



## Part 2 – Applicant Contact Details

### Applicant Name, Address and Contact Details

Preferred contact method:

- Mail  
 Phone  
 Email

Title:  Mr  Mrs  Ms  Miss  Other (specify).....

Name of Applicant.....

Address.....

Suburb..... State ..... Postcode .....

Business Phone ( )..... Business Fax ( ).....

Mobile..... Email.....

## Part 3 – Checklist and Declaration

### Checklist and Declaration

I.....(Name of Applicant) was authorised by the proposed members at the formation meeting held on \_\_\_ / \_\_\_ / \_\_\_ to file this application for registration.

Certified by.....  
(Name and Signature of Chairperson)

and .....  
(Name and Signature of Secretary).

I have attached the following as required by section 18(1) (*tick as appropriate*):

- a) Two copies of the proposed rules, signed and certified by the chairperson and secretary of the formation meeting;  
 b) A copy of the disclosure statement signed and certified by the chairperson and secretary of the formation meeting (**distributing co-operative only**);  
 c) A statement listing the particulars of each director elected at the formation meeting, signed and certified by the chairperson and secretary (*Form 04*);  
 d) A statement listing the particulars of the secretary and chief executive officer; and  
 e) Other document (*please specify*) .....

I certify that all information contained in this application is true and correct.

Signature of Applicant ..... Date \_\_\_ / \_\_\_ / \_\_\_\_\_

## Part 4 – Signatures required by section 18(1)(c)

*For a co-operative:*  
Two directors elected at the formation meeting PLUS three suitably qualified members as defined by section 15(4).

*For a co-operative group:* Two directors elected at the formation meeting.

Please provide names and signatures for your proposed co-operative:

**Director 1.** .....

**Director 2.** .....

**Member 1.** .....

**Member 2.** .....

**Member 3.** .....

## Lodgement Details

### Please Note

This application form must be lodged **within 2 months** after the closure of the formation meeting, or within the extended period that the Registrar may allow.

This application should be accompanied by the relevant fee prescribed in the regulations. If a co-operative wishes to apply for an extension, it must also submit a *Form 12* accompanied with the prescribed fee.

Should you require further assistance please contact our office on 1300 304 074

### Lodgement by Mail:

Department of Mines, Industry Regulation and Safety  
Consumer Protection Division  
Associations & Charities Branch  
Locked Bag 100  
EAST PERTH 6892

### Lodgement in Person:

Department of Mines, Industry Regulation and Safety  
Consumer Protection Division  
Level 1, Mason Bird Building  
303 Sevenoaks Street  
CANNINGTON WA