## 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.

Alternatively, if you intend to pay by cheque or money order this can be done in person at a Service NSW Centre accepting this form of payment. Please telephone 13 77 88 or visit <a href="www.service.nsw.gov.au/service-centre">www.service.nsw.gov.au/service-centre</a> prior to attending, to confirm accepted payment methods.

Cheques or money orders should be made payable to NSW Fair Trading.

Not providing all required information and a copy of the receipt may result in delays in processing your application.

#### 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. Before visiting your nearest Service NSW Centre, please telephone 13 77 88 or visit <a href="www.service.nsw.gov.au/service-centre">www.service.nsw.gov.au/service-centre</a> to confirm accepted payment methods prior to attending.

#### **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 <a href="https://www.fairtrading.nsw.gov.au">www.fairtrading.nsw.gov.au</a> 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.



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Partnership Act 1892 (section 54)

Registry us	se only
Hodatad Iu	una 2027
Updated Ju	IIIe 2023

1800 502 042 fairtrading.nsw.gov.au

Please read the information before completing this form.

This form can be completed in Adobe Reader and saved for your records.

Fee (GST free) - \$396.00

1. Contact details of the person lodgi	ng this application
Title Given name(s)	Family/Surname
Daytime telephone number  Address	Mobile number
Suburb	State Postcode
Email address	
2. What is the proposed name of the	limited partnership?
3. What is the registered office addre	ss for the limited partnership?
A Limited Partnership must have an office in Ne	ew South Wales Post Office box addresses are <b>not acceptable</b> as
the registered office address.	ew South Wales. Post Office box addresses are <b>not acceptable</b> as
	ew South Wales. Post Office box addresses are <b>not acceptable</b> as
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#### 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 <u>Privacy Statement</u> describes when this may occur. You can find this information and our <u>Privacy Management Plan</u> on the Department of Customer Service website.

Please see the <u>Fair Trading Privacy Code of Practice</u> 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 <u>brdprivacy@customerservice.nsw.gov.au</u>.

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 Address Suburb Postcode State 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 Address Suburb Postcode State 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 Address Suburb State Postcode 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. Date signed (DD/MM/YYYY) **Individual 4** Title Given name(s) Family/Surname Address Suburb State Postcode 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.

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

Signature

Date signed (DD/MM/YYYY)

## **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.

Profe than 2 partierships as partiers: Please copy this page as required

8d. PARTNERS - Individuals as trustee		
Full name (in capacity as trustee for)		
Address		
Address		
Suburb	State	Postcode
	5 11 6	
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 ov	rerseas)
Title Given name(s)	Family/Surname	
Date of birth (DD/MM/YYYY)	Place of birth (Town and State or Country if overseas)	
Title Civen pame(s)	Family /Currane	
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 I have read and understand the Statement under the <i>Priv</i>		ct 1998.
Signature	Data signed (	DD /MM /VVVV
	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
L 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 <i>Privacy and Personal Information Protection Act 1998</i> .
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)
L 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 <i>Privacy and Personal Information Protection Act 1998</i> .
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