**TRUST AMENDMENT ORDER FORM**

**Person ordering**

|  |  |
| --- | --- |
| Name:       |  |
| Firm Name:       | Member number:       |
| Phone:       |  | Email:       |

**Section A: Amendment details**

Please select required products and provide credit card details for payment.

|  |  |  |
| --- | --- | --- |
| [ ]  Change of Trustee  | [ ]  Renunciation of Beneficiary | [ ]  Vesting |
| [ ]  Change of Name | [ ]  Exclusion of Beneficiary | [ ]  Deed of Rectification |
| [ ]  Change of Appointor/ Principal/Guardian | [ ]  Nomination of Beneficiary  | [ ]  Change of Successor Appointor/Principal/Guardian |

**$350 for the first amendment, additional $220 for each additional change requested.**

All prices include GST and the documentation will be sent to the nominated email address in PDF format.

|  |
| --- |
| **Provide amendment details here:**       |
|       |
|       |
|       |
|       |

If a deed of Renunciation/Exclusion of Beneficiary is being ordered, please advise whether the change is to be revocable or irrevocable.

 **Section B: Payment details**

|  |
| --- |
| Enclosed is payment for Trust amendment documentation for the sum of: **$**      |
| [ ]  On Account\*  | [ ]  Visa  | [ ]  Mastercard  | [ ]  Amex |
| Card Holder Name:       |
| Credit Card Number:       |
| Expiry Date:       /       | Authorised Card Signature:       |

 Note that our staff will call you to request the CVV when payment is processed.

\*To pay on account you must have a current On Account Agreement with Docscentre.

**Please complete all details in legible handwriting and provide full legal names.**

**Return completed form, a complete copy of the signed trust deed and any subsequent amendment documentation to** **info@docscentre.com.au**



**TRUST AMENDMENT ORDER FORM**

**Section C: Trust Details**

|  |  |
| --- | --- |
| Trust Name:       |  |
| Date of original trust deed:       /       /        | Date of last amendment: |       /       /       |
| Does the Trust own dutiable property in NSW or ACT?  |  [ ]  Yes | [ ]  No |

**Section D: Current Trustee Details**

|  |
| --- |
| Trustee Name:       |
| ACN (if a company):       |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |

**Section E: Current Appointor/Principal Details**

|  |  |  |
| --- | --- | --- |
| Full Name:       |  |  |
| Full Name:       |  |  |
| Full Name:       |  |  |
| Full Name:       |  |  |

**Section F: Current Unit holder details (if a Unit Trust)**

|  |
| --- |
| Unitholder 1. |
| Full Name:        |  |  |
| Address:        |
| Unitholder 2. |
| Full Name:        |  |  |
| Address:        |  |  |
| Unitholder 3. |
| Full Name:        |  |  |
| Address:        |  |  |



**TRUST AMENDMENT ORDER FORM**

**Section G: Change of Trustee/Appointor/Principal/Guardian**

|  |  |
| --- | --- |
| Full Name:       |  |
| ACN (if a company):       |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Change of: [ ]  Trustee [ ]  Appointor [ ]  Principal [ ]  Guardian |

[ ]  Continue [ ]  Appoint [ ]  Remove [ ]  Resign [ ]  Other (e.g. Death, Bankruptcy, Incapacity)

|  |  |
| --- | --- |
| Full Name:       |  |
| ACN (if a company):       |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Change of: [ ]  Trustee [ ]  Appointor [ ]  Principal [ ]  Guardian |

[ ]  Continue [ ]  Appoint [ ]  Remove [ ]  Resign [ ]  Other (e.g. Death, Bankruptcy, Incapacity)

|  |  |
| --- | --- |
| Full Name:       |  |
| ACN (if a company):       |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Change of: [ ]  Trustee [ ]  Appointor [ ]  Principal [ ]  Guardian |

[ ]  Continue [ ]  Appoint [ ]  Remove [ ]  Resign [ ]  Other (e.g. Death, Bankruptcy, Incapacity)

|  |  |
| --- | --- |
| Full Name:       |  |
| ACN (if a company):       |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Officer name and Role:        | [ ]  Director | [ ]  Secretary |
| Change of: [ ]  Trustee [ ]  Appointor [ ]  Principal [ ]  Guardian |

[ ]  Continue [ ]  Appoint [ ]  Remove [ ]  Resign [ ]  Other (e.g. Death, Bankruptcy, Incapacity)



**TRUST AMENDMENT ORDER FORM**

**Special Instructions/Additional information:**

|  |
| --- |
|       |
|       |
|       |
|       |

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|  |
| --- |
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