

Third party authority - Death claim

Complete this form if you're a potential beneficiary or legal personal representative (LPR) and you wish to provide authority for a third party to act on your behalf for the purpose of a death claim.

For a third party authority to be valid, you must provide three (3) personal details of the deceased member on this form, before we can answer enquiries about their membership or account.

Please complete in pen using CAPITAL letters and print (X) to mark boxes where applicable. Read the Privacy Collection Statement on page 2 of this form to see how AustralianSuper uses your personal information.

1 Complete your details

Last name	Mr	Mrs	Ms	Miss	Dr
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First name	<input type="text"/>				
Middle name	<input type="text"/>				
Street address	<input type="text"/>				
Suburb	State	Postcode			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Email address	<input type="text"/>				
Phone number	<input type="text"/>				

Sign here

Date

D	D	M	M	Y	Y	Y	Y
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2 Deceased AustralianSuper member details

Last name	Mr	Mrs	Ms	Miss	Dr
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First name	<input type="text"/>				
Middle name	<input type="text"/>				
Date of birth	Member number / Account number (if applicable)				
<input type="text"/>	<input type="text"/>				

3 Authorised representative details

Company name (if applicable)	<input type="text"/>	
Full name of representative/s	<input type="text"/>	
<input type="checkbox"/> If you're authorising all staff at the above company to represent you mark (X) this box		
Third party's relationship to client	<input type="text"/>	
Street address	<input type="text"/>	
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email address	<input type="text"/>	

4

By signing this statement, you understand that:

- Your nominated third party will be able to obtain relevant information regarding the late member and any claim you make, and correspondence will be sent to them directly on your behalf.
- You may withdraw this authority at any time by calling us or sending us a written notice.

Please note that in some instances AustralianSuper may still be required to contact you directly.

Sign here

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Date _____

D	D	M	M	Y	Y	Y	Y
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Full name

[illegible]

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Email your completed form to: claimsupport@australiansuper.com

or post it to: Bereavement Centre, AustralianSuper, GPO Box 1901, MELBOURNE VIC 3001

If you need assistance or have any queries, please contact us on **1300 667 387**.

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 personal information (PI) from claimants including their name, age, address, contact details, Tax File Number, bank/payment details, claimant relationship/dependency information in relation to the deceased and documents to assess and administer the death claim. To perform these activities we may need to disclose your PI to our Insurer (TAL Life Limited ABN 70 050 109 450, AFSL 237848) or another relevant insurer for certain insurance claims, 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), and/or other service providers. We may also need to share some information with other claimants if there is another claim or dispute, in this case will only share a claimant's name, any payment details, claim value and the dependency/relationship status of the claimant in relation to the deceased. 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**.