

29 July 2021

AVALON LODGE CTS 11887 Not registered for GST

ABN: 32 315 449 803

Tax Invoice

S & A Tornatore & C Leotta 48 Lewis Street Camp Hill QLD 4152

Ref

ReLot7AVALON LODGE CTS 11887Fee74.47PaidAbove Fee includes GST

INF	Body Corporate a	Section 206	nagement Act 1997	MENT	
11 11		s at 29 July 202		VIL/I VI	
Body Corporate	Name of Scheme: Community Titles Scheme No: Lot Number:	AVALON L(11887 7		3270	
Secretary	Name Address				
	Telephone		Facsimile		
Body Corporate Manager	Name Address	PO Box 554	nit Administratio BEACH QLD 42		
	Telephone	5575 2955	Facsimile	5575 353	33
Contributions		Levies I	Determined by the Body Co	proprate for this I	Lot
and Levies	Administrative Fund	Amount		Discount	If paid by
	01/12/20 to 28/02/21	\$475.00	01/12/20	\$47.50	01/12/20
	01/03/21 to 31/05/21	\$575.00	08/03/21	\$57.50	08/03/21
	01/06/21 to 31/08/21	\$575.00	01/06/21	\$57.50	01/06/21
	01/09/21 to 30/11/21	\$575.00	01/09/21	\$57.50	01/09/21
	01/12/21****28/02/22	\$550.00	01/12/21	\$55.00	01/12/21
	Sinking Fund				
	01/12/20 to 28/02/21	\$50.00	01/12/20	\$5.00	01/12/20
	01/03/21 to 31/05/21	\$50.00	08/03/21	\$5.00	08/03/21
	01/06/21 to $31/08/21$	\$50.00	01/06/21	\$5.00	01/06/21
	01/09/21 to 30/11/21	\$50.00	01/09/21	\$5.00	01/09/21
	01/12/21****28/02/22	\$50.00	01/12/21	\$5.00	01/12/21
Body Corporate	Name of Scheme: Community Titles Scheme No:	AVALON L(11887	ODGE		
	Lot Number:	7	Plan Number:	3270	
Improvements on Common Property for which Buyer will be Responsible	Autho	nnexure Registe prisations Affec non Property			

Body Corporate and Community Management Act 1997 Section 206 INFORMATION FOR DISCLOSURE STATEMENT (continued)

Body Corporate Assets Required to be Recorded on Register Committee	There are no assets required to be recorde	ed.
Information prescribed under Regulation Module	Nil	
Signing		
	Seller/Sellers Agent	Witness
	Date	
Buyers Acknowledgement	The Buyer acknowledges having received an Seller before entering into the contract.	d read this statement from the
	Buyer	Witness

Date

Additional Information

Body Corporate	Name of Scheme: Community Titles Scher	ne No:	AVA 1188'	LON LODGE 7		
	Lot Number:		7		Plan Number:	3270
Lot Entitlements and Other	Interest Schedule	Aggrega	ate	81	Entitlement of Lot	10
Matters	Contribution Schedule	Aggrega	ate	81	Entitlement of Lot	10
	Balance of Sinking fund of last Financial Year	at end		3,730.14	as at	30/11/20
	Insurance Levies not inc	luded				

in Administrative Fund Levies:

Monetary Liability under Exclusive Use By-Law

Insurance

Type See Annexure -

Company **Insurance Report**

Policy No

Sum Insured Due Date

Mortgages or Securities over Body Corporate Assets

Nil

Additional Information (continued)

11887

7

Body Corporate

Name of Scheme:

AVALON LODGE

Community Titles Scheme No: Lot Number:

Plan Number:

ber: **3270**

Latent or Patent Defects in Common Property or Body Corporate Assets

Actual or

Contingent or Expected Liabilities of Body Corporate

Circumstances in Relation to Affairs of the Body Corporate

Exceptions to Statements in Clause 7.4(2) DISCLOSURE STATEMENT (Continued)

Name of Scheme AVALON LODGE				CTS No	11887				
Lot No.	7	Туре	BUILDIN	G FORM	IAT PL	AN	Plan No	3270	
ANNEXURE - LEVY DETAILS									
Descriptio	n		Amount	Due Date	Date Paid	Discount	If paid by	Date of Notice	Amount Overdue
SINKING unit 7 win	SP dow replacemen	nt	750.00	29/04/21	N/A	0.00	29/04/21	31/03/21	N/A
Items n	narked with ***	** are for	periods that are ou	itside the cur	rent financi	ial year. They ma	ay also be sub	oject to ratification	on at
				the next Ge					

