

FORM LP1

Application for registration of a limited partnership

Partnership Act 1892 (section 54)



1800 502 042 fairtrading.nsw.gov.au

Please read this information before completing this form.
This form can be completed in Adobe Reader and saved for your records.

When to use this form?

This form is used to register a limited partnership.

Registering a business name

A Limited Partnership registered in New South Wales does not need to register a business name where business is conducted under the full registered name.

Fees

Application Fee: \$396.00
There is no GST payable.

How to pay the lodgement fee

Pay by credit card or PayPal using the following link:
www.fairtrading.nsw.gov.au/registrypayments

Step 1 - Click on the link or type the URL into your web browser.

Step 2 - Follow the instructions online to complete payment. (select 'Registry and Accreditation' as the agency)

Step 3 - You will receive a receipt upon payment.

Step 4 - Attach a copy of the receipt to the form.

Not providing this information may result in delays in processing your form.

Alternatively, if you intend to pay by cheque or money order this can be done in person at any Service NSW Centre. Cheques or money orders should be made payable to NSW Fair Trading.

How to lodge

- **By email** to registrylodgements@customerservice.nsw.gov.au ensuring a copy of the receipt of payment is attached.
- **By post** to Registry and Accreditation, PO Box 22, Bathurst NSW 2795, ensuring a copy of the receipt of payment is included.
- **In person** at any **Service NSW Centre**. For the address of your nearest Service NSW Centre please telephone 13 77 88 or visit www.service.nsw.gov.au/service-centre

Identification of Limited Partnerships

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

Changes in any of the registered particulars

You must notify Fair Trading of any changes in the registered particulars of the Limited Partnership within 7 days of the change occurring. "Registered particulars" has the same meaning as defined in s.49 of the *Partnership Act 1892* and includes names, addresses, partners ceasing or commencing, whether a partner is a limited or general partner and the limitation of liability of a limited partner.

You must notify NSW Fair Trading if the limited partnership is dissolved or ceases to carry on business.

Forms for making these notifications are available from www.fairtrading.nsw.gov.au or can be requested by calling 1800 502 042.

What Happens when you lodge this form

A certificate of registration will be issued if the application is successful.

The above information is intended as a guide only and is included to assist you in completing and lodging this form. This page is not part of the form. If required, professional advice should be obtained regarding the matters dealt with in this form.

1800 502 042 fairtrading.nsw.gov.au

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Fee (GST free) - \$396.00

1. Contact details of the person lodging this application

Title	Given name(s)	Family/Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Daytime telephone number	Mobile number	
<input type="text"/>	<input type="text"/>	
Address		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email address		
<input type="text"/>		

2. What is the proposed name of the limited partnership?

3. What is the registered office address for the limited partnership?

A Limited Partnership must have an office in New South Wales. Post Office box addresses are **not acceptable** as the registered office address.

Address		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. What is the postal address for the limited partnership?

A postal address may be nominated for the Limited Partnership. Post Office box addresses are acceptable.

Address		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

5. Number of partners

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

There can be no more than 20 general partners.

(a) How many General Partners are there? (b) How many Limited Partners are there?

6. Provisions

Have the proposed Partners agreed to provisions that will apply should the proposed partnership be dissolved?

☐ YES (Please attach a copy of the provisions that have been agreed to).

OR

☐ NO

7. Privacy statement

NSW Fair Trading Department of Customer Service gives priority to protecting the privacy of your personal information. We do this by handling personal information in a responsible manner and in accordance with the *Privacy and Personal Information Protection Act 1998* (PPIP Act). Service NSW acts as a shopfront for us and performs transactions for you, on our behalf.

The personal information contained in your application is collected and held by NSW Fair Trading and Service NSW will collect and hold personal information on our behalf as part of the application process.

We are collecting your personal information for the following purposes:

1. For determining an application for registration of a limited partnership in accordance with section 54 of the *Partnership Act 1892* (PA Act).
2. Internal administrative purposes, including liaising with you in relation to your application.
3. We may use the information to support more informed policy making, program management, evaluation, research and service planning as it can facilitate more efficient service delivery for residents and business in NSW.
4. As required by legislation to record information on a public register, parts of which may be published online.

The consequence of not providing it is that your application may not be able to be determined. We may use the personal information contained in your application to confirm your details if you make any subsequent applications. We may also use it to administer/update our public register, including to send you information that we consider important such as information and updates regarding the partnership's obligations under the PA Act.

We will store and manage your personal information in accordance with provisions under the PPIP Act.

If required, we may make enquiries and exchange information with other NSW government agencies (including the NSW Police Force), or other States, Territories and/or the Commonwealth for the purpose of assessing your application and for compliance purposes. We may disclose your personal information for these purposes.

We will not disclose your personal information to anybody else unless you have given consent, or we are authorised or permitted to do so by law. Our [Privacy Statement](#) describes when this may occur. You can find this information and our [Privacy Management Plan](#) on the Department of Customer Service website.

