

Order form: Class Discretionary Trust

The Castle difference							
At Castle, we pride ourselves on the service we provide and the value we can add to you and your clients. If you tick the 'opt in' box, we will contact you if we have any suggestions or questions about any information Opt in you have entered in the form. If you would prefer for your order to be processed exactly as you have entered below, please do not tick the box. However, if we believe something is <u>incorrect</u> in your form, we will contact you to discuss it.							
Order placed by							
Your name		Telephone Facsimile					
Firm name		Email address					
Firm address							
Choose your package –	PDFs included with all packages						
		Presented in:-					
b IIA	documents printed and inserted in a folder (wi	th 2 dividers).					
Dromium	bund deeds.	Black Folder					
		Black Folder with Vertical Holder					
		Black Folder with Box and Lid					
	key documents printed. 2 bound deeds.						
	ail delivery of all documents in PDF.						
Additional order requir							
Apply for an ABN	☐ Yes – complete <u>ABN application form</u> (a						
Applicable law		SA 🗆 WA 🗆 NT 🗆 TAS 🗆 ACT					
Would you like us to attend to stamp duty ¹	Yes No If Yes please cl	noose jurisdiction ² VIC NSW NT					
¹ Additional fees apply for dee	eds to be stamped in NSW, and NT						
² Stamp duty is only applicable Delivery	e in VIC, NSW, and NT						
Delivery		Please provide specific date					
Required delivery date	ASAP Specific dat	e					
Delivery address	Firm address (listed abo	Please provide other address ve)					
Street address preferred	Other address						
Payment – The options	to pay in 14 or 30 days are only ava	ilable for approved clients					
[Cheque Please make cheque	s payable to: Castle Corporate Pty Ltd.					
Pay now	Please complete a <u>Credit Card Authorisation form</u> and return with this form.						
	Account details:						
Pay in 14 days with your <u>Enduring Credit Card Authorisation</u>							
Pay in 30 days – I, the person named above, agree to pay Castle for this order within 30 days of the invoice date							
Declaration							
By submitting this form to Castle Corporate Pty Ltd, I warrant and declare that all statements made and all details shown in this order form are true and correct and that all persons named in this order form have consented in writing to their appointment as a Trustee, Settlor or Appointor (as relevant). I indemnify Castle Corporate Pty Ltd for any and all loss							
suffered as a result of my breach of the aforesaid warranty.							

Trust details		
Name of trust		
Commencement date	\square Same as formation date of corporate trustee	□ Specify date
Settlement sum	\$	
	□ Include foreign beneficiaries	
Type of Deed	Exclude foreign beneficiaries	Recommended for trusts which intend to purchase property in Queensland, New South Wales, South Australia, Tasmania and/or Victoria to avoid duty surcharges.
Settlor		
Settlor	 Castle staff member (*note: this option is availa Other (please specify below) 	able for standard and premium packages)
Settlor name If not Castle staff member		
Settlor address If not Castle staff member		
Trustee(s) – If more than two	o trustees, please provide their details in the 'Additional information' sp	pace at the bottom of page 3.
Trustee name		ACN
Trustee address		
If corporate trustee, name of director(s)	Full Name(s) including titles
Trustee name		ACN
Trustee address		
If corporate trustee, name of director(s)	Full Name(s	i) including titles
Additional information	- use this space to give us any other information that may hel	p us to complete your order.

GROUP A: Appointors							
Do you want an appointo	or?	Yes – PleaseNo	fill in details below	If neither box	is ticked we will ass	ume an appointor is not required	
Name		Given name(s)				Surname	
Address							
Name	Given name(s) Surname			Surname			
Address							
If you have completed th	e Appointor's	section, do you	u want a success	ion plan?		🗆 Yes 🛛 No	
First appointor – one per	rson						
single appointor	Please number in order of succession	Spouse	Children	LPR	Other	Please provide name and address in Additional information on the following page	
First appointor – two or	more persons	s			-	_	
Joint appointors	Last surviving appointor succeeded by:	Spouse	Children	LPR	Other	Please provide name and address in Additional information on the following page	
□ Family appointors		Eacl	h person succee	ded by his/h	er spouse	nal representative (LPR)	
GROUP A: Primary benef	ficiaries						
		Giver	n name(s)			Surname	
Name							
Address							
Relationship to first appo	ointor		oouse 🛛 Child	Parent		ther	
Name		Give	n name(s)			Surname	
Address							
Relationship to first appo	ointor	🗆 Self 🗆 Sp	oouse 🛛 Child	Parent		ther	
Name		Giver	n name(s)			Surname	
Address							
Relationship to first appo	ointor	Self Sp	ouse 🛛 Child	Parent		ther	
Name		Give	n name(s)			Surname	
Address							
Relationship to first appo	bintor	Self Sp	oouse 🛛 Child	□ Parent		ther	
Name		Give	n name(s)			Surname	
Address							
Relationship to first appo	ointor	Self Sp	oouse 🛛 Child	Parent		ther	

