

Please complete in pen using CAPITAL letters and print (X) to mark boxes where applicable.

1 Provide your personal details

Last name		Mr	Mrs	Ms	Miss	Dr
		☐	☐	☐	☐	☐
First name/s						
Date of birth		Male	Female			
		☐	☐			
Tax File Number		Existing member number (if applicable)				

We're authorised under the Superannuation Industry (Supervision) Act 1993 to collect, use and disclose your Tax File Number (TFN). It's optional to provide your TFN, but if we have it, we'll be able to accept all types of contributions from you, you won't pay more tax than you need to, and it'll be easier to find your super. If you transfer your super to another fund, we'll give them your TFN unless you tell us not to in writing. Visit australiansuper.com/TFNGuide for more details.



Street address			
Suburb/Town		State	Postcode
Postal address (if different)			
Suburb/Town		State	Postcode
Telephone (business hours)	Telephone (after hours)	Mobile	
Email			

2 Your employer's details

Are you self-employed as a sole trader or partner in a partnership, not currently in paid employment or in paid employment but would not have employer super contributions paid into this account?

- ☐ Yes You're not eligible to join this division of AustralianSuper, please download the *Personal Plan Product Disclosure Statement* and join form at australiansuper.com/PDS or call us on **1300 300 273** for a copy.
- ☐ No Please complete your employer's details below.

Employer's trading name			
Street address			
Suburb		State	Postcode
Employee number (if applicable)	Telephone (business hours)	Employer ABN (if known)	

3 Nominate your beneficiaries (non-binding)

Provide details of your legal personal representative or any dependants¹ who may be entitled to your super (including any insurance benefit) if you die. For information on binding nominations please visit australiansuper.com/beneficiary

Full name	Address	Relationship to you	Benefit proportion %
¹ As defined by Superannuation law.			Total must add up to 100.00%

When you use this form to nominate beneficiaries, you're telling us which of your dependants you'd like us to pay your super (and any insurance benefit) to if you die. We're not bound by your nomination, but we use this information as a guide to work out who to pay your benefit to.



4 Change your insurance (optional)

You're eligible to receive basic (age-based) Death, Total & Permanent Disablement (TPD) and Income Protection cover automatically if you're 25 or older; and your super balance reaches \$6,000; and you've received an employer super contribution after you meet both age and balance requirements (other conditions apply). This is detailed in section 8 of the Product Disclosure Statement.

Complete this section to make changes to your cover. You can cancel some or all of your cover, apply to start your basic cover earlier, and apply to change your individual work rating.

Basic cover won't start automatically if you've cancelled or opted out of basic cover, or you've fixed your total cover amount.

If you're receiving employer super contributions, you can apply to start your basic cover earlier, even if you haven't met both age and balance requirements. We'll confirm when your basic cover will start once we've processed your application. The cost of your cover will be deducted monthly from your super account from the date your cover starts.

If you don't want cover to start automatically when you turn 25 or when your super balance reaches \$6,000, you can opt out by cancelling it (go to section 4.2).

Start your basic cover earlier

You're eligible to apply to start your basic cover earlier once, without providing detailed health information for the Insurer to consider (section 4.3).

You'll need to apply within 120 days of the date of your welcome letter, as long as you've never opted out of, reduced, or cancelled cover; or applied to increase your cover, transfer cover from another super fund or insurer, change your Income Protection waiting period and/or benefit payment period, make a Life event application or make any other changes to your cover (except applying to change your individual work rating).

If you've already applied to make any of these changes (this includes declined or withdrawn applications), or transfer between AustralianSuper divisions, you won't be eligible.

If you don't want all cover types, you can cancel the cover type(s) you don't want (go to section 4.2).



Want more cover?

You can apply for more cover anytime. You'll need to provide detailed health information for the Insurer to consider. To apply, log into your account and go to *Insurance* or download and complete the *Change your insurance* form at australiansuper.com/InsuranceForms

Need more time to think about insurance?

If you don't want to change your basic insurance now, skip to section 5. You'll still be able to apply to start your basic cover earlier without providing detailed health information for the Insurer to consider, at a later date. We'll write to you with details.

Before you change your cover

You should read the *Insurance in your super* guide. It contains important information about insurance, including costs, your eligibility for cover, how much you can apply for, when cover starts and stops, active employment, limited cover and exclusions. Download a copy at australiansuper.com/InsuranceGuide

Your eligibility to claim for benefits will be determined in line with the insurance policy terms and conditions.

Insurance cover will only be provided in line with the insurance policy terms and conditions as agreed between AustralianSuper and the Insurer. Those terms and conditions may change from time to time and AustralianSuper will notify you of those changes where required by law.



4.1 Duty to take reasonable care

The duty to take reasonable care

When you apply for insurance, you are treated as if you are applying for cover under an individual consumer insurance contract. A person who applies for cover under a consumer insurance contract has a legal duty to take reasonable care not to make a misrepresentation to the Insurer before the contract of insurance is entered into. A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth.

