

# Application for payment of your benefit

Refer to the *Explanatory notes* on page 8 for important information about completing this form.

Please print clearly in black ink.

You should use this form if you wish to withdraw **all or part** of your superannuation benefit and either: transfer it to another superannuation fund; or transfer it to a First State Super superannuation income stream; or receive the payment in cash.

This form should **not** be used if you wish to apply for early release of a benefit:

- on specified compassionate grounds (use *FSS 025 Application for early release of benefit on specified compassionate grounds*)
- for reasons of severe financial hardship (use *FSS 024 Application for early release on the grounds of severe financial hardship*)
- because your temporary Australian residency has expired (apply directly to the Australian Taxation Office)
- as a result of total and permanent disablement, terminal illness or death (use *FSS 015 Application for payment of a disablement benefit* or *FSS 047 Application for payment of a death benefit*)
- as a result of a release authority presented to the Fund either by you or the Commissioner of Taxation
- if you are a **temporary resident** requesting a) transfer to either the First State Super retirement income stream or a retirement income stream with another provider or b) a cash payment and your temporary resident's visa has not yet expired or been cancelled and you remain in Australia. Commonwealth legislation does not permit these transaction types for temporary residents. Temporary residents can only use this form to transfer their benefits to another superannuation fund. See the back page under **Temporary residents** for details.

The forms referred to above are available from Customer Service on 1300 650 873.

There are strict rules governing the release of your superannuation benefit. For your convenience, we have summarised these rules in **Section 8. Important information about benefit payments**. Additional information can be found in the Product Disclosure Statement (PDS) relevant to your particular membership category. We have also produced a number of fact sheets that discuss various issues relating to benefit entitlements. These documents are available from the website at [www.firststatesuper.com.au](http://www.firststatesuper.com.au) or from Customer Service on 1300 650 873. You should seek professional financial advice before making any decisions regarding payment of your benefit.

## 1. Your personal details

Member number	Title (Mr Mrs Ms Miss Dr)	Male	Female	Birth date (DD-MM-YYYY)
3 3 7 5 3 0 3	M r	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2 4 - 0 6 - 1 9 7 4
Family name (if you have changed your name, you must provide certified evidence)				
M a n t i l l a				
Given name/s				
A n e c i t o J r				
Residential address				
4 / 9 0 T e r a l b a R o a d				
Suburb			State	Postcode
A d a m s t o w n			N S W	2 2 8 9
Postal address (if different from residential address)				
Suburb			State	Postcode
Daytime contact telephone number			Mobile number	
0 4 3 9 3 8 3 6 2 2			0 4 3 9 3 8 3 6 2 2	
Email address				

**NOTE:** An email address recorded here will replace any email address we currently hold for you.

## 2. Your tax file number

Tax file number

--	--	--	--	--	--	--	--	--

## 3. Employment details

Employer name

H	u	n	t	e	r	N	s	w	E	n	g	l	a	n	d	H	o	s	p	i	t	a	l
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Your last day of work

		-			-				
--	--	---	--	--	---	--	--	--	--

Date of your last contribution (DD-MM-YYYY)

0	5	-	0	8	-	2	0	1	1
---	---	---	---	---	---	---	---	---	---

Contribution amount

\$									
----	--	--	--	--	--	--	--	--	--

Employer phone number

0	2	4	9	2	1	3	0	0	0
---	---	---	---	---	---	---	---	---	---

Employer contact person

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email address of employer contact person

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

## 4. Proof of identity

In order to protect your benefit entitlement and to ensure your privacy is maintained, we require you to provide **certified documentation** verifying your identity before your request can be processed. Please refer to the *Explanatory notes* on page 8 for a list of people who are authorised to **certify** these documents.

To ensure that your request is processed promptly, please provide all necessary certified proof of identity documentation with your application.

### Complete either Part A or Part B

Documents from Part B should only be used if you do not have a document from Part A.

