



Notification of formation of a multiple entry consolidated (MEC) group

**part 3 Current member/s**

List **only** those entities, including eligible tier-1 companies, who are members at the date of notification.  
List at part 4 any entities who have already left the group.  
Any eligible tier-1 company joining the group must also complete part 5.

- Please give the legal name and at least one of the numbers requested for each member.  
It is not an offence not to quote a TFN, but not quoting it may delay processing.  
If no number is given, please attach a separate sheet giving other identification such as business address, trading names, etc.
- To apply for an ABN and/or TFN for any member/s, please attach completed application form/s.  
The Commissioner of Taxation may issue a TFN whenever it is necessary to do so under a Commonwealth taxation law.

If there are more than 5 members to be listed please copy this page before you fill it out.  
If you are including extra copied pages, please number the pages at right

part 3  
page No.

Legal name

ABN          
 ARBN or ACN          
 TFN          
 If joined after date of consolidation, give date joined the group / /

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Legal name

ABN          
 ARBN or ACN          
 TFN          
 If joined after date of consolidation, give date joined the group / /

---

Legal name

ABN          
 ARBN or ACN          
 TFN          
 If joined after date of consolidation, give date joined the group / /

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Legal name

ABN          
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 TFN          
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Legal name

ABN          
 ARBN or ACN          
 TFN          
 If joined after date of consolidation, give date joined the group / /

Notification of formation of a multiple entry consolidated (MEC) group

**part 4 Previous member/s**

List any entities, including eligible tier-1 companies, who have already left the group.

- If the provisional head company has already become ineligible, please also complete Parts 1 to 3 of form NAT 7053 *Notification of provisional head company no longer eligible (MEC group)* and send them with this form.
- Any eligible tier-1 company which has already left the group must also complete part 5.
- Please give the legal name and at least one of the numbers requested for each member.  
It is not an offence not to quote a TFN, but not quoting it may delay processing.  
If no number is given, please attach a separate sheet giving other identification such as business address, trading name, etc.
- To apply for an ABN and/or TFN for any member/s, please attach completed application form/s.  
The Commissioner of Taxation may issue a TFN whenever it is necessary to do so under a Commonwealth taxation law.

If there are more than 2 leaving members to be listed please copy this page before you fill it out.  
If you are including extra copied pages, please number the pages at right

part 4  
page No.

Legal name	
<input type="text"/>	
ABN	<input type="text"/>
TFN	<input type="text"/>
Date left group	<input type="text"/>
Why did the member leave the group?	
<input type="checkbox"/> Provisional head company no longer eligible	<input type="checkbox"/> Member had become a non-resident
<input type="checkbox"/> Member had been deregistered	<input type="checkbox"/> Part interest was sold
<input type="checkbox"/> All the group's membership interests in the entity have been sold (please give details below)	
<input type="checkbox"/> Other (please specify) <input type="text"/>	
If the group no longer beneficially owns any of the membership interest in the leaving member: legal name of one of the purchasing entity/ies	
<input type="text"/>	
<input type="text"/>	
ABN of purchasing entity	<input type="text"/>

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Legal name	
<input type="text"/>	
ABN	<input type="text"/>
TFN	<input type="text"/>
Date left group	<input type="text"/>
Why did the member leave the group?	
<input type="checkbox"/> Provisional head company no longer eligible	<input type="checkbox"/> Member had become a non-resident
<input type="checkbox"/> Member had been deregistered	<input type="checkbox"/> Part interest was sold
<input type="checkbox"/> All the group's membership interests in the entity have been sold (please give details below)	
<input type="checkbox"/> Other (please specify) <input type="text"/>	
If the group no longer beneficially owns any of the membership interest in the leaving member: legal name of one of the purchasing entity/ies	
<input type="text"/>	
<input type="text"/>	
ABN of purchasing entity	<input type="text"/>

**part 5 Appointment of provisional head company by eligible tier-1 companies joining the group**

**A Details of provisional head company**

This part should be completed by the public officer or agent of the provisional head company.

Legal name



ABN

Chosen date of consolidation / /

*If there are more than 3 eligible tier 1 members to be listed please copy this page before you fill it out.  
If you are including extra copied pages, please number the pages at right*

part 5  
page No.

**B Appointment**

To be completed by the public officer of **each** eligible tier-1 company (including any which have already left the group).

I certify that I am the public officer of the eligible tier-1 company named below, and I appoint the company named at **A** above as the provisional head company of this MEC group which we chose to consolidate on and after the date listed in **A** above and the information given on this notification is true and correct.

Signature

Date / /

Name

Position held

Legal name of eligible tier-1 company



I certify that I am the public officer of the eligible tier-1 company named below, and I appoint the company named at **A** above as the provisional head company of this MEC group which we chose to consolidate on and after the date listed in **A** above and the information given on this notification is true and correct.

Signature

Date / /

Name

Position held

Legal name of eligible tier-1 company



I certify that I am the public officer of the eligible tier-1 company named below, and I appoint the company named at **A** above as the provisional head company of this MEC group which we chose to consolidate on and after the date listed in **A** above and the information given on this notification is true and correct.

Signature

Date / /

Name

Position held

Legal name of eligible tier-1 company