

In order to avoid data loss, we recommend that you save the file on your computer and fill it out there.

## Purchase contract for a Shelf GmbH Limited liability company according to Austrian jurisdiction

### Client and Purchaser:

<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname	First and middle names according ID document	Date of birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
Nationality	Passport number	Place of birth
<input type="text"/>		
Street and house number of the registration address		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Zip code	City of the registration address	Country (if not Germany)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Landline telephone	Fax if available	
<input type="text"/>	<input type="text"/>	
Cellphone	E-mail address	
<input type="text"/>	<input type="text"/>	

If the purchaser is a legal entity (e.g. company), please enter here the person authorised to sign and enter the organisational data into the Notes field at the end of the form. The same procedure applies if additional purchasers are to be specified.

### Requested configuration and registered office:

<input type="text"/>	
Desired name of the GmbH (corporate name)	
What activity will the GmbH undertake (business purpose):	
<input type="text"/>	
The registered office is at:	
<input type="text"/>	
Street and house number	
<input type="text"/>	<input type="text"/>
Zip code	City in Austria

Managing Director:

The client (see above) becomes managing director

Otherwise the managing director shall be:

<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname	First and middle names according ID document	Date of birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
Nationality	Passport number	Place of birth
<input type="text"/>		
Street and house number of the registration address		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Zip code	City of the registration address	Country (if not Germany)
<input type="text"/>	<input type="text"/>	
Landline telephone	Fax if available	
<input type="text"/>	<input type="text"/>	
Cellphone	E-mail address	

Notes or additional information:

I hereby take over the Austrian shelf GmbH according to Austrian law at the price of **€ 13,200** (tax-free according to §4 8 f UStG):

- GmbH registered in the commercial register of Vienna
- Present registered office in Vienna
- Austrian, European bank account or notary trust account including € 10,000 bank balance
- Preparation and execution of the purchase formalities including notary appointment
- Tax number already applied for or granted
- Immediately able to act

I will transfer the purchase price of € 13,200 to the following account if no other account is specified in the invoice:

**Bank:** Landesbank Berlin  
**Account holder:** ELA Verwaltungs GmbH  
**IBAN:** DE23 1005 0000 0190 9523 85  
**BIC/Swiftcode:** BELADEVXXX

**General Terms and Conditions for the Shelf GmbH**

The services of SiBa Wirtschaftskanzlei GmbH relate exclusively to the sale of shelf companies. Additional services (such as consulting) are only owed upon separate written agreement. For legal reasons, neither legal nor tax advice may be given. If a special motivation or purpose is pursued, a lawyer or tax advisor should be consulted.

**The purchase price covers all notary and formation costs of the shelf company until the time of sale. The notary and court costs (company register) of the transfer are always borne by the buyer.**

I am aware that you will only start providing your service after receipt of the purchase price.

After the prerequisites have been met (including complete receipt of payment, submission of identification documents, power of representation, ownership and control structure, information on money laundering prevention and submission of all other information and documents that may be requested by the notary), SiBa Wirtschaftskanzlei GmbH will execute the order or part of the order for which the requirements are met, within 10 working days except Saturday.

I hereby authorise you to instruct the notary selected by you to draw up all necessary deeds (including sales contract, company changes, company registration) on my behalf. I am aware that the notary will charge a drafting fee even if no notarial deed is executed through my fault. I agree that you may then settle this fee from the down payment or purchase price paid by me and that you will then no longer reimburse me for this portion.

I have received and read the cancellation policy of SiBa Wirtschaftskanzlei GmbH:  
<https://siba-wirtschaftskanzlei.de/pdf/en/withdrawal.pdf>

I agree and expressly request that SiBa Wirtschaftskanzlei GmbH already begins with the commissioned service before the end of the cancellation period. I am aware that I lose my right of withdrawal upon complete fulfilment of the contract by SiBa Wirtschaftskanzlei GmbH. I am aware that I owe an appropriate amount according to § 357a (2) of the German Civil Code (BGB) for the service provided by SiBa Wirtschaftskanzlei GmbH if I exercise the right of revocation after I have expressly requested SiBa Wirtschaftskanzlei GmbH to begin the service before the end of the revocation period.

I am aware that there is no right of revocation for the notarial contracts and certifications to be concluded in this context (§ 312g (2) 13 BGB).

Neither the client nor any other party involved, or their beneficial owner is a politically exposed person, a family member of a politically exposed person or a closely related to politically exposed person.

The place of jurisdiction is Berlin (Germany) if the client is a merchant or a legal entity under public law or a special fund under public law or if he does not have a permanent residence in Germany, or the Client has moved its place of residence or habitual residence abroad after these GTC have come into effect or if the place of residence or habitual residence is unknown at the time the action is brought.

<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> <p>Place and Date</p>	<p>_____ Signature</p>
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Please send the signed form by E-Mail to [post@siba-wirtschaftskanzlei.de](mailto:post@siba-wirtschaftskanzlei.de)  
or by fax to +49 30 77 00 600 89