

## Discretionary Trust Order Form

### APPLICANT DETAILS

Name of Firm / Individual.....

Tel. No. & Contact.....

Delivery options:  Email  Mail  Courier (Cbd)  Client Pick-Up

### NAME OF TRUST

Name of Trust.....

DATE SETTLED ..... / ..... / .....

### SETTLOR (Person who is not related to the Trust)

Full Name .....

Address .....

### TRUSTEE

Full Name ..... Full Name ..... Full Name .....

Address ..... Address .....

Company Name & ACN:.....

Registered Address .....

Name of Directors.....

### SPECIFIED BENEFICIARIES

Full Name .....

Address .....

Full Name .....

Address .....

Full Name .....

Address .....

Full Name .....

Address .....

### APPOINTER/GUARDIAN

Full Name ..... and upon his/her/their death then.....

Address .....

..... Vesting Day (If not 80 years).....

Settled Sum \$ .....