Register Of Authorisations Affecting Common Property AVALON LODGE CTS 11887

Lot No	Date of Resolution	Authority Given To	Description of Area	Conditions

CONTRACTS REGISTER AVALON LODGE CTS 11887

Contractor Name and Address	Details of Duties	Delegated Powers	Basis of Remuneration
Australian Unit Administration	Body Corporate Manager		1200.00
2431 Gold Coast Highway			
MERMAID BEACH Q 4218			
Commencement Date	01/03/18	Termination Date	
Term of Contract	1 year	Fi	nance
Options	- y • • • •	Name of Financier	
Copy of Agreement on File	Y	Date of Advice from Financier	
Workers Comp No	1	Date of Withdrawal of Financier	
Workers comp roo		Dute of Whitehawar of T maneter	
Contractor Name and Address	Details of Duties	Delegated Powers	Basis of Remuneration
		C C	
Commencement Date		Termination Date	
Term of Contract			nance
Options		Name of Financier	
Copy of Agreement on File		Date of Advice from Financier	
Workers Comp No		Date of Withdrawal of Financier	
Contractor Name and Address	Details of Duties	Delegated Powers	Basis of Remuneration
Commencement Date		Termination Date	
Term of Contract		Fi	nance
Options		Name of Financier	
Copy of Agreement on File		Date of Advice from Financier	
Workers Comp No		Date of Withdrawal of Financier	
Contractor Name and Address	Details of Duties	Delegated Powers	Basis of Remuneration
		2 elegated 1 en els	
Commencement Date		Termination Date	
Term of Contract			nance
Options		Name of Financier	
Copy of Agreement on File		Date of Advice from Financier	
Workers Comp No		Date of Withdrawal of Financier	
		-	-
Contractor Name and Address	Details of Duties	Delegated Powers	Basis of Remuneration
Commencement Date		Termination Date	1
Term of Contract			nance
i citil of Continuet		Name of Financier	
Ontions			
Options			
Options Copy of Agreement on File Workers Comp No		Date of Advice from Financier Date of Withdrawal of Financier	

INSURANCE REPORT AVALON LODGE CTS 11887

22 Frederick Street SURFERS PARADISE

QLD

Туре		Sum Insured	Premium	Date Last Paid
BUILDING		3,807,186	\$6,114.54	07/12/20
Company/Broker	Telephone	Policy Number	Due Date	
Ligo Underwriting	07 3368 3708	47-ZST-000331-01	17 December 2021	
Honan Insurance Group	Facsimile	Excess/Comments		
Level 13, 40 Creek Street		\$500 excess each and	every claim un	less specified
Brisbane QLD 4000		IQumulate Premium Funding		
		_	C	

Type COMMON CONTENTS		Sum Insured 38,072	Premium	Date Last Paid 07/12/20
Company/Broker Ligo Underwriting	Telephone 07 3368 3708	Policy Number 47-ZST-000331-01	Due Date 17 Decem	ber 2021
Honan Insurance Group Level 13, 40 Creek Street Brisbane QLD 4000	Facsimile	Excess/Comments	·	

Type OFFICE BEARERS		Sum Insured 1,000,000	Premium	Date Last Paid 07/12/20
Company/Broker Ligo Underwriting	Telephone 07 3368 3708	Policy Number 47-ZST-000331-01	Due Date 17 Decem	ber 2021
Honan Insurance Group Level 13, 40 Creek Street Brisbane QLD 4000	Facsimile	Excess/Comments	·	

Type VOLUNTARY WORKERS		Sum Insured 200,000	Premium	Date Last Paid 07/12/20
Company/Broker	Telephone	Policy Number	Due Date	
Ligo Underwriting	07 3368 3708	47-ZST-000331-01	11 17 December 2021	
Honan Insurance Group	Facsimile	Excess/Comments		
Level 13, 40 Creek Street				
Brisbane QLD 4000				

Type FIDELITY GUARANTEE		Sum Insured 200,000	Premium	Date Last Paid 07/12/20
Company/Broker	Telephone	Policy Number	Due Date	
Ligo Underwriting	07 3368 3708	47-ZST-000331-01	17 Decem	ber 2021
Honan Insurance Group	Facsimile	Excess/Comments		
Level 13, 40 Creek Street				
Brisbane QLD 4000				

