

This form is only required to be completed by or on behalf of a *foreign person* (a *foreign individual*, *foreign corporation* or trustee of a *foreign trust* – see the *Foreign Ownership of Land Register Act 1988* (the Act) and the *Duties Act 2001*).

Please note: a *foreign individual* does not include a person that has permanent residency status in Australia.

Refer to the Queensland Treasury Public Rulings for more information and guidance on *foreign corporations* and *foreign trusts* as defined in the *Duties Act 2001*.

Where applicable, this form must accompany:

- Form 1 - Transfer (of freehold, State leasehold or applicable lease/sub-lease) and Form 24 - Property Information (Transfer); or
- Form 6 - Transmission Application to a devisee/legatee (for freehold, State leasehold or applicable lease/sub-lease) and Form 24A - Property Information (Transmission Application); or
- Form 7 – Lease of freehold or sub-lease of State leasehold where the term (including any available options) exceeds 25 years.

Official use only

Details to be completed by or on behalf of the foreign person: Mark applicable [] with 'X'

Where there is insufficient space in an item, use a Form 20 (Enlarged Panel).

1. Lot on Plan Description

2. Foreign person details

[] Individual **OR** [] Corporation/Trustee of foreign trust Wholly Foreign **OR** [] Corporation/Trustee of foreign trust Partly Foreign

Foreign Country:

Foreign Country:

% Foreign:

OR If more than one foreign country, complete details for each country below. Please note the percentages must total 100%.

Complete details for each country applicable below. Please note the combined total of the percentages below must equal that of the percentage above.

% Foreign	Country of Foreign Shareholders/Beneficiaries	% Foreign	Country of Foreign Shareholders/Beneficiaries
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.....
.....
.....
.....

3. Declaration

I declare that:

[Full name of foreign individual, foreign corporation or trustee of a foreign trust]

is a foreign person within the meaning of the Act; the particulars contained in this form are to the best of my knowledge true and correct; and if applicable, I am authorised to make this declaration on behalf of the foreign person.

Signature

Full name
(and qualification or office if relevant)

Execution Date

***Contact details of declarant:**

e.g. e-mail address or phone number

Privacy Statement

Collection of information from this form is authorised by legislation and is used to maintain publicly searchable records. For more information see the Department's website. *The contact details of the declarant will only be used by the Department for the specific purpose of contacting the declarant if further information or clarification is required.