New SMSF Application Form



PART A - CHOOSE YOUR PACKAGE	5. Corporate Trustee - New Company
1. Select Your Establishment Package	Proposed Name of Company
	Proposed Name of Property Trust Company (if applicable)
2. Select Your Ongoing Service	
Mini Classic	Registered Address
	C/- Sequoia Superannuation Pty Ltd
PART B - NEW FUND & ESTABLISHMENT	GPO Box 4350, Sydney NSW 2001
3. Proposed name of Self-Managed Superannuation Fund (SMSF)	6. Credit Card Guarantee
	Credit Card Details
	MasterCard Visa
4. SMSF Primary Contact Person	Credit card no.
Family Name	Name on card
Given Names	CVV No.
SMSF Primary Postal Address	
No/Street	Expiry
Suburb	Signature
State/Territory	
Postcode	By signing this section I agree for Sequoia Superannuation to charg
SMSF Primary Contact Details	my nominated credit card as per Part D of this application form.
Work	
Home	
Fax	
Mobile	
Email	

When you complete this form, please:

- Use a black pen;
- Write clearly in block letters;
- Answer all applicable questions;
- Ensure it is signed.





PART C - INDIVIDUAL TRUSTEES/ **DIRECTORS/MEMBER DETAILS**

7A. Member/Trustee/Director 1	C. Member/Trustee/Director 3 (if applicable)
Mr Miss Ms Other	Mr Mrs Miss Ms Other
Family Name	Family Name
Given Names	Given Names
DOB	DOB
Place of Birth	Place of Birth
Gender Male Female	Gender Male Female
Occupation	Occupation
TFN	TFN
Email	Email
Mobile	Mobile
Residential Address – Member/Trustee/Director 1	Residential Address – Member/Trustee/Director 3
No/Street	No/Street
Suburb	Suburb
State/Territory Postcode	State/Territory Postcode
Trustee/Director & Member Trustee/Director Only	Trustee/Director & Member Trustee/Director Only
P. Momboy/Typotos/Divector 2 (if applicable)	D. Mambar/Trustas/Director 4 (if applicable)
B. Member/Trustee/Director 2 (if applicable) Mr Mrs Miss Ms Other	D. Member/Trustee/Director 4 (if applicable) Mr Mrs Miss Ms Other
Family Name	Family Name
Given Names	Given Names
DOB	DOB
Place of Birth	Place of Birth
Gender Male Female	Gender Male Female
Occupation Terriale	Occupation
TEN	TFN
Email	Email
Mobile	Mobile
Residential Address – Member/Trustee/Director 2 No/Street	Residential Address – Member/Trustee/Director 4 No/Street
Suburb	Suburb
State/Territory Postcode	State/Territory Postcode
Trustee/Director & Member Trustee/Director Only	Trustee/Director & Member Trustee/Director Only

New SMSF Application Form



PART D - SIGNATURES & CLIENT **AGREEMENT**

8. Agreement

By signing this form:

- I/We agree that Sequoia Superannuation Pty Ltd may collect, use and store my/our personal information for the purpose of processing my/our Application and to provide ongoing services. This complies with the relevant laws as well as in accordance with Sequoia Superannuation Privacy Policy, a copy of which can be provided on my/our request. Such information may include but is not limited to: Tax File Numbers (TFNs), Bank Account details, Drivers' Licence and Passport information. I/We also understand that I/we can request in writing this personal information that Sequoia Superannuation Pty Ltd holds on me/us.
- I/We hereby declare that the above information is true and correct at the time of completing this application form.
- In the case of a new SMSF & Corporate Trustee company (if applicable), I/we instruct Sequoia Superannuation Pty Ltd to provide the necessary documentation in order to establish the SMSF, SMSF Corporate Trustee and agree to the Establishment Fees provided to me/us. Sequoia Superannuation Pty Ltd requires payment within a month of the date this application form being signed and reserves the right to charge the Credit Card provided if payment is not received within that time
- I/We acknowledge and agree that Sequoia Superannuation Pty Ltd is appointed as the administrator of my/our SMSF from the date this application form was signed and agree to Sequoia's fee schedules as updated from time to time and consent to the payment terms and conditions.
- I/We agree for Sequoia Superannuation Pty Ltd to undertake the ongoing Administration and Compliance Service of my/our new SMSF for a minimum of 2 years from the date this application form was signed.
- I/We agree if I/we choose to cease Sequoia Superannuation's SMSF Administration and Compliance Service (either explicitly or implied) with Sequoia Superannuation Pty Ltd before a period of no less than 2 years from the date this application form was signed, the Sequoia Super Establishment Package fee will be charged either to my credit card, or an invoice sent to me, in addition to a minimum 2 years of Ongoing Service fees as selected in Part A of this application form. For the avoidance of doubt, I/we agree that I am liable to pay these

