

STRATACARE AUSTRALIA PTY LTD ABN 87 088 584 267

BRISBANE / SUNSHINE COAST

3/141 Campbell Street, Bowen Hills
Queensland 4006

PHONE 07 3435 5300

EMAIL reception@stratacare.com.au

GOLD COAST

Level 1, 3G Building, 27 Garden Street
Southport Queensland 4215

PHONE 07 5531 2622

EMAIL office@stratacare.com.au



STRATACARE

05 May 2022

STRATHPINE VILLAGE STAGE D CTS 20031
Registered for GST

ABN: 13 531 209 461

Tax Invoice

Meer Investments Pty Ltd ATF
C/- EE & MR Lucas
21 Lindfield Drive
PETRIE QLD 4502

Ref

Re Lot 48 STRATHPINE VILLAGE STAGE D CTS 20031

Fee 143.00 Paid

Above Fee includes GST

Please find enclosed information which may be used to enable you
to complete the Disclosure Statement.

IMPLIED WARRANTIES

Under Section 206 of the Body Corporate & Community Management Act 1997, implied
warranties are matters for consideration or enquiry by the seller.
Disclosures of this nature are not furnished with this statement.

OWNERS IMPROVEMENTS ON COMMON PROPERTY

The Attached statement only shows owners improvements authorised and recorded by the
Body Corporate. Disclosure of unauthorised owners improvements is a matter for the
attention of the seller.

It is recommended that prospective Purchasers engage a search agent to conduct an
independent search of the Body Corporate records to determine any issues such as contingent
liabilities or common property defects.

Please check the information to verify the accuracy.

We have taken every care in preparing the information, but the information reported is
limited to that notified to us.

Yours Faithfully,
Strata Care Australia Pty Ltd

Per..Thuat Nguyen
Financial Controller

INFORMATION FOR DISCLOSURE STATEMENT**as at 05 May 2022****Body Corporate**

Name of Scheme:

STRATHPINE VILLAGE STAGE D

Community Titles Scheme No:

20031

Lot Number:

48

Plan Number:

GTP 3063**Secretary**

Name

Judy Hawes

Address

C/- Strata Care Australia Pty Ltd**PO Box 1251****Fortitude Valley 4006**

Telephone

34355300

Facsimile

3891 6744**Body Corporate**

Name

STRATA CARE AUSTRALIA PTY LTD**Manager**

Address

PO BOX 1251**FORTITUDE VALLEY QLD 4006**

Telephone

07 34355300

Facsimile

**Contributions
and Levies**

Levies Determined by the Body Corporate for this Lot

Administrative Fund

	Amount	Due Date	Discount	If paid by
01/06/21 to 31/08/21	\$381.20	01/06/21	\$76.24	01/06/21
01/09/21 to 30/11/21	\$381.20	01/09/21	\$76.24	01/09/21
01/12/21 to 28/02/22	\$381.20	09/12/21	\$76.24	09/12/21
01/03/22 to 31/05/22	\$381.20	01/03/22	\$76.24	01/03/22
01/06/22****31/08/22	\$381.20	01/06/22	\$76.24	01/06/22
01/09/22****30/11/22	\$381.20	01/09/22	\$76.24	01/09/22
Sinking Fund				
01/06/21 to 31/08/21	\$146.16	01/06/21	\$29.23	01/06/21
01/09/21 to 30/11/21	\$146.16	01/09/21	\$29.23	01/09/21
01/12/21 to 28/02/22	\$146.16	09/12/21	\$29.23	09/12/21
01/03/22 to 31/05/22	\$146.16	01/03/22	\$29.23	01/03/22
01/06/22****31/08/22	\$146.16	01/06/22	\$29.23	01/06/22
01/09/22****30/11/22	\$146.16	01/09/22	\$29.23	01/09/22

Body Corporate

Name of Scheme:

STRATHPINE VILLAGE STAGE D

Community Titles Scheme No:

20031

Lot Number:

48

Plan Number:

GTP 3063

Improvements on
Common
Property for
which Buyer will
be Responsible

INFORMATION FOR DISCLOSURE STATEMENT (continued)

Body Corporate
Assets Required to
be Recorded on
Register

There are no assets required to be recorded.


Committee

There is a Body Corporate Committee

Information
prescribed under
Regulation
Module

Nil

Signing



Seller/Sellers Agent

Witness

06-05-2022

Date

Buyers
Acknowledgement

The Buyer acknowledges having received and read this statement from the
Seller before entering into the contract.