GROUP B: Appointors			
Do you want an appointor?	 Yes – Please fill in details No 	below If neither box is ticked we will assu	ume an appointor is not required
Name	Given name(s)		Surname
Address			
Name	Given name(s)		Surname
Address			
If you have completed the Appoir	tor's section, do you want a s	uccession plan?	🗆 Yes 🛛 No
First appointor – one person			_
Please nur single appointor succession		en LPR Other	Please provide name and address in Additional information on the following page
First appointor – two or more pe	rsons		
Last surviv Joint appointors appointor succeeded		en LPR Other	Please provide name and address in Additional information on the following page
Family appointors	Each person s	succeeded by his/her legal person succeeded by his/her spouse use Additional information section	
GROUP B: Primary beneficiaries			
Name	Given name(s)		Surname
Address			
Relationship to first appointor	□ Self □ Spouse □	Child Parent LPR Ot	her
Name	Given name(s)		Surname
Address			
Relationship to first appointor	□ Self □ Spouse □	Child Parent LPR Ot	her
Name	Given name(s)		Surname
Address			
Relationship to first appointor		Child Parent LPR Ot	her
Name	Given name(s)		Surname
Address			
Relationship to first appointor		Child Darent LPR Ot	
Name	Given name(s)		Surname
Address			
Relationship to first appointor	□ Self □ Spouse □	Child 🗆 Parent 🗆 LPR 🗆 Ot	her

GROUP C: Appointors						
Do you want an appointor?	Yes – Plea No	ase fill in details below	If neither box i	is ticked we will ass	ume an appointor is not required	
Name	Given name	(s)			Surname	
Address						Ì
Name	Given name(s) Surname			Surname		
Address					J	
If you have completed the App	ointor's section, do	you want a succes	sion plan?		Yes No	
First appointor – one person						
Please single appointor success		Children	LPR	Other	Please provide name and address in Additional information on the following page	
First appointor – two or more	persons	·				
Last sur Joint appointors appoint succeed	tor	Children	LPR	Other	Please provide name and address in Additional information on the following page	
Family appointors	🗆 E	ach person succee	ded by his/he	er spouse	al representative (LPR) on at the bottom of page 3.	
GROUP C: Primary beneficiarie	es					
Name		Given name(s)			Surname	
Address						
Relationship to first appointor	🗆 Self 🛛	Spouse 🛛 Child	Parent	🗆 LPR 🗖 Ot	her	
Name		Given name(s)			Surname	
Address						
Relationship to first appointor	□ Self □	Spouse 🛛 Child	Parent	🗆 lpr 🗆 Ot	her	
Name		Given name(s)			Surname	
Address						
Relationship to first appointor	□ Self □	Spouse 🛛 Child	Parent	🗆 lpr 🗆 Ot	her	
Name		Given name(s)			Surname	
Address						J
Relationship to first appointor	Self	Spouse 🛛 Child	Parent	LPR Ot	her	
Name		Given name(s)			Surname	
Address]
Relationship to first appointor	🗆 Self 🛛	Spouse 🛛 Child	Parent	LPR Ot	her	