Please see the [Fair Trading Privacy Code of Practice](#) for more information about how we handle your personal information, how you can request access to or correct the personal information we hold about you (if the information is inaccurate, incomplete, not relevant or out of date) and who to contact if you have a privacy enquiry or complaint, or email brdprivacy@customerservice.nsw.gov.au.

For more information about how Service NSW handles personal information please visit www.service.nsw.gov.au/privacy.

8a. PARTNERS – Individuals

Individuals must provide their residential address. Post Office box addresses are not acceptable.

Individual 1

Title	Given name(s)	Family/Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address

Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth (DD/MM/YYYY)

Place of birth (Town and State or Country if overseas)

This person will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

Date signed (DD/MM/YYYY)

Individual 2

Title	Given name(s)	Family/Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address

Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth (DD/MM/YYYY)

Place of birth (Town and State or Country if overseas)

This person will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

Date signed (DD/MM/YYYY)

8a. PARTNERS – Individuals *continued*

Individuals must provide their residential address. Post Office box addresses are not acceptable.

Individual 3

Title	Given name(s)	Family/Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address

Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth (DD/MM/YYYY)	Place of birth (<i>Town and State or Country if overseas</i>)
<input type="text"/>	<input type="text"/>

This person will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

<input type="text"/>	Date signed (DD/MM/YYYY)
<input type="text"/>	<input type="text"/>

Individual 4

Title	Given name(s)	Family/Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address

Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth (DD/MM/YYYY)	Place of birth (<i>Town and State or Country if overseas</i>)
<input type="text"/>	<input type="text"/>

This person will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

<input type="text"/>	Date signed (DD/MM/YYYY)
<input type="text"/>	<input type="text"/>

More than 4 individuals as partners? Please copy this page as required.

8b. PARTNERS – Corporations

Corporations must provide their registered office address. Post Office box addresses are not acceptable.

Corporation 1

Full name of corporation

Registered office address

Suburb

State

Postcode

Place of incorporation (Australian State or Country if overseas)

ACN

This corporation will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

Date signed (DD/MM/YYYY)

Printed name

Position held (Please tick one box only)

☐

Director

☐

Secretary

☐

Authorised Officer

Corporation 2

Full name of corporation

Registered office address

Suburb

State

Postcode

Place of incorporation (Australian State or Country if overseas)

ACN

This corporation will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

Date signed (DD/MM/YYYY)

Printed name

Position held (Please tick one box only)

☐

Director

☐

Secretary

☐

Authorised Officer

More than 2 corporations as partners? Please copy this page as required.

8c. PARTNERS – Partnerships

Partnerships must provide their registered office address. Post Office box addresses are not acceptable.

Partnership 1

Full name of partnership

Registered office address

Suburb

State

Postcode

Place of registration (*Australian State or Country if overseas*)

Registration number

This partnership will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature (*Must be an authorised person*)

Date signed (DD/MM/YYYY)

Printed name

Partnership 2

Full name of partnership

Registered office address

Suburb

State

Postcode

Place of registration (*Australian State or Country if overseas*)

Registration number

This partnership will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature (*Must be an authorised person*)

Date signed (DD/MM/YYYY)

Printed name

More than 2 partnerships as partners? Please copy this page as required.

8d. PARTNERS – Individuals as trustee

Full name *(in capacity as trustee for)*

Address

Suburb

State

Postcode

Title Given name(s)

Family/Surname

Date of birth (DD/MM/YYYY)

Place of birth *(Town and State or Country if overseas)*

Title Given name(s)

Family/Surname

Date of birth (DD/MM/YYYY)

Place of birth *(Town and State or Country if overseas)*

Title Given name(s)

Family/Surname

Date of birth (DD/MM/YYYY)

Place of birth *(Town and State or Country if overseas)*

Title Given name(s)

Family/Surname

Date of birth (DD/MM/YYYY)

Place of birth *(Town and State or Country if overseas)*

This person will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

Date signed (DD/MM/YYYY)

Please copy this page as required.

8e. PARTNERS – Corporations as trustee

Full name of corporation *(in capacity as trustee for)*

Registered office address

Suburb

State

Postcode

Place of incorporation *(Australian State or Country if overseas)*

ACN

This corporation will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

Date signed (DD/MM/YYYY)

Printed name

Position held *(Please tick one box only)*

☐

Director

☐

Secretary

☐

Authorised Officer

More than 1 corporation as trustees? Please copy this page as required.

8f. PARTNERS – Partnerships as trustee

Full name of partnership *(in capacity as trustee for)*

Registered office address

Suburb

State

Postcode

Place of registration *(Australian State or Country if overseas)*

Registration number

This partnership will be a: ☐ GENERAL PARTNER **OR** ☐ LIMITED PARTNER

For Limited Partner, the limit of liability is:

I certify that the information provided in this application is true and correct.

I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*.

Signature

Date signed (DD/MM/YYYY)

Printed name

More than 1 partnership as trustees? Please copy this page as required.