Company name



## Order form: Public company limited by guarantee

For all other types of companies, please fill in the Company order form by <u>clicking here</u>.

	The Castle dif	he Castle difference											
	□Opt in ti e d	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												
Г	Your name				1	Telephone		Facsimile					
_	Firm name				,	Email address							
L	Firm address												
Г	Firm address												
	Choose your r	nackage – Di	DEs included w	vith all nackages									
	Choose your package – PDFs included with all packages												
☐ Electronic Email delivery of all documents in PDF.  ☐ Standard All key documents printed and inserted in a folder (with 6 dividers). 2 bound constitutions.													
	☐ Standard	All key doo	uments printed ar	nd inserted in a folder	(wit	th 6 dividers). 2 bound	constitutions.						
					Presente	Presented in:-							
		All docume	ents printed and ir	serted in a folder (wit	h 12	2 dividers).	Whit						
	☐ Premium		onstitutions.	,		,		☐ White Folder with Slip Case ☐ Black Folder					
					_	c Folder with Box and Lid							
-	Additional order requirements												
		der requiren	nents										
	Please tick your additional	☐ Apply	☐ Apply for an ABN – complete ABN application form (additional fee of \$231 applies)										
	requirements	□ Comi	☐ Common Seal (additional fee applies - \$55 for Premium & Standard packages; \$66 for Electronic packages)										
	Domain			•	ffer domain names, but there are many online companies that can sell								
	names	domain names at a low price. Two popular Australian providers are: <a href="www.netregistry.com.au">www.netregistry.com.au</a> and www.crazydomains.com.au.											
	Delivery	and <u>www</u>	w.crazyuomam	s.com.au.		_							
Т	Please provide specific date												
	Required deliv	ery date		□ ASAP □ S									
	Delivery addre	ess	☐ Firm addr	ess (listed above)	dress								
	Street address pr	eferred	☐ Other add	dress									
	Payment – The options to pay in 14 or 30 days are only available for approved clients												
		□с	heque	Please make cheques payable to: Castle Corporate Pty Ltd.									
	☐ Pay now ☐		Credit card Please complete a <u>Credit Card Authorisation form</u> and return with this form.										
	•	□в	Bank deposit  Account details:  Please provide reference you will use for direct deposit										
	BSB. 083-543, ACCOUNT. 00-332-9114												
	Pay in 14 days with our Enduring Credit Card Authorisation												
	☐ 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, in accordance with the <i>Corporations A</i> and declare that all statements made and all details shown in this order form are true and													
persons named in this order form have consented in writing to their appointment as a director, shareholder (as relevant) and each person nominated as a director has applied for their Director													
		nnify Castle Corporate Pty Ltd for any and all loss suffered as a result of my breach of the aforesaid warranty.											

Company details									
Company name (Please enter the name exactly you would like it to appear	y as								
Existing business name	□ Yes □ No								
Registration jurisdiction	□ VIC □ NSW □ QLD □ SA □ WA □ NT □ TAS □ ACT								
Registration date	☐ ASAP ☐ Future date Please provide future date Guarantee Amount \$								
Do you require a special Charitable companies only	purpose company? ☐ Yes ☐ No								
Company address									
Registered office Australian street address only	☐ Firm address (as provided on page 1) ☐ Other address								
Will the new company occupy this office?	☐ Yes ☐ No ☐ Firm (as provided on page 1)☐ Other								
Principal place of business Australian street address only	☐ Registered office ☐ Other address								
Officer and member det	tails — At least three directors, one secretary and one member required								
Party 1 – must be a dire									
Title									
Name	Given name(s)  Surname								
Address Must be residential									
Office held Di	☐ Director ☐ Secretary ☐ Public officer								
Date of birth	Place of birth  City State (Country if not Australia)								
Is this person a member	? ☐ Yes ☐ No								
Party 2 – must be a dire	ctor and an individual								
Title	Ir □ Mrs □ Ms □ Miss □ Dr □ Other Other								
Name	Iddress ust be residential								
Address Must be residential									
Office held Di									
Date of birth	Place of birth  City State (Country if not Australia)								
Is this person a member	? □ Yes □ No								
Party 3 – must be a dire	ctor and an individual								
Title	Ir □ Mrs □ Ms □ Miss □ Dr □ Other								
Name Given na	me(s) Surname								
Address Must be residential									
Office held Di	irector   Secretary   Public officer								
Date of birth	Place of birth  City State (Country if not Australia)								
Is this party a member?	☐ Yes ☐ No								

P	arty 4 – officer/n	nember (	OR corpor	ate me	mbe	r						
	Name											
	□ Individual	☐ Mr	☐ Mrs	□ M:	s 🗆	Miss	□ D	r	□ Other	Othe	r – please sp	ecify
		Given name(s						Surname				
L	☐ Corporate	Compan	y Name								ACN	
		☐ One – advise full name to the right ☐ Two or more directors - names not required										
	Address If an officer, must be residential											
0	Officer details Onl	ly complete	if the party	is an off	icer							
0	Office held	☐ Direc	ctor		□ Se	ecretary			☐ Public officer			
D	ate of birth				Place	of birth	1	С	iity		State	(Country if not Australia)
ls	s this party a men	nber?	☐ Yes	□ N	lo							
_	arty 5 – officer/n				mbe	r						
	lame											
	☐ Individual	□ Mr	☐ Mrs	□ M:	s 🗆	] Miss	□ D	r	☐ Other	Othe	er – please sp	ecify
	ſ	Given name(s	<u> </u>						Surname			
	☐ Corporate	Compan	y Name								ACN	
			– advise full or more c				equired					
	Address an officer, must be re	esidential										
0	Officer details Onl	ly complete	if the party	is an off	icer							
0	Office held	☐ Direc	ctor		□ Se	ecretary			☐ Public officer			
D	Date of birth			Place of birth			,	City			State	(Country if not Australia)
U	ate of birtii				Place	יו ווע וט						
ls	s this party a men	nber?	☐ Yes	$\square$ N	lo							
									nat may help us to co			

Special instructions for a constitution f	or a public company limited by guarantee.						
Will you supply the constitution?	<ul> <li>Yes You are not required to complete the remainder of this page. Please email the constitution to <a href="mailto:castle@castlecorp.com.au">castle@castlecorp.com.au</a> with the company name in the subject line.</li> <li>□ No Please complete the remaining questions below.</li> </ul>						
2. Are the directors to be on rotation?	☐ Yes ☐ Every year ☐ Every 2 years ☐ Every 3 years ☐ Every 4 years ☐ No						
3. What will be a quorum for a general meeting? (Choose one)	<ul> <li>□ Of all members, at least: □ one half □ one third □ one quarter</li> <li>□ At least [please insert number] members</li> <li>□ Whichever is the smaller between:</li> <li> [please insert number] members, or</li> <li> [please insert proportion] of the members</li> <li>□ Other − please provide details:</li> </ul>						
4. What will be a quorum for a board meeting? (Choose one)	<ul> <li>□ Of all directors, at least: □ one half □ one third □ one quarter</li> <li>□ At least [please insert number] directors</li> <li>□ Whichever is the smaller between: [please insert number] directors, or [please insert proportion] of the directors</li> <li>□ Other - please provide details:</li> </ul>						
5. Do you require deductible gift receipt endorsement?	□ No       □ Yes − please indicate the most appropriate category(choose one):         □ Animal welfare charity       □ Overseas aid fund         □ Charitable service institution       □ Private ancillary fund         □ Cultural organisation       □ Public ancillary fund         □ Environmental organisation       □ Public benevolent institution         □ Health promotion charity       □ Scholarship fund         □ Necessitous circumstances fund						
6. Is the chairman to have a casting vote at general meetings?	□ Yes □ No						
7. Is the chairman to have a casting vote at board meetings?	□ Yes □ No						
Purposes of company — Please outline the	objectives/activities the company will undertake.						