Type PUBLIC LIABILITY		Sum Insured 20,000,000	Premium	Date Last Paid 07/12/20
Company/Broker Ligo Underwriting	Telephone 07 3368 3708	Policy Number 47-ZST-000331-01	Due Date 17 Decem	ber 2021
Honan Insurance Group Level 13, 40 Creek Street	Facsimile	Excess/Comments	-	
Brisbane QLD 4000				

INSURANCE REPORT AVALON LODGE CTS 11887

22 Frederick Street SURFERS PARADISE

QLD

Туре		Sum Insured	Pi	Premium	Date Last Paid
RENT LOSS/TEMP ACCOM		571,078			07/12/20
Company/Broker	Telephone	Policy Number	Due	e Date	
Ligo Underwriting	07 3368 3708	47-ZST-000331-01	17	Decem	ber 2021
Honan Insurance Group	Facsimile	Excess/Comments			
Level 13, 40 Creek Street					
Brisbane QLD 4000					

Type CATASTROPHE COVER		Sum Insured 30%	P	Premium	Date Last Paid 07/12/20
Company/Broker Ligo Underwriting	Telephone 07 3368 3708	Policy Number 47-ZST-000331-01	Due Date 17 December 2021		ber 2021
Honan Insurance Group Level 13, 40 Creek Street	Facsimile	Excess/Comments			
Brisbane QLD 4000					

Type AUDIT EXPENSES		Sum Insured 100,000 Aggregate Li	Premium nit	Date Last Paid 07/12/20
Company/Broker	Telephone	Policy Number	Due Date	
Ligo Underwriting 07 3368 3708		47-ZST-000331-01 17 December 2021		
Honan Insurance Group	Facsimile	Excess/Comments		
Level 13, 40 Creek Street				
Brisbane QLD 4000				

Type LEGAL EXPENSES		Sum Insured 100,000 Aggregate Li	Premium nit	Date Last Paid 07/12/20
Company/Broker Ligo Underwriting	Telephone 07 3368 3708	Policy Number 47-ZST-000331-01	Due Date 17 Decem	ber 2021
Honan Insurance Group Level 13, 40 Creek Street Brisbane QLD 4000	Facsimile	Excess/Comments		

		Sum Insured	Premium	Date Last Paid
WORKPLACE/HEALTH/SAF		100,000 Aggregate Lim	11	07/12/20
Company/Broker	Telephone	Policy Number	Due Date	
Ligo Underwriting	07 3368 3708	47-ZST-000331-01	17 December 2021	
Honan Insurance Group	Facsimile	Excess/Comments		
Level 13, 40 Creek Street				
Brisbane QLD 4000				

Type OWNERS IMPROVEMENTS		Sum Insured 300,000	Premium	Date Last Paid 07/12/20
Company/Broker	Telephone	Policy Number	Due Date	
Ligo Underwriting	07 3368 3708	47-ZST-000331-01	17 Decer	nber 2021
Honan Insurance Group	Facsimile	Excess/Comments		
Level 13, 40 Creek Street				
Brisbane QLD 4000				

INSURANCE REPORT AVALON LODGE CTS 11887

22 Frederick Street SURFERS PARADISE

QLD

Туре		Sum Insured	Premium	Date Last Paid
FLOATING FLOORBOARDS		Insured		07/12/20
Company/Broker	Telephone	Policy Number	Due Date	
Ligo Underwriting	07 3368 3708	47-ZST-000331-01	17 Decem	ber 2021
Honan Insurance Group	Facsimile	Excess/Comments		
Level 13, 40 Creek Street				
Brisbane QLD 4000				

Туре		Sum Insured	Premium	Date Last Paid
Company/Broker	Telephone	Policy Number	Due Date	
	Facsimile	Excess/Comments		

Туре		Sum Insured		Premium	Date Last Paid
Yompany/Broker Telephone I		Policy Number		Due Date	
	Facsimile	Excess/Comments			

Туре		Sum Insured	Premium	Date Last Paid
Company/Broker	Telephone	Policy Number	Due Date	
	Facsimile	Excess/Comments		

Туре		Sum Insured		Premium	Date Last Paid
Company/Broker	Telephone	Policy Number	D	Due Date	
	Facsimile	Excess/Comments			

Туре		Sum Insured	Premium	Date Last Paid
Company/Broker	Telephone	Policy Number	Due Date	
	Facsimile	Excess/Comments		