

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

as at 28 July 2025

Body Corporate	Name of Scheme:	HERITAGE GARDENS
	Community Titles Scheme No:	19623
	Lot Number:	72
	Plan Number:	3857
Secretary	Name	Alice Kate Slattery
	Address	c/- AM Strata Pty Ltd PO Box 3259 SOUTHPORT QLD 4215
	Telephone	07 5526 4100

Body Corporate Manager	Name	AM Strata Pty Ltd
	Address	PO BOX 3259 SOUTHPORT QLD 4215
	Telephone	07 5526 4100

Contributions and Levies

Levies Determined by the Body Corporate for this Lot

Administrative Fund	Amount	Due Date	Discount	If Paid By
01/06/24 to 30/09/24	\$1,062.75	01/06/24	\$106.28	01/06/24
01/10/24 to 31/01/25	\$911.53	15/10/24	\$91.15	15/10/24
01/02/25 to 31/05/25	\$911.53	01/02/25	\$91.15	01/02/25
01/06/25****30/09/25	\$1,010.03	01/06/25	\$101.00	01/06/25

Sinking Fund	Amount	Due Date	Discount	If Paid By
01/06/24 to 30/09/24	\$92.55	01/06/24	\$9.26	01/06/24
01/10/24 to 31/01/25	\$87.21	15/10/24	\$8.72	15/10/24
01/02/25 to 31/05/25	\$87.21	01/02/25	\$8.72	01/02/25
01/06/25****30/09/25	\$93.44	01/06/25	\$9.34	01/06/25

Special Levies

Improvements on Common Property for which Buyer will be Responsible	Lot No	Date of Resolution	Authority Given To	Description of Area	Conditions
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Body Corporate Assets Required to be Recorded on Register	There are no assets required to be recorded.
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Committee	Yes
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Body Corporate and Community Management Act 1997
Section 206
INFORMATION FOR DISCLOSURE STATEMENT (continued)

Information
prescribed under
Regulation
Module

Signing

Seller/Sellers Agent

Witness

Date

Buyers
Acknowledgement

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

Buyer

Witness

Date

Lot Entitlements
and Other
Matters

Interest Schedule	Aggregate	72	Entitlement of Lot	1.0000
Contribution Schedule	Aggregate	72	Entitlement of Lot	1
Balance of Sinking fund at end of last Financial Year		179,930.57	as at	31/05/25
Insurance Levies not included in Administrative Fund Levies:		See Other Levies		
Monetary Liability under Exclusive Use By-Law				

Additional Information

Other Levies		Amount	Due Date	Discount	If Paid By
Insurance Fund - with Disc					
01/06/24 to 30/09/24		\$67.15	01/06/24	\$6.72	01/06/24
01/10/24 to 31/01/25		\$150.09	15/10/24	\$15.01	15/10/24
01/02/25 to 31/05/25		\$150.09	01/02/25	\$15.01	01/02/25
01/06/25 to 30/09/25		\$128.57	01/06/25	\$12.86	01/06/25
Insurance		Type/Name of Insurer	Policy Number	Sum Insured	Renewal Date
		<i>BUILDING</i>	865805Q	28,337,479.00	31/05/26
		CHU Underwriting Agencies			
		<i>PUBLIC LIABILITY</i>	865805Q	30,000,000.00	31/05/26
		CHU Underwriting Agencies			
		<i>COMMON AREA CONTENTS</i>	865805Q	59,618.00	31/05/26
		CHU Underwriting Agencies			
		<i>LOSS OF RENT</i>	865805Q	4,250,621.00	31/05/26
		CHU Underwriting Agencies			
		<i>FIDELITY GUARANTEE</i>	865805Q	250,000.00	31/05/26
		CHU Underwriting Agencies			
		<i>VOLUNTARY WORKERS</i>	865805Q	100,000/1,000	31/05/26
		CHU Underwriting Agencies			
		<i>OFFICE BEARERS</i>	865805Q	5,000,000.00	31/05/26
		CHU Underwriting Agencies			
		<i>CATASTROPHE</i>	865805Q	4,250,621.00	31/05/26
		CHU Underwriting Agencies			
		<i>EXT COVER - RENT/TEM</i>	865805Q	637,593.00	31/05/26
		CHU Underwriting Agencies			
		<i>ESC IN COST OF TEMP</i>	865805Q	212,531.00	31/05/26
		CHU Underwriting Agencies			
		<i>STORAGE/EVACUATION</i>	865805Q	212,531.00	31/05/26
		CHU Underwriting Agencies			
		<i>GOVERNMENT AUDIT COS</i>	865805Q	25,000.00	31/05/26
		CHU Underwriting Agencies			
		<i>WH&S APPEAL EXPENSES</i>	865805Q	100,000.00	31/05/26
		CHU Underwriting Agencies			
		<i>LEGAL EXPENSES</i>	865805Q	50,000.00	31/05/26
		CHU Underwriting Agencies			
		<i>LOT OWNERS IMPROVEME</i>	865805Q	250,000.00	31/05/26
		CHU Underwriting Agencies			
Mortgages or					
Securities over					
Body Corporate					
Assets					
Latent or Patent					
Defects in					
Common					
Property or Body					
Corporate Assets					

Additional Information

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(3)

CONTRACTS REGISTER

HERITAGE GARDENS CTS 19623

Contractor Name and Address AM Strata PO Box 3259 SOUTHPORT QLD 4215	Details of Duties Body Corporate Manager	Delegated Powers Secretary/Treasurer	Basis of Remuneration \$125.00 p/lot pa + gst
Commencement Date	01/09/23	Termination Date	
Term of Contract	2 year	Finance	
Options		Name of Financier	
Copy of Agreement on File	Y	Date of Advice from Financier	
Workers Comp No		Date of Withdrawal of Financier	

Contractor Name and Address STEADFAST SUPPORT PTY LTD ATF LBH FAMILY TRUST PO Box 1012 MT OMMANEY QLD	Details of Duties Management/Letting	Delegated Powers	Basis of Remuneration As per Contract
Commencement Date	30/08/16	Termination Date	
Term of Contract	10 Years	Finance	
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		Finance	
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		Finance	
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Copy of Agreement on File		Date of Advice from Financier	
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Contractor Name and Address	Details of Duties	Delegated Powers	Basis of Remuneration
Commencement Date		Termination Date	
Term of Contract		Finance	
Options		Name of Financier	
Copy of Agreement on File		Date of Advice from Financier	
Workers Comp No		Date of Withdrawal of Financier	

Roll Details New Owner

After settlement please complete this form and send to:

AM Strata Pty Ltd
PO BOX 3259
SOUTHPORT QLD
4215

HERITAGE GARDENS CTS 19623

A/c Number **02100072**
Lot Number **72**
Entitlements **1.0000**

Date Issued **28 July 2025**
Unit Number **71**

Settlement Date _____ / _____ /20_____

New Owners Full Name _____

Company Titles Only _____ Place of Birth _____ Date of Birth _____

ABN (if owner is a company) _____

Owners Residential Address _____

Address for General Correspondence _____

(if different from above) _____

Address for Levy Notice _____

(if different from above) _____

Letting Agent Details _____ Tel _____

_____ Fax _____

_____ Email _____

Tenant Details _____ Tel _____

_____ Fax _____

_____ Email _____

Owners Nominee Name and Address _____

(if owner is a company) _____

Owner Contacts _____

Home Tel _____ Fax _____

Work Tel _____ Email _____

Mobile _____

Signed _____ Name _____ Date ____/____/____

Position _____ Address _____

Thank you for keeping our records up to date.