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**Form 201** 

Corporations Act 2001

# Application for registration as an Australian company

Use this form to apply to ASIC for registration of a company under the Corporations Act 2001.

#### **Related Forms**

208 - Notification of details of shares allotted other than for cash

Lodgement details	Who should ASIC contact if there is a query about this form? ASIC registered agent number (if applicable)				
An image of this form will be available as part of the public register.	, , , , , , , , , , , , , , , , , , ,				
art of the public register.	Firm/organisation				
	Contact name/position description Telephone number (during business hours)				
	Email address (optional)				
	Postal address				
	Suburb/City State/Territory Postcode				
	Give State or Territory				
2 Details of the company	v				
2 Details of the compan	Does the company have a proposed company name?				
2 Details of the compan	ī				
2 Details of the compan	Does the company have a proposed company name?				
2 Details of the compan	Does the company have a proposed company name?  Yes  If yes, the proposed company name is				
2 Details of the compan	Does the company have a proposed company name?  Yes				
2 Details of the compan	Does the company have a proposed company name?  Yes  If yes, the proposed company name is				

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### 2 Continued ... Further details of the company Is the proposed name identical to a registered business name(s)? If yes, I declare that I hold, or am registering the company for the holder(s) of, the identical business name(s), the registration details of which are listed below. ABN or For business names registered before Previous business number Previous state/territory of registration 28 May 2012 without an ABN. Type of company Class of company Special purpose (if applicable) proprietary company limited by shares unlimited with a share capital home unit (HUNT) superannuation trustee (PSTC) charitable purposes only (PNPC) public company limited by shares limited by guarantee unlimited with a share capital no liability superannuation trustee (ULSS) charitable purposes only (ULSN) If this is a special purpose company, tick the box below to make the declaration. Special purpose company Refer to Guide for descriptions of special purpose companies. I declare that this company is a special purpose company as defined under Regulation 3 of the Corporations

A public company that is:

- a superannuation trustee, or
- for charitable purposes only, must have a constitution.

(Review Fees) Regulations 2003.

Governance of a public company

The company will rely entirely on replaceable rules

The company has a constitution

A proposed public company which has adopted a "Constitution" must lodge a copy of the constitution with this application.

If the proposed company is to be a public company limited by guarantee, state the amount of the guarantee that each member agrees to in writing.

The amount of the member's guarantee is \$ (insert amount)

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Registered office	At the office of, C/- (if applicable)						
You cannot use a PO Box address							
	Office, unit, level						
	Street number and Street name						
	Officer number and officer name						
	Suburb/City State/Territory Postcode						
	Does the company occupy the premises?  Yes						
	No If no, name of occupier						
	ii no, name oi occupiei						
	Occupier's consent (Select box to indicate the statement below is correct)  The occupier of the premises has consented in writing to the use of the specified address as the address of the registered office of the company and has not withdrawn that consent.						
Office hours For a public company	a. Registered office of a public company is open to the public each business day from at least 10 am to 12 noon and 2 pm to 4 pm.						
	b. Registered office of a public company is open to the public each business day for at least 3 hours between 9						
	am and 5 pm.						
	If b, insert hours open from close to						
Principal place of business	If same as registered office, write "as above".						
	Office, unit, level						
	Street number and Street name						
	Suburb/City State/Territory Postcode						
	Country (if not Australia)						

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3 Appoint officeholder			'				
A public company must have a minimum	Office held						
of 3 directors (2 resident in Australia)	Office held						
and 1 secretary (resident in Australia).	Director Secretary						
A proprietory company must have	Family name Given names						
A proprietary company must have a minimum of 1 director (resident in							
Australia). The office of secretary is	Former name						
optional, but if appointed one must							
reside in Australia.	Street number and Street name						
Officeholder(s) appointment date shall							
be effective from the beginning of the	Suburb/City	Sta	ate/Territory	Postcode			
day on which the company becomes registered.							
registered.	Country (if not Australia)						
	Date of birth						
	Place of birth (town/city)		(state/country)				
3 Continued Appoint a	nother officeholder						
A public company must have a	Office held						
minimum of 3 directors (2 resident in Australia) and 1 secretary (resident in	Director	Secretary					
Australia).	Family name	·	n names				
·	Turniy hamo	01701	Thanso				
A proprietary company must have	Former name						
a minimum of 1 director (resident in Australia). The office of secretary is	Tomer name						
optional, but if appointed one must	Street number and Street name						
reside in Australia.	Street number and Street name						
Officeholder(s) appointment date shall	Suburb/City	Qt <sub>2</sub>	ate/Territory	Postcode			
be effective from the beginning of the	Guburb/Oity		ite/ remitory	1 0310000			
day on which the company becomes	Country (if not Australia)						
registered.	Country (if not Australia)						
	Date of high						
	Date of birth						
	Place of birth (town/city)		(state/country)				
			(3.2.0, 334.1.1)				

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3 Continued Appoint a	nother officeholder
A public company must have a minimum of 3 directors (2 resident in Australia) and 1 secretary (resident in Australia).	Office held  Director  Family name  Given names
A proprietary company must have a minimum of 1 director (resident in Australia). The office of secretary is optional, but if appointed one must reside in Australia.	Former name  Street number and Street name
Officeholder(s) appointment date shall be effective from the beginning of the day on which the company becomes registered.	Suburb/City  Country (if not Australia)  Date of birth  DD DD MM MY YY  Place of birth (town/city)  (state/country)
ldentify ultimate holding	ng company
	Will the company have an ultimate holding company upon registration?  Yes  If yes, provide the following details of the ultimate holding company  Company name  ACN/ARBN/ABN  Country of incorporation (if not Australia)

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### **5 Share structure table**

Details of shares issued by the company. Please show all details of shares that the company has on issue at the time of this application.

#### Standard share codes

Refer to the table for the share class codes for sections 5 and 6.

Share class code	Full title	Share class code	Full title
A	A	PRF	preference
В	Betc	CUMP	cumulative preference
EMP	employee's	NCP	non-cumulative preference
FOU	founder's	REDP	redeemable preference
LG	life governor's	NRP	non-redeemable preference
MAN	management	CRP	cumulative redeemable preference
ORD	ordinary	NCRP	non-cumulative redeemable preference
RED	redeemable	PARP	participative preference
SPE	special		

If you are using the standard share class codes you do not need to provide the full title for the shares, just the share class code.						
If you are not using the Share class code	ne standard share cla Full title if not stan		of no more than 4 letters an	d then show the full title Total number of shares	Total amount paid on these shares	Total amount unpaid on these shares
Are any of these shares issued other than for cash?  Yes  If yes, will some or all of the shares be issued under a written contract?  Yes  If yes: Proprietary companies  Lodge a Form 207Z certifying that all stamp duties have been paid.  Public companies  Lodge a Form 207Z and either a Form 208 or a copy of the contract.  No  If no: Proprietary companies  Continue to Section 6 Details of members.						
			lic companies ge a Form 208.			

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### 6 Details of members

Use this section to notify the name and address of each person who consents to become a member.

If shares are jointly owned, provide names and addresses of all joint-owners on a separate sheet (annexure), clearly indicating the share class and with whom the shares are jointly owned.

Please complete a separate section below for each member, print additional copies of page 7 if more members are required.

Member details and shareholding Indicate whether the member is an individual or a company and provide the:  name of the individual or company address of the individual or company, and shareholding.	OR Company n		Given names			
	ACN/ARBN/ ABN					
Address of individual or company	Office, unit, level, or PO Box number					
	Street number and	d Street name				
	Suburb/City  Country (if not Aus	stralia)	State	e/Territory	Postcode	
Complete each column for each share cla	ss the above memb	por has agreed in writing	a to tako un			
Note: Beneficially held usually means that entitlements to payments in relation to any	t the owner of the sl	hares is entitled to the d	irect benefit from the s			
	mount agreed to by per share	Total \$ paid on these shares	Amount unpaid per share	Total \$ unpaid on these shares	Fully paid (y/n)	Beneficially held (y/n)

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Continue							
		Family na	me	Given names			_
		OR					
		Company	name				
		ACN/ARBN/ ABI	N.				
		ACIV/AINDIV/ ADI	1				
		Office, unit, leve	I, or PO Box number				
		Street number a	nd Street name				
		Street Humber a	nd Street name				
		Suburb/City		Sta	ate/Territory	Postcode	
		Country (if not A	ustralia)				
			aotrana)				
Share class	Number of shares taken up	Amount agreed to pay per share	Total \$ paid on these shares	Amount unpaid per share	Total \$ unpaid on these shares	Fully paid (y/n)	Beneficially held (y/n)
		Family na	me	Given names			٦
		OR					
		Company	name				
		ACN/ARBN/ ABI	N				
		Office unit lave					
		Office, unit, leve	I, or PO Box number				
		Street number a					
				Sta	ate/Territory	Postcode	
		Street number a	nd Street name	Sta	ate/Territory	Postcode	
		Street number a	nd Street name	Sta	ate/Territory	Postcode	
	Number of shares taken up	Street number a	nd Street name	Amount unpaid per share	ate/Territory  Total \$ unpaid on these shares	Fully paid	Beneficially
		Street number a Suburb/City Country (if not A	nd Street name  ustralia)  Total \$ paid on	Amount unpaid	Total \$ unpaid on		
		Street number a Suburb/City Country (if not A	nd Street name  ustralia)  Total \$ paid on	Amount unpaid	Total \$ unpaid on	Fully paid	Beneficially
Share class code		Street number a Suburb/City Country (if not A	nd Street name  ustralia)  Total \$ paid on	Amount unpaid	Total \$ unpaid on	Fully paid	Beneficially
		Street number a Suburb/City Country (if not A	nd Street name  ustralia)  Total \$ paid on	Amount unpaid	Total \$ unpaid on	Fully paid	Beneficially

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## **Declaration by applicant**

I/we apply for registration of a company on the basis of the information in this form and any attachments. I/we have the necessary written consents and agreements referred to in the application concerning the member and officeholders and I/we shall give the consents and agreements to the company after the company becomes registered. The information provided in this application and in any annexures is true and correct at the time of signing.

Signature of applicant	
	Payment has been attached
Provide family and given names OR corporation name (include ACN/ARBN if applicable)	Name of applicant
If the applicant is an individual - 1 signature required. If the applicant is a corporation - a director or secretary to sign.	Capacity of applicant  Individual  Corporation  Name of officeholder
If the agent for the applicant is a firm – a member/partner of the firm to sign	Agent for individual or corporation Name of agent
	Signature of applicant
	Date signed  [D D] [M M] [Y Y]

### Lodgement

Send completed and signed forms to: Australian Securities and Investments Commission, PO Box 4000, Gippsland Mail Centre VIC 3841

#### For more information

Web www.asic.gov.au Need help? www.asic.gov.au/question

Telephone 1300 300 630

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