

**Please read this information before completing the form  
The form should be completed in black ink and BLOCK LETTERS.**

### Changing your particulars

You may use this form to change the following details about your business name: the ABN, Trading Status, Preferred Address for Service of Notices, Principal Place of Business, Other Places of Business, Nature of Business, Proprietor's residential/registered office address, Proprietor's Service of Notices address and Proprietor's name.

Changes to Principal Place of Business, Other Places of Business, Nature of Business and the proprietor's residential/registered office address may also be done on line at [www.licencedft.nsw.gov.au](http://www.licencedft.nsw.gov.au).

Changes to the owners of the business name cannot be notified on line or by using this form.

To change the owners of the business name, an 'Application to Change Proprietors of a Business Name' (Form 6) must be completed.

### Trading Status of a Business Name

The *Business Names Act 2002* provides for a name to be Trading or Not Trading. If the trading status of your business name has changed you need to have the record amended. If the change in status is from Not Trading to Trading you will need to provide an address for the principal place of business and any other places of business.

### Using the On Line Service

The [www.licencedft.nsw.gov.au](http://www.licencedft.nsw.gov.au) website allows you to create your own Username and Password for visits to the website. If you have further Business Name Registrations you can also link them to your Username. Before you can access the website for your Business Name Registration, you will need a unique Reference Number.

- A Reference Number can be obtained for your Business Name Registration by calling 13 32 20. You will need to provide your Business Name and Registration Number.
- A Reference Number can be requested by sending an email through the website "Contact Us" page. In this email please provide your Business Registration Name and Number and your telephone number.

To maintain the security of the system the Reference Number will only be posted to an address currently recorded against your Business Name Registration.

### Preferred Address for Service of Notices

The *Business Names Act 2002* requires each proprietor of the business to give their address for service of notices by Fair Trading.

Where a business name is registered to more than one person Fair Trading is only required to send mail to one of those persons. If the Preferred Service of Notices Address has changed please nominate which proprietor is to receive mail on behalf of the business.

### Power of Attorney

If the form is signed by a person holding a power of attorney for a proprietor of the business name, the document will be accepted provided the original Power of Attorney is sighted or details of the appropriate registration of the Power of Attorney are provided (i.e. Book No. and date of execution).

### What if Fair Trading refuses my application

If you are dissatisfied with the decision made on your application, in the first instance, you may apply in writing to Fair Trading to have the decision reviewed.

If you are dissatisfied with the outcome of the review you may then lodge an appeal against the decision with the Administrative Decisions Tribunal.

### Certificate of Registration

Upon processing the completed document, Fair Trading will issue an updated Certificate of Registration.

### Contacting the Office of Fair Trading

**Telephone:** For all enquiries regarding business names please telephone 13 32 20.

**In Person:** You can enquire about business names and make application at any Fair Trading Centre.

For the address of your nearest Fair Trading Centre please telephone 13 32 20

**By Mail:** You can mail your application to the Office of Fair Trading PO Box 972, Parramatta NSW 2124

**Website:** You can visit the Fair Trading website on [www.fairtrading.nsw.gov.au](http://www.fairtrading.nsw.gov.au)

### Language Assistance

**Telephone:** 13 14 50  
Ask for an interpreter in your language  
**TTY:** 02 9338 4943  
Telephone service for the hearing impaired.

**Application to Change  
Particulars of a Business Name**  
under the Business Names Act 2002.**Form 4**

*Please read the information provided before completing this form  
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**No Fee Payable****1. Contact details of the person  
lodging this application**

Name:	JOHN CITIZEN		
Address:	1 SMITH STREET		
	SMITHSVILLE NSW	Postcode:	1000
Daytime phone number:	9111 1110		

**2. Registration Details** Business Name:

SAMPLEFORM ONLY

Registration Number:

BN12345678

ABN:

1 222 333 444

**3. Change in Nature of Business**

Describe in detail the types of products or services you will offer i.e. computer consultancy, hairdressing salon, retail baby wear.


**4. Trading Status**

Are you trading under the above business name?

