

Application for exemption in relation to member approval for related party benefits

About this form

This form should be used by Aboriginal or Torres Strait Islander groups/corporations which want to apply for an exemption under s. 310–5 from the requirements of **Part 6–6 Members approval needed for related party benefit** of the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* (CATSI Act).

Instead of using this form corporations can apply at https://online.oric.gov.au.

A policy statement about exemptions is available from www.oric.gov.au or by calling 1800 622 431.

Privacy

Collection of information on this form is authorised by the CATSI Act.

The Registrar of Indigenous Corporations is required by law to keep a Register of Aboriginal and Torres Strait Islander Corporations. The following information will be made public (as required by law) on the Registrar's website at **www.oric.gov.au**:

- · the details provided on this page
- a copy of the determination made by the Registrar about this exemption.

1	Name of corporation						
2	Indigenous Corporation Number (ICN) (if registered)						
3	From the requirements(s) of which section(s) of Part 6–6 of the CATSI Act are you applying for exemption?						
4	Give reasons to support this application for exemption If you need more space, attach an extra sheet	provisions that (a) be inappro	the exemption rela ppriate in the circur				s of the
5	Declaration Note : It is an offence under s. 561–1 of the CATSI Act to provide false or misleading information. This offence can result in a penalty of 200 penalty units, five years imprisonment, or both.		• •	exemption has beer d on this form is co	orrect.	resolution Date	of directors.

Further information—if you need help completing this form or you need more information:

visit www.oric.gov.au

• email info@oric.gov.au

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• call 1800 622 431

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Please provide details of the person the Office of the Registrar of Indigenous Corporations (ORIC) should contact if there are any questions about this form. Mrs Miss Ms Other Middle First name name Last name Postal address Postcode Telephone) Fax () Mobile Email address Preferred method of communication (e.g. email, phone, fax, post)

Returning your form

You can return your form either by email, fax or post. To email the documents, you will need to scan them first.

Email info@oric.gov.au
Fax 02 6133 8080

Post Office of the Registrar of

Indigenous Corporations

PO Box 29 Woden ACT 2606