



**Note: Please complete ALL sections in this application.**

**A Your personal and business details**

Member ID \_\_\_\_\_ Status:  AIPA<sup>1</sup>  MIPA  FIPA

Mr  Mrs  Miss  Ms  Other, please state \_\_\_\_\_ Date of birth \_\_\_/\_\_\_/\_\_\_ (dd/mm/yyyy)

Given name \_\_\_\_\_ Middle name \_\_\_\_\_ Family name \_\_\_\_\_

**Your business entity**

Business name \_\_\_\_\_

ABN \_\_\_\_\_ ACN \_\_\_\_\_

Website \_\_\_\_\_

Your interest in the business:

Sole trader  Partner  Principal  Director  Shareholder  Other: \_\_\_\_\_

→ **Commencement date** \_\_\_/\_\_\_/\_\_\_ (compulsory)

Number of staff:  1  2-5  6-10  11-20  21-30  31-50  51+

Number of clients:  1-50  51-100  101-200  201-300  301-500  501+

**Business contact details**

Principal place of business \_\_\_\_\_

Postal address \_\_\_\_\_

Suburb/Town/City \_\_\_\_\_ State/Territory \_\_\_\_\_ Postcode \_\_\_\_\_

Phone/Fax numbers: Mobile \_\_\_\_\_ Business \_\_\_\_\_ Fax \_\_\_\_\_

Email address \_\_\_\_\_

**B More information about you**

Have you ever been declared bankrupt or insolvent?  Yes  No

Have you ever had any criminal convictions within or outside Australia?  Yes  No

Have you been the subject of an unfavourable decision by a professional or regulatory body?  Yes  No

**Note: If you answered yes to any question(s), please provide details on a separate page with any related official documentation.**

**C Tax Practitioners Board (TPB) BAS agent registration(s)**

Individual BAS agent registration number \_\_\_\_\_ Expiry date \_\_\_/\_\_\_/\_\_\_

Company/Partnership BAS agent registration number \_\_\_\_\_ Expiry date \_\_\_/\_\_\_/\_\_\_

**Go to the next page**

**D Professional services and professional indemnity (PI) insurance**

Please indicate the services you offer to the public:

- BAS services prescribed by the *Tax Agent Services Act 2009* or the Tax Practitioners Board<sup>1</sup>
- Payroll  Software customisation and training
- Bookkeeping  **Other<sup>2</sup> (provide details)** \_\_\_\_\_

Please provide details of your current PI insurance:

Insurer \_\_\_\_\_ Cover amount \$ \_\_\_\_\_ **any one claim**

Start date \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Expiry date \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Schedule and Certificate of Currency (CoC) attached<sup>3</sup>

OR

I need to arrange PI Insurance with this application: please authorise the IPA's preferred insurance provider to contact me.<sup>3</sup>

<sup>1</sup>For more information, visit [www.tpb.gov.au/bas-services](http://www.tpb.gov.au/bas-services).

<sup>2</sup>Depending on services you provide to the public, you may need to apply for a Professional Practice Certificate instead of a Public BAS Practitioner Certificate. Please refer to [www.publicaccountants.org.au/membership/ppc/eligibility-and-requirements](http://www.publicaccountants.org.au/membership/ppc/eligibility-and-requirements).

<sup>3</sup>Applying for PI insurance prior to approval of your membership application is done at your own discretion. However, the IPA will not finalise your membership as a Public BAS Practitioner application until we receive your PI insurance Schedule and CoC. **Please note that the cover amount minimum is \$1,000,000 any one claim any one claim, with at least one reinstatement, preferably unlimited reinstatement.**

**E Declaration**

I declare that:

