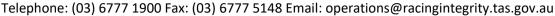
Office of Racing Integrity

All mail addressed to: PO Box 1329, Launceston 7250

Street Address: Prospect Government Offices, 171 Westbury Road, Prospect 7250





Notification of Transfer of Ownership

PLEASE NOTE:

- 1. This form must be completed in full prior to being lodged with the Office of Racing Integrity.
- 2. The use of White Out/Liquid Paper is *prohibited* on this Transfer Form.
- 3. *All parties* must initial any alterations to this form.
- 4. The Registration Assessment Certificate must be lodged with this application.
- 5. Payment can be made by cheque, money order, cash, Eftpos or credit card by contacting ORI. Cheques are to be made payable to the Office of Racing Integrity.

SEC	TION A: TO BE C	OMPLETED	BY PREVIOUS	OW	NER/S					
This is to advise that on		Date:			I/We have disposed of the below horse:					
Na	me of Horse:									
Sire:				1	Dam:					
Ye	ar of Foaling (if ս	ınnamed):		1	Freezebrand:					
	e (Purchasers) the pe	erson/s listed	in <u>Section B</u> of this	form						
1	Name	Signature		6	Name		Signature			
2	Name	Signature		7	Name		Signature			
3	Name	Signature		8	Name		Signature			
4	Name	Signature			Name		Signature			
		6		1	Name					
5	Name	Signature		10	Signature					

This form must be accompanied by applicable fee: (Refer current scheduled fees listed on the ORI website)

PAYMENT DETAILS FORM ATTACHED

Personal Information Protection Statement

You are providing personal information to the Office of Racing Integrity (ORI), which will manage that information in accordance with the *Personal Information Protection Act 2004*. The personal information collected here will be used by ORI for the purpose of processing your application for a licence and/or registration and associated purposes, pursuant to the *Racing Regulation Act 2004*, associated legislation and the Rules of Racing as adopted by Tasracing from time to time. Failure to provide this information may result in your application not being processed or records not being properly maintained. ORI may also use the information for related purposes, or disclose it to third parties in circumstances allowed for by law. You have the right to access your personal information by request to ORI and you may be charged a fee for this service.

SECTION B: TO BE COMPLETED BY PURCHASERS

DECLARATION

This is to certify that I/we have acquired the horse described hereon and I/we hereby agree to abide by the Rules and Regulations of Harness Racing. I/we hereby declare that I/we are over the age of 18 years and that I/we are the only person/s who has/have any interest whatsoever in this horse and I/we further declare that all particulars contained on this form are true and correct.

Note that the first named person will be registered as the Manager for racing purposes. All prize money is paid to one nominated bank account (see over).

nominatea b	unk account (see over).				
	PLETED FOR EACH NEW PART	-OWNER (In Blo	ock Letters)		
Owner 1 (Ma	anager)		T		
Surname:		Given Name:			Date of Birth:
Address:					
Suburb:		State:		Postco	de:
Phone:			Mobile:		
Email:					
Signature:				Owner	ship Share %
Owner 2					
Surname:		Given Name:			Date of Birth:
Address:					
Suburb:		State:		Postco	de:
Phone:			Mobile:		<u>'</u>
Email:					
Signature:				Owner	ship Share %
Owner 3					
Surname:		Given Name:			Date of Birth:
Address:					
Suburb:		State:		Postco	de:
Phone:			Mobile:		
Email:					
Signature:				Owner	ship Share %
Owner 4					
Surname:		Given Name:			Date of Birth:
Address:					
Suburb:		State:		Postco	de:
Phone:			Mobile:		
Email:					
Signature:				Owner	ship Share %
Owner 5					
Surname:		Given Name:			Date of Birth:
Address:					·
Suburb:		State:		Postco	de:
Phone:			Mobile:		
Email:					
Signature:				Owner	ship Share %

Owner 6		_		
Surname:	Given Name:			Date of Birth:
Address:				
Suburb:	State:		Postco	de:
Phone:		Mobile:		
Email:				
Signature:			Owner	ship Share %
Owner 7				
Surname:	Given Name:			Date of Birth:
Address:			_	
Suburb:	State:		Postco	de:
Phone:		Mobile:		
Email:				
Signature:			Owner	ship Share %
Owner 8				
Surname:	Given Name:			Date of Birth:
Address:				
Suburb:	State:		Postco	de:
Phone:		Mobile:		
Email:				
Signature:			Owner	ship Share %
Owner 9				
Surname:	Given Name:			Date of Birth:
Address:			_	
Suburb:	State:		Postco	de:
Phone:		Mobile:		
Email:				
Signature:			Owner	rship Share %
Owner 10				
Surname:	Given Name:			Date of Birth:
Address:				
Suburb:	State:		Postco	de:
Phone:		Mobile:		
Email:				
Signature:			Owner	ship Share %

IMPORTANT NOTE:-

- (1) Partnership Manager refers to the person who is elected to nominate and forfeit this horse as well as receive all correspondence and prize money. The Partnership manager is not empowered to sign documents on behalf of the other partners.
- (2) This application must be submitted within 7 days of a change in ownership, or prior to the horse next racing, whichever is earlier.

Please specify the name and address of the person to whom the new Registration Certificate is to be sent, if different from Partnership Manager.

