## Form CORP 5 Notice of Intervention by ASIC

Form CORP 5

| To be inserted by Court  Case Number:  Date Filed:  FDN:  NOTICE OF INTERVENTION BY ASIC  SUPREME COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION  Corporations List  IN THE MATTER OF [full name of corporation to which the proceeding relates and, if applicable, the words '(in liquidation) (receiver appointed)', '(receiver and manager appointed)', '(controller acting)', or (under administration)']  ABN or ACN or ARBN: [insert ABN or ACN or ARBN]  Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a parturable if more than one party of the same type.  First Applicant  Interested Party  The Australian Securities and Investments Commission  Name of responsible officer  Address  Street Address including unit or tevel number and name of property if required).  Country  Postcode  Country |                            |  |                                    |                                     |                                     |
|--|----------------------------|--|------------------------------------|-------------------------------------|-------------------------------------|
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| First Applicant  First Respondent  Interested Party  The Australian Securities and Investments Commission  Name of responsible officer  Name  Address  Street Address (including unit or level number and name of property if required)  | ABN or ACN or ARBN: [inser | t ABN or ACN or ARBN]                                |                                    |                                     |                                     |
| First Respondent  Interested Party  The Australian Securities and Investments Commission  Name of responsible officer  Name  Address  Street Address (including unit or level number and name of property if required)   |                            |  | Trustee) and Litigation Guardian I | Name (if applicable) for each party | . Each party should include a party |
| Interested Party  The Australian Securities and Investments Commission  Name of responsible officer  Name  Address  Street Address (including unit or level number and name of property if required)   | First Applicant            |  |                                    |                                     |                                     |
| Name of responsible officer  Name  Address  Street Address (including unit or level number and name of property if required)   | First Respondent           |  |                                    |                                     |                                     |
| Address  Street Address (including unit or level number and name of property if required)  | Interested Party           | The Australian Securities and Investments Commission |                                    |                                     |                                     |
| Address  Street Address (including unit or level number and name of property if required)  |                            | Name   |                                    |                                     |                                     |
|  | Address                    |  |                                    |                                     |                                     |
| City/town/suburb State Postcode Country  |                            | orreet Address (including unit or                    | ievei number and name of propert   | y ir requirea)                      |                                     |
|  |                            | City/town/suburb                                     | State                              | Postcode                            | Country                             |

## **Notice of intervention**

Email address

The Australian Securities and Investments Commission, whose address for service is shown above, intervenes in this proceeding.

Date: [date]

| Signed on behalf of ASIC          |
|-----------------------------------|
| Name of signatory: [name]         |
| Capacity of signatory: [capacity] |