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Post your completed form to: National Processing Centre, Private Bag 92061, Victoria Street West, Auckland 1142

## Application for registration of a Limited Partnership

Limited Partnerships Act 2008

Office use only

- > It is recommended that you seek legal advice to determine whether a Limited Partnership is the most appropriate business structure for your purposes
- > The name must end with the words **Limited Partnership** or the abbreviation **LP** or **L.P.**
- > If there is insufficient space on the form to supply the information required (e.g. if there are more partners than this form allows for), attach separate sheets containing the information set out in the prescribed format.
- > When you submit your application, remember to include your completed **application checklist** (Page 6).
- > The GST rate increased from 12.5% to 15% on 1 October 2010. The fees shown below include GST at the new rate.

### 1. Proposed name of Limited Partnership

### 2. Address of registered office

This must be a physical address in New Zealand and must not be a PO Box or Private Bag address

### 3. Address for service

This must be a physical address in New Zealand and must not be a PO Box or Private Bag address

### 4. Postal address

### 5. Email address

### 6. Certification

I, \_\_\_\_\_ hereby certify that the proposed partners of this Limited Partnership have entered into a partnership agreement that complies with section 10 of the Limited Partnerships Act 2008.

Signature of proposed General Partner or their agent .....

### 7. Presenter details

Full name
Postal address

## Proposed name of Limited Partnership



Each proposed General Partner must also complete a consent form (Form 5)  
If necessary, please complete additional General Partners' pages and attach all pages to this application.  
If a General Partner is an unincorporated trust, provide details of the trustees along with the name of the trust.

If you are:

- an **individual**, complete **Part A**
- a **body corporate**, complete **Part B**
- a **special partnership or unincorporated overseas limited partnership** complete **Part C**

## 8. General Partners only

### Part A. Individual

The following will be General Partners of the proposed Limited Partnership (All General Partners are required to complete a consent form **LP 5**):

**Full name**

**Residential address**



**Date of birth**

Please give first name(s) followed by surname in BLOCK letters

Will not be made publicly available

1. _____ _____	_____ _____	____/____/____
2. _____ _____	_____ _____	____/____/____
3. _____ _____	_____ _____	____/____/____
4. _____ _____	_____ _____	____/____/____

### Part B. Body corporate

The following will be General Partners of the proposed Limited Partnership (All General Partners are required to complete a consent form **LP 5**):

1. Name

Incorporation/registration no.

--	--

Registered office address

Address for service

--	--

2. Name

Incorporation/registration no.

--	--

Registered office address

Address for service

--	--

3. Name

Incorporation/registration no.

--	--

Registered office address

Address for service

--	--

### Proposed name of Limited Partnership

### 8. General Partners only (continued)

#### Part C. Partnership(s) under Partnership Act 1908 or unincorporated overseas limited partnership

The following will be General Partners of the proposed Limited Partnership (All General Partners are required to complete a consent form LP 5):

Name of partnership

Address for service

Postal address

Telephone

Facsimile

Email address

#### Details of each partner in the Special Partnership or unincorporated overseas limited partnership

Name

Residential address

1.	_____
	_____
2.	_____
	_____
3.	_____
	_____
4.	_____
	_____
5.	_____
	_____
6.	_____
	_____

1.	_____
	_____
2.	_____
	_____
3.	_____
	_____
4.	_____
	_____
5.	_____
	_____
6.	_____
	_____

**Proposed name of Limited Partnership**



Proposed Limited Partners details will not be made publicly available on the Limited Partnerships Register. If necessary, please complete additional Limited Partners' pages and attach all pages to this application. If you are:

- an **individual**, complete **Part A**
- a **body corporate**, complete **Part B**
- a **special partnership** or **unincorporated overseas limited partnership**, complete **Part C**

**9. Limited Partners only**



**Part A. Individual**

The following will be Limited Partners of the proposed Limited Partnership:

Full name <small>Please give first name(s) followed by surname in BLOCK letters</small>	Residential address	Date of birth <small>Will not be made publicly available</small>
1. _____ _____	_____	____/____/____
2. _____ _____	_____	____/____/____
3. _____ _____	_____	____/____/____
4. _____ _____	_____	____/____/____



**Part B. Body corporate**

The following will be Limited Partners of the proposed Limited Partnership:

1. Name	Incorporation/registration no.
_____	_____
Registered office address	Address for service
_____	_____
2. Name	Incorporation/registration no.
_____	_____
Registered office address	Address for service
_____	_____
3. Name	Incorporation/registration no.
_____	_____
Registered office address	Address for service
_____	_____

Proposed name of Limited Partnership

[Empty text box for proposed name of Limited Partnership]

9. Limited Partners only (continued)



Part C. Partnership(s) under Partnership Act 1908 or unincorporated overseas limited partnership

The following will be Limited Partners of the proposed Limited Partnership:

Name of partnership

[Empty text box for name of partnership]

Address for service

[Empty text box for address for service]

Postal address

[Empty text box for postal address]

Telephone [Empty text box]

Facsimile [Empty text box]

Email address [Empty text box]

Details of each partner in the Special Partnership or unincorporated overseas limited partnership

Name

Residential address

1.	_____
	_____
2.	_____
	_____
3.	_____
	_____
4.	_____
	_____
5.	_____
	_____
6.	_____
	_____

1.	_____
	_____
2.	_____
	_____
3.	_____
	_____
4.	_____
	_____
5.	_____
	_____
6.	_____
	_____

**Proposed name of Limited Partnership**

**It is recommended that you seek legal advice to determine whether a Limited Partnership is the most appropriate business structure for your purposes.**

**When you submit your application, please remember to include this completed application checklist.**

**10. Checklist**

- Have you checked that the proposed Limited Partnership name is not identical or almost identical to another:
- > Company **or**
  - > Limited Partnership **or**
  - > Overseas Limited Partnership?

**Note** | This check applies to the Limited Partnership name. For example, ABC Limited Partnership is refused registration if ABC Limited is an existing company. Please ensure you check what names are currently in use by searching the Companies Register and the Registers of Limited Partnerships and Overseas Limited Partnerships at [www.companies.govt.nz](http://www.companies.govt.nz) before you lodge your documents for registration.

- Do you have a partnership agreement that complies with section 10 of the Limited Partnership Act 2008? View the legislation at [www.legislation.govt.nz](http://www.legislation.govt.nz)

**Note** | There is no requirement to supply a copy of the partnership agreement with this application.

- Have you attached the consent forms (**Form LP5**) for each General Partner?

- Are the General Partner(s) and Limited Partner(s) different?

**Note** | The General Partner and Limited Partner cannot be the same.

- Is an unincorporated trust (for example, a family trust) a General or Limited Partner of this Limited Partnership?

**Note** | To learn how correctly record an unincorporated trust as a General or Limited Partner go to [www.companies.govt.nz](http://www.companies.govt.nz) then select **Learn About > Other Entities** and select **Limited Partnerships**. There you can read our frequently asked questions on General and Limited Partners.

- Have all required parts of the form been completed?  
(for example, has a date of birth been provided for individuals along with their residential address. Has a registered office address been supplied for body corporates?)

- Is the **NZ\$276** fee attached?  
If paying by cheque, please make your cheque payable to '**Ministry of Economic Development**'.

**Send your completed forms (including this checklist) to:**

National Processing Centre  
Private Bag 92061  
Victoria Street West  
Auckland 1142