

FORM LP2

Application for changes in registered particulars of a limited partnership

Partnership Act 1892 (section 56)



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?

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.

Fees

The following fee applies for lodgement of this form: \$35.00
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 www.service.nsw.gov.au/service-centre 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 www.service.nsw.gov.au/service-centre to confirm accepted payment methods prior to attending.

Identification of Limited Partnership

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.

What happens when you lodge this form

An updated 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.



FORM LP2

Application for changes in registered particulars of a limited partnership

Partnership Act 1892 (section 56)

Registry use only

Updated June 2023

1800 502 042 fairtrading.nsw.gov.au

Please read the information before completing this form.
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Fee (GST free) - \$35.00

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 current name of the limited partnership?

3. What is the registration number of the limited partnership?

4. Change of name of the limited partnership?

The partnership seeks to change the name of the Limited Partnership to:

The partnership approved the change of name on:

 (DD/MM/YYYY)

5. Change of addresses of the limited partnership

(a) Registered office address

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

The NEW registered office address for the Limited Partnership is:

Address

Suburb

State

Postcode

(b) Postal address

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

The NEW postal address for the Limited Partnership is:

(Leave blank if the postal address is the same as the NEW registered office address)

Address

Suburb

State

Postcode

6a. Change of address of partners - Individuals

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

Individual 1

Title Given name(s)

Family/Surname

NEW address

Suburb

State

Postcode

Individual 2

Title Given name(s)

Family/Surname

NEW address

Suburb

State

Postcode

Individual 3

Title Given name(s)

Family/Surname

NEW address

Suburb

State

Postcode

More than 3 individuals changed their residential address? Please copy this page as required.

6b. Change of address of partners - Corporations

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

Corporation 1

Full name of corporation

NEW Registered office address

Suburb

State

Postcode

ACN

Corporation 2

Full name of corporation

NEW Registered office address

Suburb

State

Postcode

ACN

Corporation 3

Full name of corporation

NEW Registered office address

Suburb

State

Postcode

ACN

Corporation 4

Full name of corporation

NEW Registered office address

Suburb

State

Postcode

ACN

More than 4 corporations changed their registered office address? Please copy this page as required.

6c. Change of address of partners - Partnerships

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

Partnership 1

Full name of partnership

NEW Registered office address

Suburb

State

Postcode

Partnership 2

Full name of partnership

NEW Registered office address

Suburb

State

Postcode

Partnership 3

Full name of partnership

NEW Registered office address

Suburb

State

Postcode

Partnership 4

Full name of partnership

NEW Registered office address

Suburb

State

Postcode

More than 4 partnerships changed their registered office address? Please copy this page as required.

7. Change of name of partners

PLEASE NOTE: This section is only to be completed for existing partners whose name has changed. For example: Where an individual has changed his or her name by deed poll or marriage, or where a corporation or partnership has changed its registered name.

(a) Individual

Previous full name of individual

NEW full name of individual

Please attach evidence of the change of name. For example a copy of the deed poll or marriage certificate.

(b) Corporation

Previous full name of corporation

NEW full name of corporation

Please attach evidence of the change of name. For example a copy of the change of name certificate.

(c) Partnership

Previous full name of partnership

NEW full name of partnership

Please attach evidence of the change of name. For example a copy of the change of name certificate.

8. Change of liability of limited partners

The liability of the nominated Limited Partner has changed as follows:

Limited Partner 1

Full name of Limited Partner

Previous limit of liability

NEW limit of liability

Signature of Limited Partner

Date signed (DD/MM/YYYY)

Limited Partner 2

Full name of Limited Partner

Previous limit of liability

NEW limit of liability

Signature of Limited Partner

Date signed (DD/MM/YYYY)

Limited Partner 3

Full name of Limited Partner

Previous limit of liability

NEW limit of liability

Signature of Limited Partner

Date signed (DD/MM/YYYY)

9. Provisions

Have the Partners agreed to, or agreed to changes 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

10. Change of partners - ceasing

Ceasing partner 1

Full name of ceasing partner

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

Signature

Date ceased (DD/MM/YYYY)

Ceasing partner 2

Full name of ceasing partner

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

Signature

Date ceased (DD/MM/YYYY)

Ceasing partner 3

Full name of ceasing partner

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

Signature

Date ceased (DD/MM/YYYY)

Ceasing partner 4

Full name of ceasing partner

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

Signature

Date ceased (DD/MM/YYYY)

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

11a. Change of partners - commencing (Individuals)

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

Individual 1

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*.

