

## Access: Application to Approve Disclosure Canberra. Statement for Merger of Co-operative Form C2

Co-operatives National Law (ACT) Act 2017 – Section 397 and 477 Co-operatives National Law (ACT) Regulation 2017

#### **PURPOSE**

This form is to be used when a proposed cooperative wishes to register as a cooperative under the *Co-operatives National Law (ACT) Act 2017* (the Act). You can access the legislation at <a href="www.legislation.act.gov.au">www.legislation.act.gov.au</a>. You may also obtain further information and forms at <a href="www.act.gov.au/accessCBR">www.act.gov.au/accessCBR</a>.

#### **PRIVACY**

The Act authorises the Registrar to collect the personal information required by this form for the purposes of registering a cooperative under the Act. The Registrar prevents any unreasonable intrusion into a person's privacy in accordance with the *Information Privacy Act 2014*. The Registrar provides identifiable information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances. The Act provides for some information about cooperatives to be publicly available.

#### THINGS TO KNOW BEFORE STARTING YOUR APPLICATION

Before applying to merge two or more co-operatives, each co-operative must send to each of its members a disclosure statement approved by the Registrar stating:

- the financial position of each co-operative concerned in the proposed merger as shown in financial statements prepared as at a date not more than 6 months before the date of the statement; and
- any interest any officer of each co-operative has in the proposed merger; and
- compensation or other consideration proposed to be paid, or other incentive proposed to be given, to any officer or member of each cooperative in relation to the proposed merger; and
- the reason for the merger; and
- any other information the Registrar directs.

### **HOW TO COMPLETE THIS FORM**

- Please use a blue or black pen and print clearly using block letters.
- Complete all parts of the form and the contact details in all cases.
- Each co-operative proposing to merge must complete one of these forms and provide a copy of a disclosure statement for approval.

## FEES AND HOW TO PAY

There is no prescribed fee for this application.

## WHAT HAPPENS WHEN YOU LODGE YOUR APPLICATION

- The application will be reviewed. You will be notified by email if further information is required.
- If your application is approved, the co-operative will be registered and you will receive an electronic confirmation of registration.
- If your application is refused, you will receive written notification of the reasons.
- If any change occurs in the information you have provided in your application, you must notify Access Canberra as soon as possible.

The Co-operatives National Law (ACT) 2017 can be found at the Appendix to the NSW Co-operatives (Adoption of National Law) Act 2012.

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.

## LODGEMENT AND CONTACT INFORMATION

Email: Post: In Person:

accesscanberra.bil@act.gov.au Access Canberra Please visit <u>www.act.gov.au/accessCBR</u>
Cooperatives Registration Or call **132281** to find an Access Canberra

GPO Box 158 Service Centre

Canberra, ACT 2601

## TRANSLATING AND INTERPRETING SERVICE

If you require further information or require advice, a language assistance service is available by phoning the Translating and Interpreting Service (TIS) on 13 14 50.



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Applicant								
1. Who is making this application?								
Given names(s) (in full)								
Surname								
Address (Property Name, Unit, Flat No, Street Number, Street Name)								
Suburb / Town	State / Territory		Postcode					
Daytime telephone number			•					
Email address								
	•							
Details of co-operatives proposing to merge								
2. Name of co-operative to which this application relates:								
Co-operative registration number								
Name of co-operative								
3. Details of co-operatives with which the co-operative is proposing to merge:								
Name of co-operative		Where registered Registration num						
		(Australian state)						
Note: If more than 5 co-operatives, attach a separate list with the additional co-operative details as requested above.								
Note: If more than 5 co-operatives, attach a sep	arate list with the add	internal de operative actums t	is requested above.					
		·	as requested above.					
4. What will be the name of the proper The name you propose will not be accepted if it	osed merged co-o	perative?						
4. What will be the name of the proportion of th	osed merged co-o it is deemed unsuitable imilar you can search <u>a</u>	perative? e, or similar or identical to ar ASIC's Organisation and Busin	n existing name. To ness Names Register.					
4. What will be the name of the proportion of th	osed merged co-o it is deemed unsuitable imilar you can search of rative', `Co-op' or `Coo	perative? e, or similar or identical to ar ASIC's Organisation and Busin	n existing name. To ness Names Register.					

5. What type of co-operative are you proposing to form? (Choose one option only)						
_						
A distributing co-operative with share capital  Distributing co-operatives may give returns or distributions on surplus or share capital to members.						
A non-distributing co-operative that has share capital  These co-operatives are prohibited from giving returns or distributions on surplus or share capital to members, other than the nominal value of shares at winding up.						
A non-distributing co-operative that has no share capital  These co-operatives are prohibited from giving returns or distributions on surplus to members.						
Document checklist						
6. Your application cannot be processed without the following documents:						
A copy of the disclosure statement for approval.  The disclosure statement must contain the information necessary to ensure prospective members are adequately informed of the nature and extent of a person's financial involvement or liability as a member of the merged cooperative, including if applicable:  • the financial position of each co-operative concerned in the proposed merger as shown in financial statements prepared as at a date not more than 6 months before the date of the statement  • any interest any officer of each co-operative has in the proposed merger  • compensation or other consideration proposed to be paid, or other incentive proposed to be given, to any officer or member of each co-operative in relation to the proposed merger  • the reason for the merger  • the estimated costs of the merger  • the active membership provisions of the proposed merged co-operative  • the rights and liabilities attaching to shares in the proposed merged co-operative  • the capital required for the co-operative at the time of merger  • the projected income and expenditure of the merged co-operative for its first year of operation						
<ul> <li>Information about any contracts required to be entered into by the merged co-operative</li> <li>any other information the Registrar directs to be included</li> </ul>						
Declaration and signature						
7. I declare that:						
<ul> <li>I am authorised to lodge this application on behalf of the Co-operative.</li> <li>All co-operatives involved in the proposed merger agree to the proposed merger.</li> <li>The particulars contained in this form and any attachments are true and correct. I understand that a person who intentionally makes a false statement is guilty of an offence under the Criminal Code and I believe that the statements in this declaration are true in every particular.</li> </ul>						
Signature						
Printed name						
Date of signing (dd/mm/yyyy) / /						
Position (office) held						

Given names(s) (in full)							
Surname							
Address (Property Name, Unit, Flat No, Street Number, Street Name)							
Suburb / Town		State / Territory		Postcode			
Daytime telephone number							
Email address							

Who should Access Canberra contact if there is a query about this form? (NOTE: This information is not going

to be made public)