|  |  |
| --- | --- |
| ACN 079 220 901  [admin@banksiacorporate.com.au](mailto:admin@banksiacorporate.com.au)  [www.banksiacorporate.com.au](http://www.banksiacorporate.com.au) Phone (03) 9734 6780  **Order Form – DISCRETIONARY TRUST DEED DEED OF VARIATION- 2025/26** |  |

# APPOINTMENT/REMOVAL OF TRUSTEE, APPOINTOR, GUARDIAN OR CHANGE THE TRUST NAME

# Your Details

|  |  |
| --- | --- |
| Your Firm |  |
| Your Name |  |
| Delivery Address |  |
| Date |  |
| Phone Number |  |
| Email Address |  |
|  |  |
| Option 1 – Deed in Triplicate (Hardcopy) $280 Y/N? |  |
| Option 2 – Electronic Deed Only $240 Y/N? |  |
| Additional Deed (Hard Copy) $22 Y/N? |  |
| Additional Deed (Soft Copy) $22 Y/N? |  |

# Changes Required for Deed of Variation

|  |  |
| --- | --- |
| To change the name of the Trust Y/N? |  |
| To appoint one or more Trustees Y/N? |  |
| To have one or more Trustees resign Y/N? |  |
| To appoint one or more Appointors Y/N? |  |
| To have one or more Appointors resign Y/N? |  |
| To Appoint one or more Guardians Y/N? |  |
| To have one or more Guardians resign Y/N? |  |

# Trust Details

|  |  |
| --- | --- |
| Name of Trust |  |
| Date of Original Trust Deed |  |
| Laws of Which State/Territory Apply to This Document? |  |
| Settlor’s Name |  |
| Settlor’s Address |  |
| Dates of Previous Variations (if any) |  |
| Clause in the Deed Allowing it to be Amended |  |
| Effective Date of the Variation |  |
| If Changing the Name, Insert New Name Here |  |

# 

# Existing Trustees

| Full Name |  |
| --- | --- |
| Trustee A.C.N. (if applicable) |  |
| Address |  |
| Name of Chairperson (if applicable) |  |
| Is this Trustee resigning or ceasing to act as Trustee? Y/N? |  |
|  | |
| Full Name |  |
| Trustee A.C.N. (if applicable) |  |
| Address |  |
| Name of Chairperson (if applicable) |  |
| Is this Trustee resigning or ceasing to act as Trustee? Y/N? |  |

# Order Form – DISCRETIONARY TRUST DEED DEED OF VARIATION- 2023/24

# Page 2

# New Trustees

| **Full Name** |  |
| --- | --- |
| **Trustee A.C.N. (if applicable)** |  |
| **Address** |  |
| **Name of Chairperson (if applicable)** |  |

| **Full Name** |  |
| --- | --- |
| **Trustee A.C.N. (if applicable)** |  |
| **Address** |  |
| **Name of Chairperson (if applicable)** |  |

# Existing Appointors

|  |  |
| --- | --- |
| **Full Name** |  |
| **Appointor A.C.N. (if applicable)** |  |
| **Address** |  |
| **Name of Chairperson (if applicable)** |  |
| **Is this Appointor resigning or ceasing to Act as Appointor? Y/N?** |  |
|  |  |
| **Full Name** |  |
| **Appointor A.C.N. (if applicable)** |  |
| **Address** |  |
| **Name of Chairperson (if applicable)** |  |
| **Is this Appointor resigning or ceasing to Act as Appointor? Y/N?** |  |
|  |  |
| New Appointors | |
| Full Name |  |
| New Appointor A.C.N. (if applicable) |  |
| Address |  |
| Name of Chairperson (if applicable) |  |
|  |  |
| Full Name |  |
| New Appointor A.C.N. (if applicable) |  |
| Address |  |
| Name of Chairperson (if applicable) |  |
|  |  |
| Existing Guardians | |
| Full Name |  |
| Address |  |
| Is this Guardian resigning or ceasing? Y/N? |  |
|  |  |
| Full Name |  |
| Address |  |
| Is this Guardian resigning of ceasing? Y/N? |  |
|  |  |
| New Guardians | |
| Full Name |  |
| Address |  |
|  |  |
| Full Name |  |
| Address |  |
| Credit Card Payment | |
| **Cardholder’s Name** |  |
| **Credit Card No.** |  |
| **Expiry Date** |  |
| **Amount** |  |
| **Cardholder’s Signature** |  |