



APPLICATION FOR REGISTRATION OF AN INCORPORATED LIMITED PARTNERSHIP

Form Number: LPF02

Limited Partnership Act 2016 ss45, 46 and 47

OFFICE USE ONLY

Date Received:

Purpose

This form is used to register an Incorporated Limited Partnership (ILP) under the Limited Partnerships Act 2016.

1. Contact details of person lodging this application:

The name and contact details of the person with whom we can discuss this application with.

Name			
Address			
Suburb			
State		Postcode	

Telephone	
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Email	
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3. What is the proposed firm name for the Limited Partnership?

The proposed name must be a name that is not identical to or likely to be confused with a name registered under the Business Names Act 2011 or other body corporate.

When the partnership's name is used on any document, it must be followed by "I.L.P.", "ILP" or "an Incorporated Limited Partnership"

3. What is the registered office address for the Limited Partnership?

An Incorporated Limited Partnership must have an address in Western Australia. A post office box is not acceptable as the registered office address.

Address			
Suburb			
State		Postcode	

4. What is the contact address for the Limited Partnership?

A contact address may be nominated for the Incorporated Limited Partnership. A post office box is acceptable.

Address:			
Suburb			
State		Postcode	

Email	
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5. How many partners does this Incorporated Limited Partnership have?

Number of general partners

An Incorporated Limited Partnership must have at least one general partner and one limited partner.

There can be no more than 20 general partners.

Number of limited partners

6. How does the partnership meet the requirements for registration as an Incorporated Limited Partnership?

Tick applicable box

Venture Capital Limited Partnership (VCLP) in accordance with Part 2 of the *Venture Capital Act 2002* (Cth)

Is currently registered. Evidence of this registration is attached.

Intends to apply for registration as a VCLP.

OR

Early Stage Venture Capital Limited Partnership (ESVCLP) in accordance with Part 2 of the *Venture Capital Act 2002* (Cth)

Is currently registered. Evidence of this registration is attached.

The partnership intends to apply for registration as an ESVCLP.

OR

Australian Venture Capital Fund of Funds (AFOF)

Is currently registered. Evidence of this registration is attached.

Intends to apply for registration as an AFOF.

OR

Venture Capital Management Partnership (VCMP) within the meaning of s. 94D(3) of the *Income Tax Assessment Act 1936* (Cth).

Is currently a VCMP. A statement to this effect is attached.

Intends to meet the requirements for recognition as a VCMP.

7. Partners' Details

Provide details of ALL partners in the Limited Partnership. Note whether they are individuals, corporations or other partnerships, and nominate whether they are general partners or limited partners.

The full name of partner:

The partner is:

AN INDIVIDUAL

A CORPORATION

A PARTNERSHIP

The individual's residential address is:

A post office box address is not acceptable.

Provide a residential address for an individual.

Provide the registered address for a corporation or a partnership

Address			
Suburb			
State		Postcode	

Partner's date of birth:

(if applicable)

Where is the corporation/partnership registered?

What is the ACN/registration number?

Only required if the corporation/partnership is registered in Australia

Which type of partner?

GENERAL PARTNER

LIMITED PARTNER

Authorisation and
Certification:

In order to assist with the determination of this application, I authorise the Commissioner or persons so directed, to obtain any document, record, file or information that may be necessary or relevant to the partnership's eligibility to hold this registration.

The information contained in this form and any supporting documents provided at the time or subsequent to lodgement are to the best of my knowledge and belief complete, correct and true.

I acknowledge that the information will be placed on the register available to the public and that it is an offence to lodge a document that is false or misleading.

Signature:

Date:

Note that a director must sign for a corporation and a general partner must sign for a partnership

Full name of person signing
for a corporation or partnership

7. Partners' Details (continued)

Provide details of ALL partners in the Limited Partnership. Note whether they are individuals, corporations or other partnerships, and nominate whether they are general partners or limited partners.

The full name of partner:

The partner is:

AN INDIVIDUAL

A CORPORATION

A PARTNERSHIP

The individual's residential address is:

A post office box address is not acceptable.

Provide a residential address for an individual.

Provide the registered address for a corporation or a partnership

Address			
Suburb			
State		Postcode	

Partner's date of birth:

(if applicable)

Where is the corporation/partnership registered?

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I acknowledge that the information will be placed on the register available to the public and that it is an offence to lodge a document that is false or misleading.

Signature:

Date:

Note that a director must sign for a corporation and a general partner must sign for a partnership

Full name of person signing
for a corporation or partnership

More than 2 partners?

Please copy and complete this page as required

CHECK COMPLETION

An incomplete application cannot be processed. Have you:

- completed all of the relevant sections of the application form?
- ensured that all the required signatures are included?
- either attached a document evidencing the applicant's registration as a VCLP, ESVCLP or AFOF or, if you are not yet registered, arranged to forward the evidence within one month of becoming registered.

Please do not staple the documents.

LODGING THE APPLICATION

The completed form and relevant documents should be clearly scanned and emailed to ltdpartnerships@dmirs.wa.gov.au

Alternatively the form can be mailed to:

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

Should you require further assistance please contact our office on 1300 304 074 or (08) 6552 9300

CERTIFICATE OF REGISTRATION

A Certificate of Registration will be issued if the application is successful.

AFTER REGISTRATION

Changes to any of the registered particulars

You must notify the Department of Mines, Industry Regulation and Safety, Consumer Protection Division (Consumer Protection) of any changes in the registered particulars of the Incorporated Limited Partnership within 7 days of the change occurring. "Registered particulars" include all the information provided in this application, such as names, addresses, partners ceasing or commencing, whether a partner is a limited or general partner and the revocation of registration as a VCLP, ESVCLP or AFOF or ceasing to be a VCMP.

If the Incorporated Limited Partnership is registered on the basis that the partnership intends to apply for registration as a VCLP, ESVCLP or AFOF, it must notify Commerce and provide evidence of the registration, within one month of being registered by the Venture Capital Registration Board. If the Incorporated Limited Partnership is registered on the basis that the partnership intends to meet the requirements for recognition as a VCMP, it must notify Commerce within one month of becoming a VCMP.

An Incorporated Limited Partnership has two years from the date of its registration under the Limited Partnerships Act to become registered as an AFOF, ESVCLP or VCLP, or to become recognised as a VCMP. If that registration or recognition is not attained, the Incorporated Limited Partnership must lodge a Notice with Commerce as soon as practicable after the end of the two year period.

Forms for making these notifications are available from Consumer Protection's website at www.commerce.wa.gov.au/limitedpartnerships

Registering a business name

The name of an Incorporated Limited Partnership registered in Western Australia does not also need to be registered as a business name, as long as business is conducted under the full registered Limited Partnership name.

Identification of Limited Partnerships

Any document issued on behalf of an Incorporated Limited Partnership in connection with the partnership's business must contain the words "An Incorporated Limited Partnership" (or "I.L.P." or "ILP" as an abbreviation) at the end of the full registered name.

Restrictions on Members

Under the *Limited Partnerships Act 2016* there are certain restrictions on the participation in Limited Partnerships or Incorporated Limited Partnerships of persons who are insolvents or who have been convicted of some offences involving fraud or dishonesty. More detail is available on our website at www.commerce.wa.gov.au/limitedpartnerships

PAYMENT

This application is subject to fee relief. Please refer to our webpage for further fee waiver information <https://www.commerce.wa.gov.au/consumer-protection/fees-and-forms-limited-partnerships>