Name & Address:	

SECTION C: GST STATUS OF NEW OWNERS 1. Is your ownership group registered for GST? Yes (Go to Question 2) No (By answering no you are declaring you/your group as hobbyist owner/s) 2. Australian Business No (ABN) (11 digits) -You are not entitled to an ABN if your activity is a private or recreational pursuit or hobby. If the owner's horse racing activities constitute a business and the enterprise is registered for goods and services tax (GST) the owner can quote the ABN of the enterprise to their racing authority. Many people own racing horses and also run other enterprises, which are not connected with the racing industry. Generally the horse racing activities of these people are conducted as a private or recreational pursuit or hobby. EG - An owner who runs his own carpentry business, cake shop or hotel cannot use that business' ABN for their hobby racing activities. If you are unsure, you should contact the Australian Tax Office. PRIZE MONEY BANKING DETAILS As direct deposit is the preferred payment method this section should be completed for the payment of prize money. You will receive payment by cheque if this section is not completed. By signing the attached Transfer, all purchasers indicate acceptance of prize monies being deposited into the stated bank account. **BRANCH (eg HOBART)** BANK (eg ANZ): BANK & BRANCH No (BSB): (6 digits) ACCOUNT No: NAME OF ACCOUNT (eg A & B Smith): As the Manager of this Ownership Group I authorise that all prize money be paid into the above account. SIGNATURE OF MANAGER: **GST INFORMATION & DECLARATION** By completing and signing the attached transfer of ownership application, I/we notify and declare that I/we am/are registered for GST or an ABN or Hobbyist, as shown hereon. I/We will notify the State Controlling Body if I/we cease to be registered for GST or for an ABN. In signing this transfer I/we acknowledge that information contained in this document may be passed to controlling bodies in other States to facilitate payment of prize money or use of the declared ABN. **HOBBYIST DECLARATION** If you have indicated that you are a "Hobbyist", you are confirming that you are a Genuine Hobbyist who is not able to claim a credit for GST paid on your Harness Racing purchases. If you wish to be able to claim back GST that you pay on your purchases, you should register for GST with an Australian Business Number (ABN). 1. I/We participate in harness racing as an owner/entity-owner "not considered to be carrying on an enterprise", but

- as a hobby or recreational pursuit.
- 2. I/We understand that under the Tax System if I/we are "not considered to be carrying on an enterprise", but as a hobbyist participant in harness racing, we will NOT be able to claim an input tax credit ("refund") for Goods and Services Tax that we pay on our purchases.
- 3. I/We declare that our supply of horses for harness racing is an activity done as a private recreational pursuit or hobby or is wholly of a private or domestic nature for us/me.
- 4. I/We declare that our involvement in harness racing is undertaken without reasonable expectation of a profit. I/We will not be making a taxation deduction for any expenses associated with our involvement with harness racing.
- Should any of these circumstances change I/we will advise the controlling body for harness racing in our State immediately.
- The details on page 4 of this document are true and correct.

Office of Racing Integrity

All mail addressed to: PO Box 1329, Launceston 7250

Street Address: Prospect Government Offices, 171 Westbury Road, Prospect 7250

Telephone: (03) 6777 1900 Fax: (03) 6777 5148 Email: operations@racingintegrity.tas.gov.au



SECTION D: NOTIFICATION OF PENDING TRANSFER OF HORSE

To avoid any repercussions due to possible delays in the Transfer being processed, previous owner(s) should protect themselves by detaching and completing this form, then forward to the Office of Racing Integrity, Tasmania.

This is to	advise	that	the	horse:

Name of Horse:												
Sire:					Dam:	Dam:						
Year of Foaling	g (if u	nnam	ed):		Freezeb	rand:						
Was transferred by	y me/ι	ıs on:	Date:		and it sho	and it should be removed from my/our ownershi						
				Previous	Owner(s):							
Name(s):												
Address:												
Home Phone:					Mobile:	Mobile:						
Email:												
			New	Managing (Owner(s) det	tails:						
Name(s):	_	_										
Address:												
Home Phone:					Mobile:							
Email:						•						

v Department of Primary Industries, Parks, Water and Environment Office of Racing Integrity

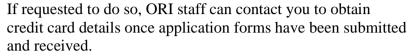


Ph: (03) 6777 1900 Fax (03) 6777 5148 Email operations@racingintegrity.tas.gov.au

Web www.racingintegrity.tas.gov.au









Cash



Please complete the details below then detach the slip and return it with your completed form

Cheque or Money Order Please attach and forward with your completed form

In person at the ORI office at Prospect Government Offices,

171 Westbury Road, Prospect

Please do not send cash in the mail

DETACH AND RETURN WITH YOUR COMPLETED PAPERWORK

Department of Primary Industries, Parks, Water and Environment - Office of Racing Integrity

CREDIT CARD AUTHORISATION

Credit Card Type Card Number:	:	V	'ISA		Ma	asterc	ard							
Expiry Date:	/		_		C	CV: _								
Name on Card:										_Amo	ount \$			
Card Holders Sig	nature:													
I ag	ree to DPI	PWE –	Office	of Raci	ng Integ	grity ch	arging	my cred	it card	with the	amour	nt show	n abov	e
Contact Phone nu	ımber: _								_					