- YES - **Go to Number 5**  
 NO - **Go to Number 7**

**5. Principal place of business**(Post Office boxes are **NOT** acceptable)

Address:	1 SMITH STREET		
	SMITHSVILLE NSW	Postcode:	1000

**6. Other places of business****If more than one other place of business ceasing, commencing, or continuing, please attach a list.**

(a) Business ceased at:

Address:			
		Postcode:	

(b) Business commenced at::

Address:	1 JONES STREET		
	JONESVILLE NSW	Postcode:	1001

(c) Business continuing at::

Address:			
		Postcode:	

**7. Change of nominated Proprietor for  
Service of Notices for the Business**(This item is only to be completed if the  
nominated proprietor has changed)

Name:			
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**PLEASE ALSO COMPLETE THE REVERSE SIDE**

Lodged at:
Processed by:
Date:

**OFFICE USE ONLY**

FORM BN4

8. **Change to EXISTING proprietors details** *If the details of more than one individual or corporate proprietor change, please photocopy this page and complete*

**Individual Proprietor DO NOT USE THIS PAGE - SAMPLE FORM ONLY**

**Full name of Individual**

Full Name: *JOHN SAMUEL CITIZEN*

**New Residential address**

(Post office boxes are **NOT** acceptable)

Address:

Postcode:

**New address for Service of Notices**

(Post office boxes are acceptable)

Address: *PO BOX 100*

*JONESVILLE NSW*

Postcode: *1001*

**Change of Name by deed poll or marriage**

Former Name:

Current Name:

**Corporate Proprietor**

**Full name of Corporation**

Full Name:

ACN:

**New Registered Office address**

(Post office boxes are **NOT** acceptable)

Address:

Postcode:

**New address for Service of Notices**

(Post office boxes are acceptable)

Address:

Postcode:

**Change of Name**

Former Name:

Current Name:

ACN:

9. **Signature of Proprietor**

I certify that the information provided on this application is correct. I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998* below. I have not been convicted of an offence prescribed under Section 8 of the *Business Names Act 2002*.

**Full Name of Individual or Corporation**

*JOHN SAMUEL CITIZEN*

**Full Name of Person if signing on behalf of Corporation**

**Signature**

*JS Citizen*

**Position Held**

(Must be a Director or Secretary if signing on behalf of Corporation)

**Date**

*3/08/2005*

**Statement under the Privacy and Personal Information Protection Act 1998:**

**The applicant for this registration:**

- **authorises the Office of Fair Trading to make any enquiries and to receive and disclose any information which is relevant to the applicant's initial and ongoing eligibility to hold this registration;**
- **acknowledges that information will be placed on a register open to the public;**
- **has a right to seek access to and correction of information supplied.**

**Application to Change  
Particulars of a Business Name**  
under the Business Names Act 2002.**Form 4**

*Please read the information provided before completing this form  
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**No Fee Payable****1. Contact details of the person  
lodging this application**

Name:
Address:
Postcode:
Daytime phone number:

**2. Registration Details** Business Name:

Registration Number:

ABN:

**3. Change in Nature of Business**

Describe in detail the types of products or services you will offer i.e. computer consultancy, hairdressing salon, retail baby wear.

  
**4. Trading Status**

Are you trading under the above business name?

- YES - **Go to Number 5**  
 NO - **Go to Number 7**

**5. Principal place of business**(Post Office boxes are **NOT** acceptable)

Address:
Postcode:

**6. Other places of business**

***If more than one other place of business ceasing, commencing, or continuing, please attach a list.***

(a) Business ceased at:

Address:
Postcode:

(b) Business commenced at:

Address:
Postcode:

(c) Business continuing at:

Address:
Postcode:

**7. Change of nominated Proprietor for  
Service of Notices for the Business**

(This item is only to be completed if the nominated proprietor has changed)

Name:
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**PLEASE ALSO COMPLETE THE REVERSE SIDE**

Lodged at:
Processed by:
Date:

**OFFICE USE ONLY**

FORM BN4

8. **Change to EXISTING proprietors details** *If the details of more than one individual or corporate proprietor change, please photocopy this page and complete*

**Individual Proprietor**

**Full name of Individual**

Full Name:

**New Residential address**

(Post office boxes are **NOT** acceptable)

Address:

Postcode:

**New address for Service of Notices**

(Post office boxes are acceptable)

Address:

Postcode:

**Change of Name by deed poll or marriage**

Former Name:

Current Name:

**Corporate Proprietor**

**Full name of Corporation**

Full Name:

ACN:

**New Registered Office address**

(Post office boxes are **NOT** acceptable)

Address:

Postcode:

**New address for Service of Notices**

(Post office boxes are acceptable)

Address:

Postcode:

**Change of Name**

Former Name:

Current Name:

ACN:

9. **Signature of Proprietor**

I certify that the information provided on this application is correct. I have read and understand the Statement under the *Privacy and Personal Information Protection Act 1998* below. I have not been convicted of an offence prescribed under Section 8 of the *Business Names Act 2002*.

**Full Name of Individual or Corporation**

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**Signature**

**Position Held**

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