder is a person give their usual residential address.

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Family and given names or corporation name. If a corporation give ACN or ARBN if applicable.

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| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Postcode | Country (if not Australia) | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Date of birth | | |
| <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> | | |
| [D D] [M M] [Y Y] | | |
| Place of birth (town/city) | (state/country) | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

If the officeholder is a person give their usual residential address.

3 Continued... Details of further directors or their equivalent

Family and given names or corporation name. If a corporation give ACN or ARBN if applicable.

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| Date of birth | | |
| <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> | | |
| [D D] [M M] [Y Y] | | |
| Place of birth (town/city) | (state/country) | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

If the officeholder is a person give their usual residential address.

Declaration by applicant

This form must be signed by a director (or equivalent) or secretary of the body

I certify that the information in this form is true and correct.

Name of applicant

Capacity of applicant

Signature of applicant

Date signed

/ /
[D] [D] [M] [M] [Y] [Y]

Lodgement

Send completed and signed forms to:
Australian Securities and Investments Commission,
PO Box 4000, Gippsland Mail Centre VIC 3841.

For more information

Web www.asic.gov.au
Need help? www.asic.gov.au/question
Telephone 1300 300 630

Guide: Application for registration of a registrable Australian body

This guide does not form part of the approved form. It is included by ASIC to assist you in completing and lodging the Form 401.

| | |
|-------------------------|--|
| Signature | This form must be signed by a director (or equivalent) or secretary of the body |
| Lodgement period | Nil – to be lodged when required. |
| Lodging fee | A lodgement fee applies to this form. For information on fees refer to www.asic.gov.au/forms . |

| | |
|---|---|
| Documents to be lodged with this application | <p>1 A current Certificate of Incorporation or a document of similar effect that confirms the body is currently registered. It must be certified and issued by the governing authority (equivalent to ASIC) in the State or Territory of the body's registration. It must be dated no more than 3 months before it is received by ASIC, unless ASIC allows a longer period.</p> <p>2 A certified copy of the body's current constitution. Certification can be by:</p> <ul style="list-style-type: none">• the governing authority (equivalent to ASIC) in the State or Territory of the body's registration or• a notary public• a written statement made by a director or secretary of the body. A Form 911 <i>Verification or certification of a document</i> may be used in this case. <p>The certified copy of the constitution must be dated no more than 3 months before it is received by ASIC, unless ASIC has approved a longer period.</p> <p>Where the body does not have a constitution, it should provide a written statement from either:</p> <ul style="list-style-type: none">• the governing authority (ASIC's equivalent) in the body's State or Territory of registration or• a director (or equivalent) or secretary of the body <p>that states the body is not required to have a constitution. Details of the relevant supporting enactment or statute of the law in the body's place of registration should also be given.</p> |
|---|---|

| | |
|----------------------|--|
| Proposed name | <p>Names: A name is available unless it is:</p> <ul style="list-style-type: none">• identical to a name that is currently reserved or registered under the <i>Corporations Act 2001</i> for another body• identical to a name that is included on the national business names register in respect of another individual or body who is not the person applying to have the name, or• unacceptable under the Regulations. <p>If the body proposes to register a name which is identical to a registered business name(s), we must be satisfied that it is authorised to use the name. The information you provide about the proposed business name in Section 2 of this form allows us to assess entitlement to the name.</p> <p>Alternatively, that information may be given in a statement attached to the Form 401 (as an annexure) under the heading 'Declaration Regarding Registered Business Name(s)'. You must provide the same information required on the Form 401. The statement must include the declaration 'I declare that the information given in this statement is true and correct' and be dated and signed by the applicant.</p> <p>Refer to Information Sheet 60 <i>Registrable Australian bodies</i> for more information on how to register and post-registration obligations.</p> |
|----------------------|--|

How to provide additional information**Photocopied Form 401 pages**

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement.

Annexures

If there is insufficient space in any section of the form, you may alternately submit annexures as part of this lodgement.

To make any annexure conform to the regulations, you must

1. use A4 size paper of white or light pastel colour with a margin of at least 10mm on all sides
2. show the company name and ACN or ARBN
3. number the pages consecutively
4. print or type in BLOCK letters in dark blue or black ink so that the document is clearly legible when photocopied
5. mark the annexure with an identifying letter or symbol eg a,b,c or 1,2,3 etc.
6. endorse the annexure with the words:

This annexure (mark) of (number) pages referred to in form (form number and title)

7. sign and date the annexure

The annexure must be signed by the same person(s) who signed the form.

Privacy

The information provided to ASIC in this form may include personal information. Please refer to our privacy policy (www.asic.gov.au/privacy) for information about how we handle your personal information, your rights to seek access to and correct personal information, and to complain about breaches of your privacy.

Lodgement

Send completed and signed forms to:
Australian Securities and Investments Commission,
PO Box 4000, Gippsland Mail Centre VIC 3841.

For more information

Web www.asic.gov.au
Need help? www.asic.gov.au/question
Telephone 1300 300 630