#### Part A – Acceptable primary ID documents

Select **ONE** valid document from this section (please  cross the document you are providing):

- Current Australian State/Territory driver's licence containing a photograph of the person
- Australian passport (a passport that has expired within the preceding two years is acceptable)
- Card issued under a State or Territory for the purpose of providing a person's age containing a photograph of the person
- Foreign passport or similar travel document containing a photograph and the signature of the person\*

OR

#### Part B – Acceptable secondary ID documents

Select **ONE** valid option from this section (please  cross the document you are providing) and one other document from the right-hand column:

- Australian birth certificate
- Australian citizenship certificate
- National identity card issued by a foreign government containing a photograph of the person in whose name the card was issued\*

AND

**ONE** valid option from this section (please  cross one the document you are providing):

- A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address
- A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual) which contains the individual's name and residential address
- A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address)
- Foreign driver's licence that contains a photograph of the person in whose name it was issued and the individual's date of birth\*
- Pension card issued by Centrelink
- Health card issued by Centrelink

\* Documents not written in English must be accompanied by an English translation prepared by an accredited translator.

**IMPORTANT:** All copied pages of ORIGINAL proof of identification documents (including any linking documents) must be certified as true copies by an individual approved to do so – refer to the *Explanatory notes* on page 8 of this form.

## 5. Benefit payment/transfer options

You have three options for your benefit payment/transfer:

- Transfer all or part of your benefit to another complying superannuation fund;
- Transfer all or part of your benefit to a First State Super income stream;
- Cash in all or part of your benefit.

Please complete either a), b) or c) below as appropriate.

**NOTE:** If you apply for a **partial** payment/transfer, the amount will be deducted 'pro-rata' from your existing investment options. A **minimum of \$1,500** must be retained in your account. If the amount requested as a partial payment/transfer does not allow \$1,500 to remain in your account, then the amount released will be your account balance **less** \$1,500.

### 5a. I would like to transfer my benefit to another super fund

Note that cheques will be sent directly to the rollover fund. A cheque to a self-managed superannuation fund can only be made out in the fund's registered name. For more information about transfers to a self-managed superannuation fund, please refer to **Rollovers to self-managed superannuation funds** on page 7.

Please indicate  whether you are applying to transfer all or part of your benefit. If part transfer, record the amount to be transferred.

Full transfer **or**

My balance minus \$1,500 **or**

Partial transfer of \$

The fields below marked \* are mandatory fields. Please note that if you do not complete all the mandatory fields there will be a delay in processing your transfer request. If you are requesting a partial transfer, and the amount you wish to transfer does not allow \$1,500 to remain in your account, then the amount released will be your account balance less \$1,500.

Name of rollover fund\*

Cheque payee (if different from rollover fund name)

Superannuation Product Identification Number (SPIN)\*

Member number (in new superannuation fund)\*

Fund phone number\*

Fund ABN number\*

### 5b. Transfer my benefit to a First State Super income stream

**NOTE** that in addition to this form, you also have to complete the *Superannuation income stream member application* form found at the back of the Superannuation Income Stream Product Disclosure Statement. You need a minimum of \$20,000 to open a First State Super income stream account.

Please indicate  whether you are applying for a full or partial transfer.

Full transfer **or**

My balance minus \$1,500 **or**

Partial transfer of \$

If you are requesting a partial transfer, and the amount you wish to transfer does not allow \$1,500 to remain in your account, then the amount released will be your account balance less \$1,500.

## 5b. Transfer my benefit to a First State Super income stream (cont.)

Please indicate  whether you are applying for a transfer to a **retirement** income stream or **transition to retirement** income stream.

- Retirement income stream **OR**  
 Transition to retirement income stream

### Retirement income stream applicants only

- I declare that I have reached my preservation age and permanently retired from the workforce **OR**  
 I declare that I am over age 60 and have ceased employment **OR**  
 I declare that I have reached age 65

### Transition to retirement income stream applicants only

- I declare that I have reached my preservation age and have not permanently retired from the workforce.

## 5c. Cash in my benefit

Please indicate  whether you are applying for a full or partial withdrawal.

