CATCHERS TRUST

Trustee: N.S.W. Fishermen's Company Pty Limited

ACN 065 745 664

Fax: 9994 8008 Email: info@catcherstrust.com.au Web: www.catcherstrust.com.au

POSTAL ADDRESS **Catchers Trust** Level 14,

Phone: 1300 556 150

309 Kent Street Sydney NSW 2000

APPLICATION FOR A UNIT

INFORMATION ABOUT A UNIT

- A Unit in the Trust is issued free-of-charge; no amount is payable on redemption of a Unit.
- A Unit Holder may not hold more than one Unit; a Unit cannot be sold, traded or transferred.
- A Unit in the Trust will be issued only to an eligible person/entity; the Unit will be redeemed if the Unit Holder becomes ineligible to hold a Unit.

ELIGIBILITY

Eligibility for a Unit is described in the Deed governing the Catchers Trust (the Trust). A person/entity is eligible to apply for a Unit if they hold any of the following:

- NSW Commercial Fishing Licence,
- NSW Fishing Boat Licence,
- NSW Fishing Business which describes a share in a share management fishery,
- A fishing boat licensed under Commonwealth law (AFMA) and the boat owner is resident in New South Wales,
- A NSW aquaculture permit (including Oyster farming) and the applicant has sold product through Sydney Fish Market to a value greater than \$3,000 in any accounting period.

PROOF OF ELIGIBILITY

An applicant must provide proof of eligibility.

- Holders of a NSW Commercial Fishing Licence and/or a NSW Fishing Boat Licence and/or a NSW Fishing Business must provide a photocopy of both sides of the relevant plastic card issued by DPI.
- Other applicants must provide a photocopy of the relevant AFMA fishing boat permit or aquaculture licence.
- In all cases, the license, business or permit must be current and in the same name as the applicant.

GUIDE TO COMPLETING THIS FORM

- Complete every section.
- Sign and date the application and get your signature witnessed.
- Send your application by mail to the postal address shown above.

1 - YOUR NAME, ADDRESS & CONTACT DETAILS

Insert <u>full name</u> of applicant]			
Insert address of applicant]			
Suburb		State	Post code
Telephone No	Fax No.	Mobile No)
Email:		 	

(the "applicant") being a "Catcher" as defined in the Trust Deed dated 27th September 1994 between N.S.W. FISHERMEN'S COMPANY PTY LIMITED (A.C.N. 065 745 664) as the trustee and NEW SOUTH WALES FISHERMEN'S CO-OPERATIVE ASSOCIATION LIMITED (the "Settler"):

- (a) applies for and authorises the Trustee to enter the Applicant's name on the register of Unit Holders in respect of one Unit in the Catchers Trust: and
- (b) confirms that upon allotment of Unit the Applicant will hold that Unit beneficially.

This application is made in response to the invitation from the Trustee dated 28th September 1994 and if this application is accepted the contract arising shall be treated as a deed.

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2 - OTHER INFORMA	TION				
Region number (If known)					
Tax File Number			(You are not obliged to tell us your TFN, but if you don't then income tax will be deducted from any distribution)		
Sydney Fish Market Supplier Code(s)	(Only advise SFM codes if you supply direct to SFM)				
3 - SEND ME NO PAF	PER				
		ual Report and Distrib address in section #1	ution Statements by email. Tick the box (and make).	sure	
		•	ILY paid by direct credit)		
We/I authorise you to p	oay Trust dist	ributions directly into t	the nominated account.		
Account name:					
BSB Number		Account Number			
Type of account (passbook, cheque, etc.)					
Name of Bank or Financi	al Institution				
Name of branch					
Only bank accounts ba	ased in Austra	alia will be accepted.			
5 - SIGNATURE OF A	PPLICANT				
EXECUTED this	day	of	20		
SIGNED SEALED ANI	D DELIVERE	, -	gnature		
in the presence of:) Pri	int name		
Print witness name					
Application checklist					
Photocopied pro	oof of eligibility	is attached.	Application in same name as on license/p	permit	
Phone, mobile,	fax and email a	address included.	Bank details are included		
Application is sig	gned and dated	d and witnessed.	Completed both sides of the form.		
Office use only - do not	complete		Date Allotted		