This duty also applies when extending or making changes to existing insurance, and reinstating insurance.

If you do not meet your duty

If you do not meet your legal duty, this can have serious impacts on your insurance. Under the Insurance Contracts Act 1984 (Cth) there are a number of different remedies that may be available to the Insurer. They are intended to put the Insurer in the position it would have been in if the duty had been met. For example, the Insurer may:

- avoid the cover (treat it as if it never existed);
- vary the amount of the cover; or
- vary the terms of the cover.

Whether the Insurer can exercise one of these remedies depends on a number of factors, including:

- whether reasonable care was taken not to make a misrepresentation. This depends on all of the relevant circumstances;
- what the Insurer would have done if the duty had been met – for example, whether it would have offered cover, and if so, on what terms;
- whether the misrepresentation was fraudulent; and
- in some cases, how long it has been since the cover started.

Before any of these remedies are exercised, the Insurer will explain the reasons for its decision, how to respond and provide further information, and what you can do if you disagree.

Guidance for answering the questions in this form

You are responsible for the information provided to the Insurer. When answering questions, please:

- Think carefully about each question before you answer. If you are unsure of the meaning of any question, please ask us before you respond.
- Answer every question.
- Answer truthfully, accurately and completely. If you are unsure about whether you should include information, please include it.
- Review your application carefully before it is submitted. If someone else helped prepare your application (for example, your adviser), please check every answer (and if necessary, make any corrections) before the application is submitted.

Please note that there may be circumstances where the Insurer later investigates whether the information given to it was true. For example, it may do this when a claim is made.

Changes before your cover starts

Before your cover starts, the Insurer may ask you whether the information that has been given as part of your application for insurance remains accurate or whether there has been a change to any of your circumstances. As any changes might require further assessment or investigation, it could save time if you let us or the Insurer know about any changes when they happen.

If you need help

It's important that you understand your obligations and the questions that are being asked. Please contact us for help if you have difficulty understanding the process of obtaining insurance or answering any questions.

Please also let us know if you're having difficulty due to a disability, understanding English or for any other reason – we're here to help and can provide additional support.

4.2 Cancel your cover

Complete this section to cancel one or more cover types. You won't be insured for any cover you cancel from the date your cancellation is received by AustralianSuper or the Insurer (as applicable). This means for the type of cover you cancel:

- Your basic cover won't start automatically even if you meet both age and balance requirements in the future.
- You (or your beneficiaries) won't be able to make an insurance claim if you suffer an illness or injury or you die after the cancellation. Claims may still be paid for something that happened before you cancelled.
- The cost of cover will stop being deducted from your super account (costs are deducted one month in arrears).
- You might not be able to get cover later. That's because you'll need to apply for that cover in the future and provide detailed health information for the Insurer to consider.

If you're replacing this cover with another insurance policy, you should wait until the other super fund or insurer confirms your cover has started before you cancel. You should consider getting financial advice to help work out if cancellation is right for you.

As an AustralianSuper member, you also have access to a choice of help and advice options from simple, personal advice over the phone, to more comprehensive, broader advice with a financial adviser¹. Go to australiansuper.com/advice for more information.

Print (X) next to each type of cover you wish to cancel.

☐

Death

☐

TPD

☐

Income Protection

¹ Personal financial product advice is provided under the Australian Financial Services Licence held by a third party and not by AustralianSuper Pty Ltd. Fees may apply.

4.3 Start your basic cover now

Complete this section to start your basic cover. If you're receiving employer super contributions, you can apply to start your basic cover, even if you haven't met both age and balance requirements. We'll confirm when your basic cover will start once we've processed your application. See the *Insurance in your super* guide for when cover starts.

The cost of your cover will be deducted monthly from your super account from the date your cover starts.

Print (X) to start your basic cover now.

☐ You'll receive basic (age-based) Death, TPD and Income Protection cover.

If you don't want all of your basic cover to start, you can cancel part of your cover (section 4.2).

4.4 Start your basic cover later

This is our default option. There's no action required if you'd like your basic cover to start later – once you're 25 or older and your super balance has reached \$6,000; and you've received an employer super contribution after you meet both age and balance requirements (other conditions apply).

4.5 Change your individual work rating

A work rating classifies the usual activities of your job into one of three ratings: Blue Collar, White Collar or Professional. Your individual work rating is one of the factors that determines how much you pay for your insurance cover.

When you join AustralianSuper and have insurance cover, you pay what it costs to provide you with cover based on our default work rating, Blue Collar. **Insurance cover with a Blue Collar work rating is the most expensive.**

Complete the questions below to apply to change your individual work rating to White Collar or Professional.

1. Are the usual activities of your main job 'white collar'? Yes ☐ No ☐
This means:
 - you spend more than 80% of your job doing clerical or administrative activities in an office-based environment, or
 - you're a professional using your university qualifications in a job that has no unusual work hazards (some examples of unusual work hazards include: working underground, working underwater, working at heights or working in the air).
2. Do you earn \$100,000 or more a year (excluding Superannuation Guarantee (SG) contributions) from your job(s)? This amount is pro rata for part time employment (for example, if you work part time 4 days a week and earn \$96,000 a year, your pro rata/full time equivalent is \$120,000). Yes ☐ No ☐
3. Do you have a university qualification? Yes ☐ No ☐
4. Do you have a management role in your company? Yes ☐ No ☐

5 Your investment choice

When you join AustralianSuper by completing this form, you'll automatically be invested in the default Balanced option – our MySuper authorised product.

If you'd like to move your money into a different investment option or options, it won't cost you anything to switch. Just log into your account or the mobile app and click Investments or complete and return the Investment choice form (superannuation account) available at australiansuper.com/forms

You should consider the likely investment return, risk, and your investment timeframe when choosing your investment option(s). For more information about our investment options, download our *Investment Guide* at australiansuper.com/InvestmentGuide



6 Give your financial adviser access to your account details

Completing this section of the form will give your financial adviser¹ access to your account details. If you have previously granted a financial adviser access to your account details, providing details of a new adviser here will remove access for the previous adviser.

Full name of financial adviser²

Name of business

Adviser email address²

Telephone

ASIC Financial adviser representative number²

Licensee AFSL number²

¹ Financial advisers may provide their support staff with access to your account details.

² Mandatory fields

7 Declaration and acknowledgment

This section must be completed in all circumstances.

I declare that:

- I've read and understood the information on this application, including the Duty to take reasonable care. I understand that the answers I've provided, together with any special conditions will form the basis of the Insurer's decision.
- The answers I've provided are true, complete and correct.
- I'm aware that a document that outlines the target market each AustralianSuper product is designed for is available at australiansuper.com/tmd
- I've read and understood the Product Disclosure Statement that came with this form and the *Insurance in your super* guide for my division at australiansuper.com/InsuranceGuide and understand that the additional information referred to in the guide is also part of the Product Disclosure Statement.
- I'm aware that the Trust Deed and Rules governing AustralianSuper (including the rights and obligations of members) are available at australiansuper.com/TrustDeed
- I've read the Privacy Collection Statement at the front of this booklet and I understand how AustralianSuper will use my personal information.
- If I've provided my email address and/or phone number in this form and I have no existing communication preferences on file with AustralianSuper, I consent to AustralianSuper sending me information about my account, AustralianSuper's products and services and

marketing communications, including third-party products and services, via email, my account online, SMS, mobile app or phone, as appropriate and in accordance with AustralianSuper's Privacy Policy. Otherwise, my current communication preferences for my account will remain unchanged. I understand I can change my communication preferences at any time by calling AustralianSuper on **1300 300 273** or through the Communication preferences section of my account online.

I acknowledge that:

- The information requested on this form (unless otherwise stipulated) is required in order for AustralianSuper to accept my application for membership and for the ongoing administration of my membership by AustralianSuper's fund administrator and other service providers.
- If I'm applying to start my basic cover before I meet both age and balance requirements:
 - the cost of my cover will be deducted monthly from my super account once it starts.
 - for cover that's been accepted by the Insurer, AustralianSuper will confirm when it will start.
- Any cover I've cancelled will stop from the date my cancellation is received by AustralianSuper or the Insurer (as applicable).
- If I haven't applied to change my individual work rating, there won't be a change to my individual work rating.
- A photocopy of this authorisation is as valid as the original.

Sign here

Date _____

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Print full name

[illegible]

A summary of AustralianSuper's Privacy Collection Statement is at the front of this booklet. Our Privacy Collection Statement and Privacy Policy may change from time to time. The latest versions will be available online at australiansuper.com/CollectionStatement and australiansuper.com/privacy

For information on the Insurer's privacy and information-handling practices, read their Privacy Policy at tal.com.au/privacy or call **1300 302 961** for a copy.

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Pay my super into AustralianSuper



Give this completed form to your employer. Don't send it to us or the Australian Taxation Office.



Please consider notifying your employer online — it will be faster and more secure. Simply log into your account at australiansuper.com/login and follow the prompts.

Please complete in pen using CAPITAL letters and print (X) to mark boxes where applicable.

1 Member to complete

Please complete your details below and provide this form to your employer if you want them to pay your super into your AustralianSuper account. If you would like to consolidate other super accounts into your AustralianSuper account, please give this completed form to your employer before you start the process. Your employer may take up to 2 months to start making contributions to your account.

Before making a decision to combine your super, consider any fees or charges that may apply, and the effect a transfer may have on benefits in your other fund such as insurance cover. We recommend you consider seeking financial advice.

Employee details

Employee name:

AustralianSuper account name:

Member number: Date of request:

Sign here



Date

Print name

Give this form to your employer. Don't send it to us or the Australian Taxation Office.



2 Information for the employer

Your employee has requested you pay their super into their AustralianSuper account. This form is an allowable alternative to the ATO Superannuation standard choice form.

AustralianSuper is a complying, resident and regulated super fund and can accept all types of super contributions within the meaning of the Superannuation Industry (Supervision) Act 1993 (SIS Act) and is not subject to a direction under section 63 of that Act. AustralianSuper is a registrable superannuation entity and may be nominated as a default fund, as it meets the minimum statutory insurance cover requirements. The Trustee of the Fund is AustralianSuper Pty Ltd ABN 94 006 457 987 AFSL 233788.

Fund details

Fund name:

Unique Superannuation Identifier (USI):

Australian Business Number (ABN):

Fund telephone number:

How to make payments into AustralianSuper

QuickSuper¹ is our online payment solution that gives you the choice of making one payment for all your employees — regardless of the super fund they belong to. It's suitable for all types of businesses and there is no additional cost to use.

You can register for QuickSuper at australiansuper.com/PaySuper. You'll need to have your company details and AustralianSuper employer number handy. If you don't have an AustralianSuper employer number, you can join us at australiansuper.com/join

Employee number if known:

Date employee's request received:

Date employee's request actioned:

Call us on **1300 300 273** if you need help understanding your employer super obligations or making payments for your employees.



¹ QuickSuper is a registered trademark and a product owned and operated by Westpac Banking Corporation ABN 33 007 457 141. Westpac's terms and conditions applicable to the QuickSuper service are available after your eligibility for the clearing house service is assessed by AustralianSuper. A Product Disclosure Statement (PDS) is available from Westpac upon request. AustralianSuper doesn't accept liability for any loss or damage caused by use of the QuickSuper service and doesn't receive any commissions from Westpac if employers use this service. You can choose to make your contributions using a different service, but it needs to meet the government's minimum data standards, visit ato.gov.au

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Combine your super

Request to transfer (rollover) the whole or a partial balance of your other super account to AustralianSuper



Please consider doing this transaction online — it will be faster and more secure. Simply login to your account at australiansuper.com/login and follow the prompts. First-time users may need to register at australiansuper.com/register Or you can complete this form and upload a scanned or soft (digital) copy of it via australiansuper.com/upload-document

If you're completing this in pen use CAPITAL letters and print (X) to mark boxes where applicable. Form must be completed in full. To combine super from multiple accounts, you'll need to complete a separate form for each account you wish to combine. Alternatively you can combine multiple accounts online at australiansuper.com/combine

1 Fill in your personal details

Last name		Mr	Mrs	Ms	Miss	Dr
		☐	☐	☐	☐	☐
First name/s		Date of birth				
Other/previous names						
Street address						
Suburb					State	Postcode
Previous street address (if details with your FROM fund are different to those above)						
Suburb					State	Postcode
Telephone (business hours)		Telephone (after hours)		Mobile		
Male	Female	Email				
☐	☐					

2 Provide super account details

FROM:

☐ Other super fund	Fund name	
	Fund phone number	Member or account number
	Australian Business Number (ABN)	Unique Superannuation Identifier (USI)
☐ Self-managed super fund (SMSF)	SMSF name	
	Australian Business Number (ABN)	
	Electronic Service Address (ESA)	
TO: Fund name	Member number	Phone number
AUSTRALIANSUPER		1 3 0 0 3 0 0 2 7 3
Australian Business Number (ABN)	Unique Superannuation Identifier (USI)	
6 5 7 1 4 3 9 4 8 9 8	S T A 0 1 0 0 A U	

3 Is this a whole or partial balance transfer?

- ☐ Whole - I'd like to transfer the whole balance of this account. This means you're asking us to close your other super account.
- ☐ Partial - I'd like to transfer a nominated amount: \$, , .00

Before combining (consolidating) super from your other super account, you should consider any fees and costs that may apply and the effect a transfer may have on benefits in your other fund such as insurance cover. If you want to transfer insurance cover you have with your other super account to AustralianSuper, you'll need to transfer it before you combine your super. Download an *Insurance transfer* form at australiansuper.com/InsuranceForms

4 Your tax file number

- ☐
- Use my Tax File Number (TFN) to process my super transfer.

Enter your TFN here

By giving us your TFN, you are authorising us to give this information to your other super fund. They'll confirm your ID with the Australian Taxation Office. It's optional to provide your Tax File Number (TFN) but there are several advantages if you do. See 'Providing your TFN' below for more information.

5 Sign this form

By signing this request form I'm making the following statements:

- I'm aware I may ask my super provider for information about any fees or charges that may apply, or any other information about the effect this transfer may have on my benefits such as insurance cover, and do not require any further information.
- I discharge the super provider of my FROM fund of all further liability in respect of the benefits paid and transferred to AustralianSuper.
- I authorise AustralianSuper (or its agents) to contact my other super fund regarding this request to combine my super from that fund into my AustralianSuper account only.
- I'm aware that once my completed form is received by AustralianSuper, it will usually be processed within three business days.
- I've read the Privacy Collection Statement below and I understand how AustralianSuper will use my personal information.
- To the best of my knowledge, the information I've provided on this form is correct.
- If I've provided my email address and/or phone number in this form and I have no existing communication preferences on file with AustralianSuper, I consent to AustralianSuper sending me information about my account, AustralianSuper's products and services and marketing communications, including third-party products and services, via email, my account online, SMS, mobile app or phone, as appropriate and in accordance with AustralianSuper's Privacy Policy. Otherwise, my current communication preferences for my account will remain unchanged. I understand I can change my communication preferences at any time by calling AustralianSuper on **1300 300 273** or through the Communication preferences section of my account online.

I request and consent to the transfer of super as described within this form and authorise the super provider of each fund to give effect to this transfer.

Sign here

Date _____

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Print name

[illegible]

Important information

1. You can't nominate a balance transfer date. The balance transfer will start within three business days of the date we receive your completed application.
2. If you want to transfer any insurance cover you have with your other super fund to AustralianSuper, you'll need to transfer it before you combine your super. Download an Insurance transfer form at australiansuper.com/InsuranceForms
3. If you're making a whole balance transfer, check any remaining employer contributions have been received and no future payments will be made into your FROM account.
4. This form doesn't:
 - transfer super benefits if you don't know where your super is
 - transfer benefits from multiple funds on one form – you must use a separate form for each fund you wish to transfer

- change the fund to which your employer pays your contributions
- open a new super account, or
- transfer benefits under certain conditions or circumstances, for example if there is a superannuation agreement under the Family Law Act 1975 in place.

Providing your TFN

We're authorised under super law to collect, use and disclose your Tax File Number (TFN). It's optional to provide your TFN, but if we have it, we'll be able to accept all types of contributions from you, you won't pay more tax than you need to, and it'll be easier to find your super. If you transfer your super to another fund, we'll give them your TFN unless you tell us not to in writing. Visit australiansuper.com/TFNGuide for more details.



Privacy Collection Statement

Please read this Privacy Collection Statement to see how AustralianSuper uses your personal information. AustralianSuper Pty Ltd (ABN 94 006 457 987) of GPO Box 1901, Melbourne, Victoria, 3001, collects your personal information (PI) to operate, and administer your super account (including insurance) or retirement income account, improve our products and services and keep you informed. If we can't collect your PI we may not be able to provide these services. PI is collected from you but sometimes from third parties like your employer and your financial adviser (if applicable). We will only share your PI where necessary to perform our activities with our administrator (Australian Administration Services Pty Ltd, being a part of MUFG Pension & Market Services Holdings Ltd), our contact centre provider (Concentrix Services Pty Ltd), service providers, as required by law or court/tribunal order, or with your permission. Your PI may be accessed overseas by some of our service providers and, where applicable to your circumstances, by third-party service providers of your financial adviser. Our Privacy Policy details how to access and change your PI, as well as our privacy complaints process. For complete details go to australiansuper.com/privacy or call us on **1300 300 273**.



To combine other super accounts into AustralianSuper, go to australiansuper.com/combine

Please return this completed form to:
AustralianSuper, GPO Box 1901, MELBOURNE VIC 3001
 or upload a copy via our website to **australiansuper.com/upload-document**
 Questions? Call **1300 300 273** or visit **australiansuper.com**

Combine your super

Request to transfer (rollover) the whole or a partial balance of your other super account to AustralianSuper



Please consider doing this transaction online — it will be faster and more secure. Simply login to your account at australiansuper.com/login and follow the prompts. First-time users may need to register at australiansuper.com/register Or you can complete this form and upload a scanned or soft (digital) copy of it via australiansuper.com/upload-document

If you're completing this in pen use CAPITAL letters and print (X) to mark boxes where applicable. Form must be completed in full. To combine super from multiple accounts, you'll need to complete a separate form for each account you wish to combine. Alternatively you can combine multiple accounts online at australiansuper.com/combine

1 Fill in your personal details

Last name		Mr		Mrs		Ms		Miss		Dr	
First name/s		Date of birth									
Other/previous names											
Street address											
Suburb								State		Postcode	
Previous street address (if details with your FROM fund are different to those above)											
Suburb								State		Postcode	
Telephone (business hours)				Telephone (after hours)				Mobile			
Male		Female		Email							

2 Provide super account details

FROM:

☐ Other super fund											
Fund name											
Fund phone number				Member or account number							
Australian Business Number (ABN)				Unique Superannuation Identifier (USI)							
☐ Self-managed super fund (SMSF)											
SMSF name								Australian Business Number (ABN)			
Electronic Service Address (ESA)											
TO:											
Fund name				Member number				Phone number			
Australian Business Number (ABN)				Unique Superannuation Identifier (USI)							

3 Is this a whole or partial balance transfer?

- ☐ Whole - I'd like to transfer the whole balance of this account. This means you're asking us to close your other super account.
- ☐ Partial - I'd like to transfer a nominated amount: \$, , .00

Before combining (consolidating) super from your other super account, you should consider any fees and costs that may apply and the effect a transfer may have on benefits in your other fund such as insurance cover. If you want to transfer insurance cover you have with your other super account to AustralianSuper, you'll need to transfer it before you combine your super. Download an *Insurance transfer* form at australiansuper.com/InsuranceForms

4 Your tax file number

- ☐
- Use my Tax File Number (TFN) to process my super transfer.

Enter your TFN here

By giving us your TFN, you are authorising us to give this information to your other super fund. They'll confirm your ID with the Australian Taxation Office. It's optional to provide your Tax File Number (TFN) but there are several advantages if you do. See 'Providing your TFN' below for more information.

5 Sign this form

By signing this request form I'm making the following statements:

- I'm aware I may ask my super provider for information about any fees or charges that may apply, or any other information about the effect this transfer may have on my benefits such as insurance cover, and do not require any further information.
- I discharge the super provider of my FROM fund of all further liability in respect of the benefits paid and transferred to AustralianSuper.
- I authorise AustralianSuper (or its agents) to contact my other super fund regarding this request to combine my super from that fund into my AustralianSuper account only.
- I'm aware that once my completed form is received by AustralianSuper, it will usually be processed within three business days.
- I've read the Privacy Collection Statement below and I understand how AustralianSuper will use my personal information.
- To the best of my knowledge, the information I've provided on this form is correct.
- If I've provided my email address and/or phone number in this form and I have no existing communication preferences on file with AustralianSuper, I consent to AustralianSuper sending me information about my account, AustralianSuper's products and services and marketing communications, including third-party products and services, via email, my account online, SMS, mobile app or phone, as appropriate and in accordance with AustralianSuper's Privacy Policy. Otherwise, my current communication preferences for my account will remain unchanged. I understand I can change my communication preferences at any time by calling AustralianSuper on **1300 300 273** or through the Communication preferences section of my account online.

I request and consent to the transfer of super as described within this form and authorise the super provider of each fund to give effect to this transfer.

Sign here

Date _____

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Print name

[illegible]

Important information

1. You can't nominate a balance transfer date. The balance transfer will start within three business days of the date we receive your completed application.
2. If you want to transfer any insurance cover you have with your other super fund to AustralianSuper, you'll need to transfer it before you combine your super. Download an Insurance transfer form at australiansuper.com/InsuranceForms
3. If you're making a whole balance transfer, check any remaining employer contributions have been received and no future payments will be made into your FROM account.
4. This form doesn't:
 - transfer super benefits if you don't know where your super is
 - transfer benefits from multiple funds on one form – you must use a separate form for each fund you wish to transfer

- change the fund to which your employer pays your contributions
- open a new super account, or
- transfer benefits under certain conditions or circumstances, for example if there is a superannuation agreement under the Family Law Act 1975 in place.

Providing your TFN

We're authorised under super law to collect, use and disclose your Tax File Number (TFN). It's optional to provide your TFN, but if we have it, we'll be able to accept all types of contributions from you, you won't pay more tax than you need to, and it'll be easier to find your super. If you transfer your super to another fund, we'll give them your TFN unless you tell us not to in writing. Visit australiansuper.com/TFNGuide for more details.



Privacy Collection Statement

Please read this Privacy Collection Statement to see how AustralianSuper uses your personal information. AustralianSuper Pty Ltd (ABN 94 006 457 987) of GPO Box 1901, Melbourne, Victoria, 3001, collects your personal information (PI) to operate, and administer your super account (including insurance) or retirement income account, improve our products and services and keep you informed. If we can't collect your PI we may not be able to provide these services. PI is collected from you but sometimes from third parties like your employer and your financial adviser (if applicable). We will only share your PI where necessary to perform our activities with our administrator (Australian Administration Services Pty Ltd, being a part of MUFG Pension & Market Services Holdings Ltd), our contact centre provider (Concentrix Services Pty Ltd), service providers, as required by law or court/tribunal order, or with your permission. Your PI may be accessed overseas by some of our service providers and, where applicable to your circumstances, by third-party service providers of your financial adviser. Our Privacy Policy details how to access and change your PI, as well as our privacy complaints process. For complete details go to australiansuper.com/privacy or call us on **1300 300 273**.



To combine other super accounts into AustralianSuper, go to australiansuper.com/combine

Please return this completed form to:
AustralianSuper, GPO Box 1901, MELBOURNE VIC 3001
 or upload a copy via our website to **australiansuper.com/upload-document**
 Questions? Call **1300 300 273** or visit **australiansuper.com**

Making, changing or cancelling a binding death benefit nomination

Follow these instructions to make, change or cancel a binding death benefit nomination.

What's a binding nomination?

A binding nomination instructs AustralianSuper how to pay your death benefit if you die.

As long as it's still valid when it's assessed upon notification of your death, your nomination is legally binding and we must follow it¹. This is why it's important to consider updating your binding nomination if your circumstances change (marriage, divorce, birth of a child or children, or death of a nominee), so that your benefit will be paid in line with your current wishes.

Who can I nominate?

For a binding nomination to be valid, the people you list at step 5 of this form must be your dependants (at the date of your death) and/or legal personal representative:

- your spouse (including de facto and same sex)
- your children (including step, adopted or ex-nuptial of any age)
- financially dependent² on you
- an interdependant (see *More about interdependants*), or
- your legal personal representative, which means the executor or administrator of your estate.

For every beneficiary you nominate, you can only specify one type of relationship (eg. spouse, child, interdependent or financial dependent).

How long does it last?

AustralianSuper offers two types of binding nominations:

Option 1: Lapsing binding nomination

This nomination will expire 3 years from the date you sign the form. The expiry date will be shown on your annual statement and in your account online, and you'll be sent reminders prior to the expiry date.



Option 2: Non-lapsing binding nomination

This nomination does not have an expiration date and will only be changed or cancelled if you complete a new nomination form.

You can make or change your binding nomination anytime. You'll need to complete a valid *Binding death benefit nomination* form available at australiansuper.com/beneficiaries

In order for AustralianSuper to accept your binding nomination, you must select either **lapsing** or **non-lapsing** in step 4 of this form.

If you fail to select one of the options, the form is invalid and you will need to submit a completely new *Binding death benefit nomination* form.

How do I cancel my binding nomination?

You can cancel your binding nomination at any time. If you wish to cancel your current nomination without making a new nomination please complete steps 1, 2 and 6 of this form and return it to us. Any death benefits will then be paid at the discretion of the Trustee of AustralianSuper to your dependants or legal personal representative.

How do I confirm or renew a lapsing binding nomination after the three year term has expired?

You will need to make a new nomination by completing and submitting a new valid *Binding death benefit nomination* form. If you make a new lapsing binding nomination, please note that the 3 year term will start again from the date you sign the form. If you make a new non-lapsing binding nomination, this does not have an expiration date.

How do I change my binding nomination?

You can change your binding nomination at any time. To change your current lapsing or non-lapsing binding nomination you'll need to complete and submit a new valid *Binding death benefit nomination* form.

Your existing nomination will be cancelled and replaced by your new nomination.

Does it cost anything?

No. There are no fees for you to make, change or cancel a binding nomination.

What if my nomination is invalid?

If your nomination is invalid when it is assessed upon notification of your death, the Trustee of AustralianSuper will consider your wishes but will use its discretion when paying out your death benefit.

Examples of an invalid binding nomination include:

- your nomination being made more than three years ago (if you submitted a lapsing binding nomination); or
- the individuals nominated no longer qualify as your dependants at the date of your death.

¹ There may be limited circumstances where AustralianSuper cannot comply with a binding death benefit nomination. This can occur where either you or the Trustee of AustralianSuper are subject to a court order restraining or prohibiting payment in accordance with the binding nomination.

² As defined by Superannuation law.

More about interdependants

An interdependent relationship generally exists if:

- two people have a close personal relationship which involves a demonstrated and ongoing commitment to a shared life and each other's emotional support and wellbeing; and
- they live together, or are temporarily living apart; and
- one or each of them provides the other with financial support; and
- one or each of them provides the other with domestic support and personal care of a level normally provided in a close personal relationship, rather than by a mere friend or flatmate.

OR

- if they don't live together or provide each other with financial support, domestic support and personal care, it's because one or both of them suffer from a disability.

Two people don't have an interdependent relationship if one of them provides domestic support and personal care to the other and is paid for this or works on behalf of another person or organisation such as a government agency, a body corporate or a benevolent or charitable organisation.

Whether your nominated beneficiaries qualify as your interdependants will be assessed when a claim is made.

AustralianSuper will pay your death benefit in accordance with your valid binding nomination if it:



- is made to us in writing on the form over the page;
- nominates one or more of your dependants (at the date of your death) or legal personal representative;
- shows the percentage allocated to your nominated beneficiaries adding up to 100%;
- is signed and dated by two people who have witnessed you sign and date the form, are aged 18 years or over and are not nominated as beneficiaries on the form;
- is received by us before your death; and
- has not expired before your death (if you make a lapsing binding nomination).

To make or change an existing nomination, please complete the form below.

To cancel an existing binding nomination, complete steps 1, 2 and 6 of this form including having your signature witnessed.

To make, renew or change an existing binding nomination, complete steps 1, 3, 4, 5 and 6 of this form.

If all relevant steps on the form are not completed, including having your signature witnessed, your binding nomination will be invalid, and you will need to complete a new form.

Privacy Collection Statement

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Our Privacy Policy details how to access and change your PI, as well as our privacy complaints process. For complete details go to australiansuper.com/privacy or call us on 1300 300 273.

Binding death benefit nomination

Use this form to make, change or cancel a binding nomination.

Please complete in pen using CAPITAL letters and print (X) to mark boxes. Form must be completed in full.
Read the Privacy Collection Statement on this form to see how AustralianSuper uses your personal information.

1 Provide your personal details

Last name ¹		Mr	Mrs	Ms	Miss	Dr
		☐	☐	☐	☐	☐
First name/s ¹		Date of birth ¹				
Street address ¹						
Suburb/Town ¹		State ¹		Postcode ¹		
Telephone (business hours)		Mobile number		Member number ²		

¹ These fields are mandatory and must be completed for the nomination to be accepted.

² You must complete a separate form for each account you hold at AustralianSuper. If you have a Choice Income account, please complete a *Binding death benefit* form for Choice Income.

2 Cancel your current nomination

☐ Cancel my current nomination and pay benefits at the discretion of the Trustee of AustralianSuper to my dependants or legal personal representative. Proceed to step 6 to sign your declaration and have your signature witnessed.

3 Make a new nomination, renew or change your current nomination

☐ Make a new binding death nomination or renew or change my current nomination. **Note:** If you have an existing nomination, you **must** select this option to acknowledge that it will be cancelled and replaced by your new nomination.

Please complete steps 4, 5 and 6 or your new nomination or renewal can't be processed and you'll have to complete a new form.

4 Choose the type of binding nomination

I would like my binding death benefit nomination to be (select (X) only one):

☐ Lapsing ☐ Non-lapsing

Please note: In order for AustralianSuper to accept your binding death nomination, you must select either **lapsing** or **non-lapsing**. If you fail to select one of the options, the form is invalid and you will need to submit a completely new *Binding death benefit nomination* form.

To understand the difference between lapsing and non-lapsing binding nominations, please read the *How long does it last?* section on page 1 of this form.

5 Nominate who you want to receive your death benefit

Read *Who can I nominate?* on page 1 before filling in this section.

If you're nominating your 'Legal personal representative', you do not need to complete the sections headed 'Surname', 'Given name/s' and 'Residential address' for that part of your nomination. However, you must complete the 'Percentage of benefit' section. If you have more than five nominees, please attach them to this form on a separate sheet of paper. **Please use the two decimal point spaces provided for the benefit percentages (% of benefit) section to add up to 100.00%. Only select one type of relationship per beneficiary nomination.**

Beneficiary 1

Surname		Percentage of benefit	
		%	
Given name/s			
☐ Spouse		☐ Child	
☐ Interdependant		☐ Financial dependant	
☐ Legal personal representative (executor or administrator of your estate)			
Residential address			
Suburb		State	Postcode
Telephone / mobile number			

5 Nominate who you want to receive your death benefit (continued)

Beneficiary 2

Surname

Percentage of benefit

. %

Given name/s

☐ Spouse ☐ Child ☐ Interdependant ☐ Financial dependant

☐ Legal personal representative (executor or administrator of your estate)

Residential address

Suburb

State

Postcode

Telephone / mobile number

Beneficiary 3

Surname

Percentage of benefit

. %

Given name/s

☐ Spouse ☐ Child ☐ Interdependant ☐ Financial dependant

☐ Legal personal representative (executor or administrator of your estate)

Residential address

Suburb

State

Postcode

Telephone / mobile number

Beneficiary 4

Surname

Percentage of benefit

. %

Given name/s

☐ Spouse ☐ Child ☐ Interdependant ☐ Financial dependant

☐ Legal personal representative (executor or administrator of your estate)

Residential address

Suburb

State

Postcode

Telephone / mobile number

Beneficiary 5

Surname

Percentage of benefit

. %

Given name/s

☐ Spouse ☐ Child ☐ Interdependant ☐ Financial dependant

☐ Legal personal representative (executor or administrator of your estate)

Residential address

Suburb

State

Postcode

Telephone / mobile number

TOTAL MUST ADD UP TO 100.00%

. %

Member declaration

- The people listed at step 5 must be my spouse, child, financial dependant, interdependent or a legal personal representative of my estate when I die and I can only select one relationship per beneficiary nomination.
- I must sign and date this form in front of two witnesses, both of whom are aged 18 years or over and are not nominated as a beneficiary in my form.
- I can change or cancel this nomination at any time by completing a new *Binding death benefit nomination* form.
- If I have an existing lapsing or non-lapsing binding nomination in place when I make a new binding nomination via this form, I agree and acknowledge as per step 3 that I am cancelling (i.e. revoking) my existing nomination from the date the Trustee of AustralianSuper receives this form (subject to my new binding nomination being complete and legally valid).
- If this nomination is invalid or has not been received by AustralianSuper when I die, my death benefit will be paid at the discretion of the Trustee of AustralianSuper.
- This binding nomination is only effective when received and accepted by AustralianSuper.
- If this is a lapsing nomination it will expire three years from the date of my signature below.
- I have read the information in this form and I understand the terms on which this nomination is made. I have also read the Privacy Collection Statement and I understand how AustralianSuper will use my personal information.

D	D	M	M	Y	Y	Y	Y
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[illegible]

Witness declaration

- I am aged 18 years or over;
- I am not nominated as a beneficiary on this form; and
- the member signed and dated this form in my presence.

D	D	M	M	Y	Y	Y	Y
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[illegible]

D	D	M	M	Y	Y	Y	Y
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