Buyer

Witness

Date

Additional Information

Body Corporate	Name of Scheme:		STRATHPINE VILLAGE STAGE D	
	Community Titles Scheme No:		20031	
	Lot Number:	48	Plan Number:	GTP 3063

Lot Entitlements and Other Matters	Interest Schedule	Aggregate	1914	Entitlement of Lot	22
	Contribution Schedule	Aggregate	77	Entitlement of Lot	1
	Balance of Sinking fund at end of last Financial Year		108,818.83	as at	31/05/21
	Insurance Levies not included in Administrative Fund Levies:		See Annexure		
	Monetary Liability under Exclusive Use By-Law		Not Applicable		

Insurance	Type	Company	Policy No	Sum Insured	Due Date
	See Annexure -	Insurance Report			

Mortgages or Securities over Body Corporate Assets	Nil
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Additional Information (continued)

Body Corporate

Name of Scheme:

STRATHPINE VILLAGE STAGE D

Community Titles Scheme No:

20031

Lot Number:

48

Plan Number:

GTP 3063

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	STRATHPINE VILLAGE STAGE D			CTS No	20031
Lot No.	48	Type	STANDARD FORMAT PLAN	Plan No	GTP 3063

ANNEXURE - LEVY DETAILS

[illegible]

INSURANCE REPORT

STRATHPINE VILLAGE STAGE D CTS 20031

26-38 MECKLEM STREET
STRATHPINE 4500
QLD

Type BUILDING	Sum Insured 30,036,281	Premium \$45,909.11	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900	Policy Number HU0000016110	Due Date 13 July 2022
	Facsimile 3135 7901	Excess/Comments \$500 Standard Excess	

Type PUBLIC LIABILITY	Sum Insured 20,000,000	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900	Policy Number HU0000016110	Due Date 13 July 2022
	Facsimile 3135 7901	Excess/Comments	

Type VOLUNTARY WORKERS	Sum Insured 200,000/2,000	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900	Policy Number HU0000016110	Due Date 13 July 2022
	Facsimile 3135 7901	Excess/Comments	

Type WORKERS COMPENSATION	Sum Insured	Premium \$190.48	Date Last Paid 13/08/21
Company/Broker Workcover Queensland WORKCOVER QUEENSLAND GPO Box 2772 BRISBANE QLD 4001	Telephone 3135 7900	Policy Number WCA920555914	Due Date 30 September 2022
	Facsimile	Excess/Comments	

Type FIDELITY GUARANTEE	Sum Insured 100,000	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900	Policy Number HU0000016110	Due Date 13 July 2022
	Facsimile 3135 7901	Excess/Comments	

Type OFFICE BEARERS	Sum Insured 2,000,000	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900	Policy Number HU0000016110	Due Date 13 July 2022
	Facsimile 3135 7901	Excess/Comments	

INSURANCE REPORT

STRATHPINE VILLAGE STAGE D CTS 20031

26-38 MECKLEM STREET
STRATHPINE 4500
QLD

Type MACHINERY BREAKDOWN	Sum Insured NOT INCL.	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments	Due Date 13 July 2022

Type LOSS RENT/TEMP ACCOM	Sum Insured 4,505,442	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments \$500 Standard Excess	Due Date 13 July 2022

Type LEGAL EXPENSES	Sum Insured 50,000	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments	Due Date 13 July 2022

Type FLOOD	Sum Insured INCLUDED	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments \$500	Due Date 13 July 2022

Type COMMON CONTENTS	Sum Insured 300,362	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments \$500 Standard Excess	Due Date 13 July 2022

Type BUILDING CATASTROPHE	Sum Insured 9,010,884	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments	Due Date 13 July 2022

INSURANCE REPORT

STRATHPINE VILLAGE STAGE D CTS 20031

26-38 MECKLEM STREET
STRATHPINE 4500
QLD

Type FLOATING FLOORS	Sum Insured INCLUDED	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments \$500 Standard Excess	Due Date 13 July 2022

Type AUDIT COSTS	Sum Insured 25,000	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments	Due Date 13 July 2022

Type APPEAL EXPENSES WH&S	Sum Insured 100,000	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments	Due Date 13 July 2022

Type LOT OWNERS FIXTURES	Sum Insured 250,000	Premium	Date Last Paid 17/06/21
Company/Broker QBE via CHU CHU Underwriting Agencies GPO Box 705 BRISBANE QLD 4001	Telephone 3135 7900 Facsimile 3135 7901	Policy Number HU0000016110 Excess/Comments	Due Date 13 July 2022

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

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

CERTIFICATE OF COMPLETION

Date Generated: 06/05/2022



Document Details

Subject: SignAnything - Disclosure Statement - 48D.26 Mecklem Street Strathpine QLD 4500

Document Pages: 9

Exchanged by: Not Applicable

Certificate Pages: 1

Exchange Date: Not Applicable

Status: Signed

No. of Signatures: 1

Signature Logs

Signer: Matt Phillips

Email Address: matt@imageproperty.com.au

Status: Signed

IP Address:

Supervised By:

Email Sent Date: 6/5/2022

Signed Date: 6/5/2022

Signature: 

Signer:

Email Address:

Status:

IP Address:

Supervised By:

Email Sent Date:

Signed Date:

Signature:

Signer:

Email Address:

Status:

IP Address:

Supervised By:

Email Sent Date:

Signed Date:

Signature: