Body Corporate and Community Management Act 1997

Section 206

INFORMATION FOR DISCLOSURE STATEMENT

as at 16 August 2022

Body Corporate Name of Scheme: CURRIMUNDI LAKE F/R VILLAS 3

Community Titles Scheme No: 28851

Lot Number: 144 Plan Number: 136738

Secretary Name Mrs TM CASH

Address C/- Alpha Strata

PO Box 907

Caloundra QLD 4551

Telephone 07 5444 2755 Facsimile 07 5444 2899

Body Corporate Name ALPHA STRATA

Manager Address Shops 3 & 4

45 - 47 Minchinton Street CALOUNDRA QLD 4551

Telephone 07 5444 2755 Facsimile 07 5444 2899

Contributions Levies Determined by the Body Corporate for this Lot

Administrative Fund Due Date Discount If paid by Amount 01/05/22 to 31/08/22 01/07/22 \$966.66 01/07/22 \$1,089.17 01/11/22 01/09/22 to 31/12/22 01/11/22 Nil 01/01/23 to 30/04/23 \$1,089.17 01/03/23 Nil 01/03/23 01/05/23****31/08/23 \$1,048.33 01/07/23 Nil 01/07/23

Sinking Fund 01/05/22 to 31/08/22 \$15.35 01/07/22

Nil 01/07/22 01/09/22 to 31/12/22 01/11/22 Nil 01/11/22 \$15.35 01/01/23 to 30/04/23 \$15.35 01/03/23 Nil 01/03/23 01/05/23****31/08/23 \$15.35 01/07/23 Nil 01/07/23

Body Corporate Name of Scheme: CURRIMUNDI LAKE F/R VILLAS 3

Community Titles Scheme No: 28851

Lot Number: 144 Plan Number: 136738

Improvements on Common Property for which Buyer will be Responsible

and Levies

See annexure Register of Authorisations Affecting Common Property

Body Corporate and Community Management Act 1997 Section 206

INFORMATION FOR DISCLOSURE STATEMENT (continued)

Body Corporate Assets Required to be Recorded on Register	There are no assets required to be recorded	
Committee	Yes	
Information prescribed under Regulation Module	Nil	
Signing	Seller/Sellers Agent	Witness
	19-08-2022 Date	
Buyers Acknowledgement	The Buyer acknowledges having received and Seller before entering into the contract.	read this statement from the
	Buyer	Witness
	Date	

Additional Information

Body Corporate Name of Scheme: CURRIMUNDI LAKE F/R VILLAS 3

Community Titles Scheme No: 28851

Lot Number: 144 Plan Number: 136738

Lot Entitlements and Other Matters Contribution Schedule Aggregate 44 Entitlement of Lot 1

Balance of Sinking fund at end of last Financial Year 13,718.71 as at 30/04/22

Insurance Levies not included in Administrative Fund Levies:

Monetary Liability under Exclusive Use By-Law

Note: The balance of the Sinking Fund for the Principal Scheme as at 16/08/22 is \$280,048.99

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

Mortgages or Securities over Body Corporate Assets Nil

Additional Information (continued)

144

Body Corporate

Name of Scheme:

CURRIMUNDI LAKE F/R VILLAS 3

Community Titles Scheme No: 28851

Lot Number:

Plan Number:

136738

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) Page No. 1 Date: 16/08/22

Register Of Authorisations Affecting Common Property CURRIMUNDI LAKE F/R VILLAS 3 CTS 28851

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

INSURANCE REPORT

CURRIMUNDI LAKE F/R VILLAS 3 CTS 28851

40 Lakeside Crescent CURRIMUNDI QLD

Туре		Sum Insured	Premium	Date Last Paid	
BUILDING		62,906,177	\$16,497.00	14/09/21	
Company/Broker	Telephone	Policy Number	Due Date		
Strata Community Insurance		QRSC17003955	7 Septemb	er 2022	
C/- NBS Insurance Brokers	Facsimile	Excess/Comments			
PO Box 2058		\$1,000.00 + as per policy wording			
BROOKSIDE CENTRE QLD 4053		\$7,500 Water Damage & Burst Pipes/Storm & Rainwater			
		4 stages & PBC on one policy.			
Туре		Sum Insured	Premium	Date Last Paid	
PUBLIC LIABILITY		20,000,000	Tremium	14/09/21	
	T-11	Policy Number	D . D.()	14/09/21	
Company/Broker	Telephone	*	Due Date	2022	
Strata Community Insurance		QRSC17003955	er 2022		
C/- NBS Insurance Brokers Facsim		Excess/Comments			
PO Box 2058		\$1,000.00 + as per policy wording			
BROOKSIDE CENTRE QLD 4053		4 stages & PBC on o	ne policy.		
			- •		
	ı				
Туре		Sum Insured	Premium	Date Last Paid	
OFFICE BEARERS		5,000,000		14/09/21	
Company/Broker	Telephone	Policy Number	Due Date		
Strata Community Insurance		QRSC17003955	7 Septemb	er 2022	
C/- NBS Insurance Brokers	Facsimile	Excess/Comments	1		
PO Box 2058		\$1,000.00 + as per policy wording 4 stages & PBC on one policy.			
BROOKSIDE CENTRE QLD 4053		4 stages & FBC on o	ne poncy.		
Type		Sum Insured	Premium	Date Last Paid	
Type MACHINERY RREAKDOWN		Sum Insured	Premium	Date Last Paid	
MACHINERY BREAKDOWN	Talanhona	5,000		Date Last Paid 14/09/21	
MACHINERY BREAKDOWN Company/Broker	Telephone	5,000 Policy Number	Due Date	14/09/21	
MACHINERY BREAKDOWN Company/Broker Strata Community Insurance		5,000 Policy Number QRSC17003955		14/09/21	
MACHINERY BREAKDOWN Company/Broker Strata Community Insurance C/- NBS Insurance Brokers	Telephone Facsimile	5,000 Policy Number QRSC17003955 Excess/Comments	Due Date 7 Septemb	14/09/21	
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CURRIMUNDI LAKE F/R VILLAS 3 CTS 28851

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40 Lakeside Crescent CURRIMUNDI QLD

Туре		Sum Insured	Premium	Date Last Paid
FIDELITY GUARANTEE		100,000		14/09/21
Company/Broker	Telephone	Policy Number	Due Date	
Strata Community Insurance		QRSC17003955	7 Septemb	er 2022
C/- NBS Insurance Brokers	Facsimile	Excess/Comments		
		\$1,000.00 + as per poli	ev wording	
PO Box 2058				
BROOKSIDE CENTRE QLD 4053		4 stages & PBC on one policy.		
T.			p · 1	D (I (D) 1
Type		Sum Insured	Premium	Date Last Paid
LOSS RENT / TEMP ACC		9,435,927		14/09/21
Company/Broker	Telephone	Policy Number	Due Date	
Strata Community Insurance		QRSC17003955	7 Septemb	er 2022
C/- NBS Insurance Brokers Facsimile		Excess/Comments		
PO Box 2058		\$1,000.00 + as per policy wording		
BROOKSIDE CENTRE QLD 4053		4 stages & PBC on one	e policy.	
DROOKSIDE CENTRE QED 4035			r	
Туре		Sum Insured	Premium	Date Last Paid
LOT OWNERS FIXTURES		300,000		14/09/21
Company/Broker	Telephone	Policy Number	Due Date	
Strata Community Insurance	·	ORSC17003955	7 Septemb	er 2022
C/- NBS Insurance Brokers	Facsimile	Excess/Comments	, septemb	C1 2022
PO Box 2058	1 400111110		ev wording	
		\$1,000.00 + as per policy wording 4 stages & PBC on one policy.		
BROOKSIDE CENTRE QLD 4053		4 stages & PBC on one	e poncy.	
Туре		Sum Insured	Premium	Date Last Paid
BUILDING CATASTROPHE			Ficiliulii	
	m 1 1	9,435,927	D D :	14/09/21
Company/Broker	Telephone	Policy Number	Due Date	2022
Strata Community Insurance		QRSC17003955	7 Septemb	er 2022
C/- NBS Insurance Brokers	Facsimile	Excess/Comments		
PO Box 2058		\$1,000.00 + as per poli		
BROOKSIDE CENTRE QLD 4053		4 stages & PBC on one	e policy.	
~				
	•	•		
				-
Type		Sum Insured	Premium	Date Last Paid
LEGAL EXPENSES	•	50,000		14/09/21
Company/Broker	Telephone	Policy Number	Due Date	
Strata Community Insurance		QRSC17003955	7 Septemb	er 2022
C/- NBS Insurance Brokers	Facsimile	Excess/Comments		
PO Box 2058		\$1,000.00 + as per poli	icy wording	
BROOKSIDE CENTRE QLD 4053		4 stages & PBC on one policy.		
DROGROIDE CENTRE QUE TOO				
	<u> </u>	<u> </u>		
Туре		Sum Insured	Premium	Date Last Paid
GOVERNMENT AUDIT COS		25,000		14/09/21
Company/Broker	Telephone	Policy Number	Due Date	
Strata Community Insurance	· .	QRSC17003955	7 Septemb	er 2022
C/- NBS Insurance Brokers	Facsimile	Excess/Comments	. Septemb	
			ev wording	
PO Box 2058		\$1,000.00 + as per policy wording 4 stages & PBC on one policy.		
BROOKSIDE CENTRE QLD 4053		4 stages & FBC on one	e poncy.	

16 August 2022

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INSURANCE REPORT

CURRIMUNDI LAKE F/R VILLAS 3 CTS 28851

40 Lakeside Crescent CURRIMUNDI QLD

ADDEAL EXPENSES		100 000	Premium	1.4/00/21	
APPEAL EXPENSES	T-11	100,000	D . D .	14/09/21	
Company/Broker	Telephone	Policy Number	Due Date	2022	
Strata Community Insurance	n	QRSC17003955 7 Se		September 2022	
C/- NBS Insurance Brokers	Facsimile		Ľ		
PO Box 2058		\$1,000.00 + as per po			
BROOKSIDE CENTRE QLD 4053		4 stages & PBC on or	ie policy.		
Туре		Sum Insured	Premium	Date Last Paid	
•					
Company/Broker	Telephone	Policy Number	Due Date		
	Facsimile	Excess/Comments	•		
Type		Sum Insured	Premium	Date Last Paid	
Common / Dealton	Talanhan	Dalias Nomber	Duy Duy		
Company/Broker	Telephone	Policy Number	Due Date		
	Facsimile	Excess/Comments			
	racsillile	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	
Туре		Sum Insured	Premium	Date Last Paid	
Type Company/Broker	Telephone	Sum Insured Policy Number	Premium Due Date	Date Last Paid	
	Telephone			Date Last Paid	
	Telephone Facsimile			Date Last Paid	
		Policy Number		Date Last Paid	
		Policy Number		Date Last Paid	
		Policy Number		Date Last Paid	
		Policy Number		Date Last Paid	
Company/Broker		Policy Number Excess/Comments	Due Date		
		Policy Number		Date Last Paid Date Last Paid	
Company/Broker Type	Facsimile	Policy Number Excess/Comments Sum Insured	Due Date		
Company/Broker		Policy Number Excess/Comments	Due Date		
Company/Broker Type	Facsimile Telephone	Policy Number Excess/Comments Sum Insured Policy Number	Due Date		
Company/Broker Type	Facsimile	Policy Number Excess/Comments Sum Insured	Due Date		
Company/Broker Type	Facsimile Telephone	Policy Number Excess/Comments Sum Insured Policy Number	Due Date		
Company/Broker Type	Facsimile Telephone	Policy Number Excess/Comments Sum Insured Policy Number	Due Date		

CERTIFICATE OF COMPLETION



Date Generated: 19/08/2022

Document Details

Subject: SignAnything - Disclosure Statement -144 40 Lakeside Crescent

Document Pages: 8 Exchanged by: Not Applicable

Certificate Pages: 1 Exchange Date: Not Applicable

Status: Signed No. of Signatures: 1

Signature Logs

Signer: Toni Mulder

Email Address: Tommy266@bigpond.com

DU

Status: Signed

IP Address: 1.146.108.215

Supervised By:

Email Sent Date: 19/8/2022 **Signed Date:** 19/8/2022

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: