

New Superannuation Company Order Form

Fax to: (08) 8271 5133 or email to: admin@evolutionsuper.com.au

Contact Details

Company Name _____

Contact Name _____

Telephone _____

Fax _____

Email _____

Address _____

Proposed Company Details

Preferred Company Name _____

2nd choice Company Name _____

3rd choice Company Name _____

State of Incorporation _____

Reg Office Address
Level / Street _____

Reg Office Address
Suburb / State / Postcode _____

Will the Company occupy this office? Yes No

If No, Name of Occupant _____

Is this the Principal Place of Business? Yes No

If No, Principal place of Business
Level / Street _____

Principal place of Business
Suburb / State / Postcode _____

Office and Member Details

(1st Officer defaults as Chairman and Public Officer of the Company)

If the trustee is a company:

1. all members of the fund must be directors; or
2. if there is only one member, the member must be either:
 - 2.1 the sole director; or
 - 2.2 one of only two directors and the other director must not be the member's employer unless he or she is a relative.

evolution
super 

60 Greenhill Road, Wayville
South Australia 5034
t: 08 8271 2711
f: 08 8271 5133
e: admin@evolutionsuper.com.au
www.evolutionsuper.com.au

Evolution Super Pty Ltd. ABN 83 124 160 961
Evolution Super (Australia) Pty Ltd ABN 27 127 750 289
Australian Financial Services Licence No. 319810

New Superannuation Company Order Form

Director 1

Surname / Company Name

Given Names / ACN

Address Level / Street

Address Suburb / State / Postcode

Date of Birth

Place of Birth

Is this Person a Director? Yes No

Is this Person a Secretary? Yes No

Is this Person a Shareholder? Yes No

Class of Shares

Number of Shares

Are Shares Beneficially Owned Yes No

If not, as Trustee for

Director 2

Surname / Company Name

Given Names / ACN

Address Level / Street

Address Suburb / State / Postcode

Date of Birth

Place of Birth

Is this Person a Director? Yes No

Is this Person a Secretary? Yes No

Is this Person a Shareholder? Yes No

Class of Shares

Number of Shares

Are Shares Beneficially Owned Yes No

If not, as Trustee for

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Director 3

Surname / Company Name

Given Names / ACN

Address Level / Street

Address Suburb / State / Postcode

Date of Birth

Place of Birth

Is this Person a Director? Yes No

Is this Person a Secretary? Yes No

Is this Person a Shareholder? Yes No

Class of Shares

Number of Shares

Are Shares Beneficially Owned Yes No

If not, as Trustee for

Director 4

Surname / Company Name

Given Names / ACN

Address Level / Street

Address Suburb / State / Postcode

Date of Birth

Place of Birth

Is this Person a Director? Yes No

Is this Person a Secretary? Yes No

Is this Person a Shareholder? Yes No

Class of Shares

Number of Shares

Are Shares Beneficially Owned Yes No

If not, as Trustee for

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