- Full withdrawal **or**  
 My balance minus \$1,500 **or**  
 Partial withdrawal of \$           .

If you are requesting a partial withdrawal, and the amount you wish to withdraw does not allow \$1,500 to remain in your account, then the amount released will be your account balance less \$1,500.

**Cash in my benefit declarations.** Please select from the eligibility criteria below by marking  in the box that applies to you.

**NOTE:** If you are leaving or have already ceased a gainful employment arrangement, you must also complete Section 3 on page 2.

- I declare that I am aged 65 years or more; or  
 I declare that I am aged 60-64 years and have ceased a gainful employment arrangement since turning age 60; or  
 I declare that I am aged 55-64 years, have permanently retired and never intend to become engaged in gainful employment for more than 10 hours a week; or  
 I declare that I ceased a gainful employment arrangement before age 60, but have since reached age 60 and do not intend to return to gainful employment for more than 10 hours a week; or  
 I declare that I am currently employed and wish to withdraw my unrestricted non-preserved benefit; or  
 I declare that I have ceased a gainful employment arrangement and my preserved benefit is under \$200.

### Cash payment details

Payment will be made by cheque to your current residential address if you do not complete the account details below AND provide a copy of your statement or passbook that contains your full name, address and account details matching the banking details on your application form. Payments cannot be made to offshore bank accounts.

- Post a cheque to my residential address **OR**  
 Post a cheque to my postal address **OR**  
 Pay direct to my bank account listed below (allow up to 5 days for clearance)

Account name

BSB number

Account number

Name of financial institution

Branch

## 6. Applicant declaration and information acknowledgement

This section requires you to formally acknowledge that you have received and understood the information on pages 6, 7 and 8 so that you can make an informed decision about the payment or transfer of your benefit entitlement. If you require additional information before making your decision, please contact Customer Service on 1300 650 873. The processing of this application will be delayed if you do not sign and date this declaration and information acknowledgement.

I declare that:

- I declare that the information I have provided in this form is true and correct.
- I declare that I have sufficient information to make an informed decision about the payment/transfer of my benefit from First State Super.
- I understand that, if I withdraw my account balance in full, any contributions received by First State Super after the payment/transfer will be allocated to a new account in my name and that I will need to reapply for the payment/transfer of these monies which will incur a further exit fee.
- I declare that if I have requested that part or all of my benefit be cashed, that I am an Australian or New Zealand citizen and not a temporary resident of Australia.
- I declare that I am the member of First State Super who is signing this declaration or I have been appointed by this member as their Power of Attorney and this Power of Attorney has not been revoked.
- I understand that if I don't provide my TFN, I may have additional contributions tax deducted from my benefit, and my final payment will be taxed at the highest marginal rate plus Medicare levy.
- I understand that a \$36 exit fee will be applied to my payment/transfer (with the exception of transfers from my accumulation (non-pension) account to an income stream account, subject to member benefit protection on small accounts).

Signature

Date (DD-MM-YYYY)

  -   -    

## 7. Checklist

- Have you completed all relevant sections of the application form and enclosed all documents required to support this application?
- Have you read Section 8 *Important information about benefit payments* on pages 6, 7 and 8 of this form, together with relevant fact sheets and sections of the PDS?
- Have you provided employment, employer and final contribution information in Section 3 *Employment details*?
- Have you included your bank account details and enclosed a copy of your statement or passbook to support any request for cash payment directly to your bank account?
- Have you included proof of identity documents properly certified by an eligible signatory?
- Have you signed and dated the *Applicant declaration and information acknowledgement*?



**Return the completed form to First State Super PO Box 1229 WOLLONGONG NSW 2500**

If you have any enquiries please call Customer Service on **1300 650 873** between 8:30 am and 5:30 pm AEST from Monday to Friday for the cost of a local call (unless calling from a mobile or pay phone).

## 8. Important information about benefit payments

### When can you withdraw your superannuation?

From 1 July 1999, all contributions made to a regulated superannuation fund, regardless of the source of the contributions, and all earnings in respect of those contributions, must be preserved. Preservation means that these amounts must remain in the superannuation system until you meet a **condition of release** or your account balance is released as a terminal illness benefit (see below).

Superannuation benefits are allocated to one of three preservation categories and different restrictions apply to each category. While most of your superannuation will probably be preserved, your account may also include non-preserved components if you had superannuation prior to 1 July 1999. Non-preserved components can be either restricted and/or unrestricted.

**Preserved benefits** – these must be retained in the fund until you meet a condition of release.

**Restricted non-preserved benefits** – these benefits are not preserved but they cannot be cashed until you satisfy a condition of release. Generally, the restricted non-preserved component and unrestricted non-preserved component of your superannuation is a fixed dollar amount set at 1 July 1999. This amount may include money that has been rolled into First State Super. To access the restricted non-preserved portion of your superannuation, you must:

- satisfy one of the conditions of release or
- cease gainful employment with an employer who had, or whose associates had, at any time contributed to First State Super.

**Unrestricted non-preserved benefits** – these benefits do not require the fulfilment of a condition of release and may be paid upon demand if, for example, you have previously satisfied a condition of release but decided to keep the money in your superannuation fund. Any unrestricted non-preserved benefits in your superannuation account can be paid directly to you at any time, without a change of employment. Your preservation age depends on your date of birth (see table).

Date of birth	Preservation age
Before 1 July 1960	55 years
1 July 1960 to 30 June 1961	56 years
1 July 1961 to 30 June 1962	57 years
1 July 1962 to 30 June 1963	58 years
1 July 1963 to 30 June 1964	59 years
After 30 June 1964	60 years

### Conditions of release

You can keep your money in superannuation for as long as you wish. You can only access the preserved component of your superannuation if you satisfy a condition of release or your account balance is released as a terminal illness benefit. A condition of release is the earliest of the following events:

- you reach 65 years of age, whether you are still working or not,
- you permanently retire on or after your preservation age (see table above),
- you reach your preservation age and wish to draw a transition to retirement pension from your super fund,
- you cease employment with an employer on or after reaching age 60 (although you may continue to work in another employment arrangement),

- you suffer permanent incapacity\*,
- you are diagnosed with a terminal illness and the Trustee receives certification from two medical practitioners (at least one of whom is a specialist in your illness) stating you are suffering an illness which, in the normal course, would result in death in a period of 12 months of the date of certification despite reasonable medical treatment,
- you are temporarily incapacitated and have an Income Protection insurance benefit paid through the Fund,
- you meet the criteria for early release on specified compassionate grounds, subject to the Australian Prudential Regulation Authority's (APRA) approval and conditions,
- you meet the eligibility requirements for severe financial hardship (subject to Trustee approval and conditions),
- you are an eligible temporary resident and have permanently left Australia (limited to certain visa categories and not available to New Zealand citizens),
- you (or the ATO) provide a valid release authority to the Trustee for payment of tax on excess concessional or non-concessional contributions,
- you terminate employment with an employer-sponsor of the Fund, and your preserved benefit at that time is less than \$200,
- you were previously classified as a lost member who is found, and the value of your benefit in the Fund, when released, is less than \$200.

\* Permanent incapacity, in relation to a member means ill health (whether physical or mental), where the Trustee is reasonably satisfied that the member is unlikely, because of the ill health, to engage in gainful employment for which the member is reasonably qualified by education, training or experience. Please note that if you are suffering from a terminal illness and provide evidence of your terminal illness, your lump sum superannuation benefit will be paid tax free. You will need to provide certification from two medical practitioners, one of whom is your treating specialist, stating that you are "suffering from an illness which in the normal course would result in your death within 12 months of the certification, despite reasonable medical treatment". Please contact Customer Service on 1300 650 873 for further information.

The amount of your superannuation benefit (other than a temporary incapacity benefit) is equal to the value of your account balance. The amount of a temporary incapacity benefit is equal to the insurance benefits paid by the insurer as a result of the temporary incapacity.

All benefits (other than Income Protection insurance benefits) are payable as a lump sum or, if you are eligible, as a First State Super retirement income stream. If you have Income Protection cover through the Fund and you suffer temporary incapacity we will instruct the insurer to pay the insurance benefit directly to you.

### Fees and charges

A \$36 exit fee is payable for all payments/transfers, excluding Family Law and pension payments. However, for accounts less than \$1,000, the exit fee is subject to member benefit protection, which prevents small accounts containing mandated contributions from being eroded by fees and charges. At exit, eligible small accounts will have the difference between the management fees charged and the interest allocated for the year to date credited to the account.

## 8. Important information about benefit payments (cont.)

### When can you roll over your benefit to another fund?

You can roll over or transfer all or part of your benefit to another complying super fund at any time.

The components of your benefit will generally be comprised of a tax free component and a taxed taxable component, and the components of the amount transferred will be in proportion to the amount that the tax free and taxable portions are to your total benefits.

### Rollovers to self managed super funds

Before processing a rollover, we are required to ensure that the fund to which the payment is being made is a complying superannuation fund under the Superannuation Industry (Supervision) Act 1993.

Self managed funds are allowed a maximum of four members and each member must be a Trustee. To verify these details and ensure the fund is complying, we may require additional documentation.

### Retaining part of your benefit with First State Super

If you wish to apply for part of your benefit entitlement as a cash payment, and retain the remainder with First State Super, you must meet the part payment rule where:

- (i) the minimum amount retained in First State Super is \$1,500; or
- (ii) all of the unrestricted non-preserved amount is cashed and the minimum amount retained in First State Super is \$1,500.

If you have left your First State Super employer and do not wish to roll over your benefit to another fund, your account will remain invested in your elected or default First State Super investment strategy. Gains, losses and fees/charges will continue to be applied to your account.

### Employment details

If you withdraw your account balance in full prior to us receiving all superannuation guarantee contributions payable by your employer, another account will be opened for you. When the money from this second account is released, a benefit payment fee will be incurred. To avoid this charge, you should contact your employer and request the following information:

- If you have ceased employment, we require the date of your last day of service and the date of the last superannuation guarantee contribution paid to First State Super.
- If you have chosen to have your employer's superannuation guarantee payments sent to another complying super fund, we require the name of your new fund and the date of the last compulsory contribution to First State Super.

### Insurance cover

If you are an insured member and you are applying for **full** payment or transfer of your benefit entitlement to another fund or to a First State Super income stream, your insurance cover will cease when the payment from the fund is made. If you are an insured member and you are applying for **part** payment of your benefit entitlement, either paid to you or rolled over to another complying superannuation fund, your insurance will cease when you elect to cancel your insurance cover, reach age 70 if you have death and/or TPD cover or age 65 if you have income protection cover, have insufficient funds to pay the premiums or you transfer or are paid your entitlement from the Fund. Note that there is no continuation option available under the terms and conditions of First State Super's insurance policy.

### Importance of providing your tax file number (TFN)

Under the *Superannuation Industry (Supervision) Act 1993*, your superannuation fund is authorised to collect your TFN, which will only be used for lawful purposes. These purposes may change in the future as a result of legislative change. The trustee of your superannuation fund may disclose your TFN to another superannuation provider, when your benefits are being transferred, unless you request the trustee of your superannuation fund in writing that your TFN not be disclosed to any other trustee.

It is not an offence not to quote your TFN. However giving your TFN to your superannuation fund will have the following advantages (which may not otherwise apply):

- your superannuation fund will be able to accept all types of contributions to your account/s;
- the tax on contributions to your superannuation account/s will not increase;
- other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits; and
- it will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

Otherwise your TFN will be treated confidentially.

### Tax payable

The tax you pay on withdrawal depends on your age, how long you have been in the Fund, whether you have provided your TFN and how your benefit is paid.

### Privacy

The information you provide in this form is collected by and held for First State Super by the fund administrator, Pillar Administration, in accordance with the *National Privacy Principles*. For further information about privacy, please contact Customer Service on 1300 650 873 or visit [www.firststatesuper.com.au](http://www.firststatesuper.com.au) to view the Privacy Policy.



### More information

For more information about benefit entitlements and the payment process, please contact Customer Service on **1300 650 873**, email [enquiries@firststatesuper.com.au](mailto:enquiries@firststatesuper.com.au) or visit the website at [www.firststatesuper.com.au](http://www.firststatesuper.com.au)

### Temporary residents

From 1 April 2009, temporary residents (excluding New Zealanders) will only be able to claim their superannuation prior to departing Australia on the following grounds:

- death;
- terminal medical condition;
- permanent incapacity; or
- temporary incapacity.

Temporary residents who do not meet these criteria and who have not departed Australia can use this form to transfer their benefit to another superannuation fund only by completing section 5a.

Temporary residents who have not departed Australia and who wish to apply for a total and permanent disablement, terminal illness or death benefit should complete either *FSS 015 Application for payment of a disablement benefit* or *FSS 047 Application for payment of a death benefit*.

### Section 2. Your tax file number

When applying for your benefit we encourage you to provide your tax file number (TFN) if you have not already done so. You are not obliged to provide your TFN but if you choose not to, and you are applying for your total benefit, the payment will be reduced by the amount of any additional tax payable on your concessional contributions, and the benefit, if taken in cash, will be taxed at the highest marginal rate plus the Medicare levy. **See Section 8 'Important information about benefit payments' for more information.**

### Section 3. Your employer's details

**Please note:** If your employer is now paying into another complying superannuation fund, we require written confirmation of the new fund and the last date that funds were forwarded to us. When this information is received, your benefit payment will be processed. Any contributions received from a First State Super participating employer after the benefit has been paid will be allocated to a new account in your name. You will then need to reapply for payment of these monies, which will incur another exit fee.

### Section 4. Proof of identity

If you have changed your name or are signing on behalf of the applicant, you will need to provide one of the following certified documents:

- If you have changed your name – Marriage certificate, deed poll or change of name certificate from Births, Deaths and Marriages Registration Office.
- If you are signing on behalf of the applicant – Guardianship papers or Power of Attorney

### Certification of personal documents

The person who is authorised to certify documents must sight the original and the copy and make sure both documents are identical, then make sure all pages have been certified as true copies by writing or stamping "certified true copy" followed by their signature, printed name, qualification (eg. Justice of the Peace, Australia Post employee, etc) and the date.

The following people can certify copies of the originals as true and correct copies:

- a Justice of the Peace
- a person enrolled on the roll of a State or Territory Supreme Court or the High Court of Australia as a legal practitioner
- an Australian consular officer or an Australian diplomatic officer
- a judge of a court
- a magistrate
- a registrar or deputy registrar of a court
- a Chief Executive Officer of a Commonwealth court
- a permanent employee of Australia Post with five or more years of continuous service
- a finance company officer with five or more years of continuous service (with one or more finance companies)
- an officer with, or authorised representative of, a holder of an Australian Financial Services Licence (AFSL), having five or more years continuous service with one or more licensees
- a notary public officer
- a police officer
- Commissioner for Affidavits
- Commissioner for Declarations.

### Section 5. Benefit payment / transfer options

You must check with your chosen rollover fund to ensure that they can accept this transfer. If you wish to roll over to more than one fund, you must provide individual details for each rollover. Please copy this page and complete the details for each rollover.

Please note that if you are transferring to a self-managed superannuation fund that is not registered with the Australian Taxation Office as a complying superannuation fund, you must also supply certified copies of the following documents in order to show that you are a member or a trustee of that self-managed superannuation fund:

- the Trust Deed of the self-managed fund **AND**, if the fund has been in existence for more than 12 months, **EITHER**
- the most recent member contribution statement **OR**
- the most recent annual return of the self-managed fund.

Clear form

Print