Signature Date commenced (DD/MM/YYYY)

Individual 2

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*.

Signature Date commenced (DD/MM/YYYY)

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

11b. Change of partners – commencing (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 commenced (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 commenced (DD/MM/YYYY)

Printed name

Position held (*Please tick one box only*) Director Secretary Authorised Officer

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

11c. Change of partners - commencing (Partnerships)

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

Full name of partnership 1

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 commenced (DD/MM/YYYY)

Printed name

NOTE: Where the commencing Partner is a Limited Partnership, the signature of each General Partner of that Limited Partnership, or the signature of a General Partner authorised by all the General Partners of that Partnership, is required.

Please indicate the capacity of the signatory

- Authorised General Partner of the Limited Partnership commencing as a Limited Partner
- The signatures of all General Partners of the Limited Partnership commencing as a Limited Partner are attached

Full name of partnership 2

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 commenced (DD/MM/YYYY)

Printed name

NOTE: Where the commencing Partner is a Limited Partnership, the signature of each General Partner of that Limited Partnership, or the signature of a General Partner authorised by all the General Partners of that Partnership, is required.

Please indicate the capacity of the signatory

- Authorised General Partner of the Limited Partnership commencing as a Limited Partner
- The signatures of all General Partners of the Limited Partnership commencing as a Limited Partner are attached

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

11d. Change of partners – commencing (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 commenced (DD/MM/YYYY)

Please copy this page as required.

11e. Change of partners – commencing (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 commenced (DD/MM/YYYY)

Printed name

Position held (*Please tick one box only*) Director Secretary Authorised Officer

11f. Change of partners – commencing (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 commenced (DD/MM/YYYY)

Printed name

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

12. Partners changing from limited to general and vice versa

The following Limited partner has changed to a General partner:

Full name of partner

Signature of former Limited Partner

Date of change (DD/MM/YYYY)

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

Position held if signing on behalf of a Limited Partnership:

Authorised General Partner of the Limited Partnership commencing as a Limited Partner

OR

The signatures of all General Partners of the Limited Partnership commencing as a Limited Partner are attached

The following General partner has changed to a Limited partner:

Full name of partner

The limit of liability is

Signature of former General Partner

Date of change (DD/MM/YYYY)

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

Position held if signing on behalf of a Limited Partnership:

Authorised General Partner of the Limited Partnership commencing as a Limited Partner

OR

The signatures of all General Partners of the Limited Partnership commencing as a Limited Partner are attached

More than 1 partner changing from a General to Limited partner and vice versa? Please copy this page as required.

13. Number of partners in the limited partnership

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 after these changes have been made?

(b) How many Limited partners are there after these changes have been made?

14. 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 changes in registered particulars of a limited partnership in accordance with section 56 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.

15. Certification and signature

All general partners, or a general partner authorised by all the general partners, must sign this notification. Where a change is made that relates to the commencement, cessation or change in the limitation of liability of a Limited Partner, that Limited Partner must also sign this notification. Provision is made for the Limited partner to sign in the relevant section.

Certification

I/we certify that the information provided in this application is true and correct. I/we have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998*. Each partner listed in this document has been provided with a copy of, and to the best of my/our knowledge understands, the Statement under the *Privacy and Personal Information Protection Act 1998*.

(a) Certification and signature of an authorised general partner:

Full name of general partner authorised by all the general partners to sign this notification

Signature

Date signed (DD/MM/YYYY)

Printed name

Position held if signing on behalf of a corporation (*Please tick one box only*)

Director Secretary Authorised Officer

15. Certification and signature *(continued)*

(b) Certification and signature by all the general partners:

Full name of general partner 1

Signature

Date signed (DD/MM/YYYY)

Printed name

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

Full name of general partner 2

Signature

Date signed (DD/MM/YYYY)

Printed name

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

Full name of general partner 3

Signature

Date signed (DD/MM/YYYY)

Printed name

Position held if signing on behalf of a corporation *(Please tick one box only)*

Director Secretary Authorised Officer

More than 3 general partners required to sign? Please copy this page as required.