fees as at the date of this signed application form.

- I/we agree that in the case of an ATO Audit that either delays, rejects or withholds my ABN application I am liable to pay the Sequoia Super Processing Fee (\$550) and this will be charged to my Credit Card or Invoiced to me personally.
- I/we agree that if I/we remove any Sequoia Superannuation Authority/ Data feed(s) from a 3rd Party, Sequoia reserves the rights to deem this a cessation of service and charge fees as per above, and/or, cease any ongoing work on the SMSF and cancel the agreement.
- I/We choose Sequoia Superannuation Pty Ltd to look after the company secretarial matters (if applicable).
- I/We acknowledge that Sequoia Superannuation Pty Ltd will register the Corporate Trustee (if applicable) and Superannuation fund with the Australian Taxation Office for the purpose of acquiring an Australian Business Number and Tax File Number (where applicable).
- I/We agree to the release of information between Sequoia Superannuation Pty Ltd and my/our listed adviser/client representative as set out in Part E of this application form.
- I/We authorise Sequoia Superannuation Pty Ltd to deduct its fees monthly from the SMSF bank account.
- I/We acknowledge that Sequoia Superannuation Pty Ltd does not provide financial advice and that I/we should seek personal financial planning advice before opening a SMSF, transferring any funds into my/our SMSF and before making any investments.
- I/we understand and accept that Sequoia Superannuation Pty Ltd accepts no responsibility for the quality and/or likely future performance of my/our Superannuation investments.
- I/We acknowledge that Sequoia Superannuation Pty Ltd is entitled to change the terms and conditions of this agreement, including the replacement of the administrator, with 30 days written notice or cancel this agreement without notice.
- I/We authorise Sequoia Superannuation Pty Ltd to collect the Adviser Service Fee in Section 10 and pay it through to the Listed 3rd Party in Section 9.
- I/We authorise Sequoia Superannuation Pty Ltd to act as an ASIC agent in respect to the SMSF company trustee (if applicable).

Member/Director/Trustee 1			
Name			
Signature			
Date			
Member/Director/Trustee 2 (if applicable)			
Name			
Signature			
Date			

Member/Dire	ctor/Trustee	3 (if	applicable)

Name	
Signature	
o.g. ia.a. o	
Date	

Member/Director/Trustee 4 (if applicable)

nombon Brooton Hudtoo I (ii applicable)	
Name	
Signature	
Date	





Please return your completed form:

Sequoia Superannuation Pty Ltd

By post to:

ABN 92 140 669 692

PART E - ADVISER/CLIENT REPRESENTATIVE USE ONLY

9. Adviser/Client Representative	GPO Box 4350
Name	SYDNEY NSW 2001
AFSL Number	OR
License Name	Scan and email to: admin@sequoia.com.au
Company Name	Please provide us with the following ID requirements to ensure that we have all the required information to process your rollover request
ABN	Certified copy of your driver's license or passport
Postal Address	OR
No/Street	Certified copy of birth/citizenship certificate
Suburb	OR
State/Territory	You have previously provided copies of your ID to
Postcode	Sequoia Superannuation.
10. Adviser Service Fee	
If your adviser has negotiated a fee for service to be paid from your	
fund it will be recorded here:	
% based Fee (per annum)	
Flat \$ Fee (per annum)	
Implementation Fee (one off)	
or	

Sequoia Superannuation Sydney | Melbourne

Web: www.sequoiasuper.com.au

Ph: 02 8114 2290

Email: admin@sequoia.com.au

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