

# New Self Managed Superannuation Fund Trust Deed Order Form

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

## Contact Details

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Fund Details

Name of Fund \_\_\_\_\_

## Member / Trustee Details

There must be one to four members.

No member may be an employee of another member unless the members concerned are relatives.

If the trustees are individuals:

1. all members of the fund must be trustees

1.  Member  Trustee (tick one)

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

TFN \_\_\_\_\_

Residential Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2.  Member  Trustee (tick one)

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

TFN \_\_\_\_\_

Residential Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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

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3.  Member  Trustee ( tick one )

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

TFN \_\_\_\_\_

Residential Address \_\_\_\_\_

4.  Member  Trustee ( tick one )

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

TFN \_\_\_\_\_

Residential Address \_\_\_\_\_

## Corporate Trustee

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.

New Company Complete 'New Company Order Form'

Existing Company Complete details below:

Name \_\_\_\_\_

ACN \_\_\_\_\_

Registered Office Level / Street \_\_\_\_\_

Registered Office Suburb / State / Postcode \_\_\_\_\_

Director 1 \_\_\_\_\_

Director 2 \_\_\_\_\_

Director 3 \_\_\_\_\_

Director 4 \_\_\_\_\_

Administration of SMSF to be provided by Evolution Super

Yes  No If yes, estimate number of investments:



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