GROUP D: Appointors							
Do you want an appointo	or?	Yes – PleaseNo	fill in details below	If neither box	is ticked we will ass	ume an appointor is not required	
Name		Given name(s)				Surname	
Address							
Name	Given name(s) Surname			Surname			
Address							
If you have completed th	e Appointor's	section, do you	u want a succes	sion plan?		🗆 Yes 🛛 No	
First appointor – one per	rson						
single appointor	Please number in order of succession	Spouse	Children	LPR	Other	Please provide name and address in Additional information on the following page	
First appointor – two or	more persons	•				_	
Joint appointors	Last surviving appointor succeeded by:	Spouse	Children	LPR	Other	Please provide name and address in Additional information on the following page	
□ Family appointors		Eacl	h person succee	ded by his/h	er spouse	nal representative (LPR) on at the bottom of page 3.	
GROUP D: Primary benef	ficiaries						
Name		Give	n name(s)			Surname	
Address							
Relationship to first appo	ointor	□ Self □ Sp	oouse 🛛 Child	🗆 Parent	🗆 lpr 🗆 Ot	ther	
Name		Giver	n name(s)			Surname	
Address							
Relationship to first appo	ointor	□ Self □ Sp	oouse 🛛 Child	🗆 Parent	🗆 lpr 🗆 Ot	ther	
Name		Giver	n name(s)			Surname	
Address							
Relationship to first appo	bintor	🗆 Self 🗆 Sp	oouse 🛛 Child	Parent	LPR Ot	ther	
Name		Give	n name(s)			Surname	
Address							
Relationship to first appo	ointor	□ Self □ Sp	oouse 🛛 Child	Parent		ther	
Name		Give	n name(s)			Surname	
Address							
Relationship to first appointor		Self Sp	ouse 🛛 Child	Parent		ther	

Additional information – GROUP D

GROUP E: Appointors					
Do you want an appointor?	Yes – Please	e fill in details below	If neither box is	s ticked we will assu	ume an appointor is not required
Name	Given name(s)				Surname
Address					
Name	Given name(s)				Surname
Address					
If you have completed the App	pointor's section, do yo	ou want a successi	ion plan?		🗆 Yes 🛛 No
First appointor – one person					_
Please single appointor in ord succes		Children	LPR	Other	Please provide name and address in Additional information on the following page
First appointor – two or more	e persons				_
☐ Joint appointors appoir	Spouse surviving htor eded by:	Children	LPR	Other	Please provide name and address in Additional information on the following page
□ Family appointors	🗆 Ead	ch person succeed	led by his/he	er spouse	al representative (LPR) on at the bottom of page 3.
GROUP E: Primary beneficiari	es				
		en name(s)			Surname
Name					
Address					
Relationship to first appointor	□ Self □ S	pouse 🛛 Child	□ Parent	□ LPR □ Ot	her
Name	Givi	en name(s)			Surname
Address					
Relationship to first appointor	Self S	pouse 🛛 Child	□ Parent I	□ lpr □ Ot	her
Name	Give	en name(s)			Surname
Address					
Relationship to first appointor	Self S	pouse 🛛 Child	Parent	□ LPR □ Ot	her
Name	Givi	en name(s)			Surname
Address					
Relationship to first appointor	□ Self □ S	pouse 🛛 Child	□ Parent	LPR Ot	her
Name	Giv	en name(s)			Surname
Address					
Relationship to first appointor	Self S	Self Spouse Child Parent LPR Other			her

GROUP F: Appointors						
Do you want an appointor?	 ☐ Yes – Please fill in details below ☐ No 	er box is ticked we will assume an appointor is not required				
Name	Given name(s)	Surname				
Address						
Name	Given name(s)	Surname				
Address						
If you have completed the Appointor	's section, do you want a succession plar	n? 🗌 Yes 🗌 No				
First appointor – one person						
Please number in order of succession	Spouse Children LPR	Other Please provide name and address in Additional information on the following page				
First appointor – two or more perso	15					
Last surviving Joint appointors succeeded by:	Spouse Children LPR	Other Please provide name and address in Additional information on the following page				
□ Family appointors	\Box Each person succeeded by I	his/her legal personal representative (LPR) his/her spouse al information section at the bottom of page 3.				
GROUP F: Primary beneficiaries						
Name	Given name(s)	Surname				
Address						
Relationship to first appointor	Self Spouse Child Par	ent 🗆 LPR 🗆 Other				
Name	Given name(s)	Surname				
Address						
Relationship to first appointor	□ Self □ Spouse □ Child □ Par	ent 🗆 LPR 🗆 Other				
Name	Given name(s)	Surname				
Address						
Relationship to first appointor	Self Spouse Child Par	ent 🗆 LPR 🗆 Other				
Name	Given name(s)	Surname				
Address						
Relationship to first appointor	□ Self □ Spouse □ Child □ Par	ent 🗆 LPR 🔲 Other				
Name	Given name(s)	Surname				
Address						
Relationship to first appointor	Self Spouse Child Par	ent 🗆 LPR 🗆 Other				