- I have read the IPA's membership price list and understand that I will be charged a Public BAS Practitioner membership fee, if required - refer to the link in Section F next page.
- I understand that by providing the credit/debit card details or cheque details, I am confirming that I have sufficient funds and have authorised for IPA to process all the fees relevant to this application as prescribed in Section F. I also understand that my Public BAS Practitioner membership will not become active until the payment has been received by the IPA and I will receive a tax invoice/receipt via email upon successful payment.
- I have read the Privacy Policy\* and consent to my personal information being collected, used and disclosed for the purposes outlined.
- I understand that the IPA has an investigations and disciplinary process\* to accept written complaints against IPA members. As a condition of membership all IPA members are subject to this investigation and disciplinary process for alleged breaches of the IPA Constitution, By-laws, Pronouncements\* and professional and ethical standards.
- If admitted to Public BAS Practitioner membership:
  - a. I agree to abide by the IPA Constitution, By-laws and Pronouncements and all standard setter and regulator rules, guidance statements and authoritative interpretations including, but not limited to those issued by the Accounting Professional and Ethical Standards Board (APESB), the TPB, the Australian Securities and Investments Commission (ASIC), the Australian Accounting Standards Board (AASB) and the Auditing and Assurance Standards Board (AUASB);
  - b. **I agree to complete the IPA's Public BAS Practitioner Program within six months of admission;**
  - c. I agree to maintain professional indemnity insurance that complies with IPA requirements;
  - d. I agree to advise the IPA should there be any business sale, merger, liquidation or litigation; and
  - e. I understand that I must apply for a Professional Practice Certificate if I offer professional services other than BAS services as prescribed by the *Tax Agent Services Act 2009* to the public and my turnover exceeds the tax-free threshold or if I market my professional services to the public.

I certify that the information provided on this application form and attachments is true and correct.

**Full name** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

\*For more information, go to [www.publicaccountants.org.au](http://www.publicaccountants.org.au).

**F**

**Payment details** (for members currently on Graduate Associate, Joint or Academic rates only)

Public BAS Practitioner membership is based on a financial year. If your current membership rate is not a full rate, you are required to pay a pro-rata difference in subscription. Please refer to [www.publicaccountants.org.au/become-a-member/how-to-apply/fees](http://www.publicaccountants.org.au/become-a-member/how-to-apply/fees).

**Payment authority**

I have enclosed a cheque/money order payable to "Institute of Public Accountants"

**OR**

Please charge my  AMEX  MasterCard  Visa

Card number \_\_\_\_\_ Expiry date \_\_\_\_ / \_\_\_\_

Cardholder name \_\_\_\_\_

OFFICE USE ONLY
Pro-rata Public BAS Practitioner membership fee
\$ _____
All fees are GST inclusive

**Signature** \_\_\_\_\_ **Date** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Upon payment, you will receive a Tax Invoice email.*

**Did you know** that the IPA has a *Find a Public BAS Practitioner* page on our website? If you wish to promote your business on the IPA website, once your Public BAS Practitioner membership is finalised, log into your IPA account and enter your business details on [www.publicaccountants.org.au/find-an-accountant](http://www.publicaccountants.org.au/find-an-accountant).

**Any questions?** Please contact us on 1800 625 625 (9 am – 5 pm (AEST), Monday to Friday).

**How to submit your form**

Please scan and email your completed application with required documentary evidence to your local IPA office below.

<b>New South Wales &amp; Australian Capital Territory</b> e <a href="mailto:nswdivn@publicaccountants.org.au">nswdivn@publicaccountants.org.au</a>	<b>Queensland</b> e <a href="mailto:gldivn@publicaccountants.org.au">gldivn@publicaccountants.org.au</a>
<b>South Australia &amp; Northern Territory</b> e <a href="mailto:sadivn@publicaccountants.org.au">sadivn@publicaccountants.org.au</a>	<b>Tasmania</b> e <a href="mailto:tasdivn@publicaccountants.org.au">tasdivn@publicaccountants.org.au</a>
<b>Victoria</b> e <a href="mailto:vicdivn@publicaccountants.org.au">vicdivn@publicaccountants.org.au</a>	<b>Western Australia</b> e <a href="mailto:wadivn@publicaccountants.org.au">wadivn@publicaccountants.org.au</a>