



Application for appointment of scheme auditor by member of a registered scheme

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement

Scheme details

Registered scheme name

Australian Registered Scheme Number (ARSN)

Australian Passport Fund Registration Number (if applicable)

Responsible entity name

ACN/ABN

Lodgement details

Who should ASIC contact if there is a query about this form?

Name

ASIC registered agent number (if applicable)

Telephone number

Postal address

1. Auditor details

Auditor registration number (for individual auditor or authorised audit company)

Family name

Given name

or

Authorised audit company name

ACN/ABN

or

Firm name (if applicable)

1. Continued... Further auditor details

Office, unit, level	
<input type="text"/>	
Street number and Street name	
<input type="text"/>	
Suburb/City	State/Territory
<input type="text"/>	<input type="text"/>
Postcode	Country (if not Australia)
<input type="text"/>	<input type="text"/>
Date of appointment	
<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	
[D] [D] [M] [M] [Y] [Y]	

Auditor registration number (for individual auditor or authorised audit company)	
<input type="text"/>	
Family name	Given name
<input type="text"/>	<input type="text"/>
or	
Authorised audit company name	
<input type="text"/>	
ACN/ABN	
<input type="text"/>	
or	
Firm name (if applicable)	
<input type="text"/>	
Office, unit, level	
<input type="text"/>	
Suburb/City	State/Territory
<input type="text"/>	<input type="text"/>
Postcode	Country (if not Australia)
<input type="text"/>	<input type="text"/>
Date of appointment	
<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	
[D] [D] [M] [M] [Y] [Y]	

Signature

This form must be signed by a member of the registered scheme.

I certify that the information in this form is true and complete.

Name

Signature

Date signed

 / /

[D] [D] [M] [M] [Y] [Y]

Lodgement

Send completed and signed forms to:
Australian Securities and Investments Commission,
PO Box 4000, Gippsland Mail Centre VIC 3841.

For more information

Web www.asic.gov.au
Need help? www.asic.gov.au/question
Telephone 1300 300 630

Guide:

Application for appointment of scheme auditor by member of a registered scheme

This guide does not form part of the form. It is included by ASIC to assist you in completing and lodging the Form 5131.

Signature	This form must be signed by a member of the registered scheme.
Additional information	An appointment can only be made with the consent, in writing, of the person, authorised audit company or firm concerned.
How to provide additional information	<p>Photocopied Form 5131 pages If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement.</p> <p>Annexures If there is insufficient space in any section of the form, you may alternately submit annexures as part of this lodgement.</p> <p>To make any annexure conform to the regulations, you must</p> <ol style="list-style-type: none">1. use A4 size paper of white or light pastel colour with a margin of at least 10mm on all sides2. show the scheme name and ARSN and APFRN (if applicable)3. number the pages consecutively4. print or type in BLOCK letters in dark blue or black ink so that the document is clearly legible when photocopied5. mark the annexure with an identifying letter or symbol eg a,b,c or 1,2,3 etc.6. endorse the annexure with the words: This annexure (mark) of (number) pages referred to in form (form number and title)7. sign and date the annexure <p>The annexure must be signed by the same person(s) who signed the form.</p>
Privacy	The information provided to ASIC in this form may include personal information. Please refer to our privacy policy (www.asic.gov.au/privacy) for information about how we handle your personal information, your rights to seek access to and correct personal information, and to complain about breaches of your privacy.
Lodgement	<p>Send completed and signed forms to: Australian Securities and Investments Commission, PO Box 4000, Gippsland Mail Centre VIC 3841.</p> <p>For more information Web www.asic.gov.au Need help? www.asic.gov.au/question Telephone 1300 300 630</p>