



## ABN, GST, TFN & PAYG Applications - Trust

Trust Name	_____	Date	_____
Contact Name	_____	Phone	_____
Email	_____	Tax Agent Number:	_____

Trust Name \_\_\_\_\_

### You wish to apply for the following

ABN	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Trust tax file number	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GST Number	<input type="checkbox"/> Yes	<input type="checkbox"/> No
PAYG Number	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### 1. This section must be completed (for ABN & TFN)

Does the Trust have a Trading Name (ie Business Name)?  Yes  No

If so please list below

1. \_\_\_\_\_

2. \_\_\_\_\_

Does the Trust have more than one business location in Australia? if so please advise where else in Australia

\_\_\_\_\_

Who is/are the Trustee(s) of the New Trust?

\_\_\_\_\_

Describe the main activity from which the Trust derives the majority of its business income

\_\_\_\_\_

### 2. Only complete this section if applying for GST number

You are required to register for GST

- if you are carrying on an enterprise in Australia and your GST turnover is \$75 000 or more (\$150 000 or more for non-profit organisations)
- if you supply taxi or limousine travel for fares
- if you are a representative of an incapacitated company (where the incapacitated Company is registered or required to be registered)
- if you are a resident agent acting as a non-resident (where the non-resident is registered or required to be registered)

What is the Trust annual GST Turnover (approximately) \$ \_\_\_\_\_

How often will you lodge the activity statement?  Quarterly  Monthly

Does the Trust intend to account for GST on a Cash or Accrual Basis?  Cash  Accrual

Does the Trust import goods or services into Australia?  No  Yes

Financial Account details (if available)

BSB \_\_\_\_\_

Account Number \_\_\_\_\_

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

(Account Details when available can be phoned through to ATO for GST credits etc)

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### 3. Only complete below if applying for a PAYG number

How many employees does the Trust estimate it will pay? \_\_\_\_\_

What amount does the Trust expect to withhold from payments to its payees each year? \_\_\_\_\_

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### 4. This section must be completed

Authorisation is hereby given to Shelf Company Services Australia Pty Ltd ACN 608 393 451 to make application for the above completed sections on our behalf for this Trust

Print Name \_\_\_\_\_

Position \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

I attach credit card details for payment of the Application.

We accept the following credit cards - Master, Visa & Amex

### Credit card details

Name \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiry Date \_\_\_\_\_

CVV \_\_\_\_\_

Signature \_\_\_\_\_

Should you wish to deposit payment directly into our bank account via EFT please see our bank account details below:-

**Bank: BOQ**

**BSB: 124102**

**Account Number: 22401440**

(Please note: funds deposited into our bank account will need to be cleared prior to documents being processed)

PLEASE NOTE: IF YOU DO NOT HOLD AN ACCOUNT WITH SHELF COMPANY SERVICES AUSTRALIA PTY LTD ACN/ABN 52 608 393 451, PLEASE PROVIDE THE PAYMENT WITH YOUR ORDER. EMAIL ALL ORDER FORMS TO [info@shelfcompany.com.au](mailto:info@shelfcompany.com.au).