

Request a full withdrawal of your Choice Income or TTR income account

Use this form to request full withdrawal and closure of your Choice Income or TTR income account.

If you want to request partial withdrawal of your account balance, you need to use the form *Request a partial withdrawal of your Choice Income or TTR income account*.

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

STEP 1. PROVIDE YOUR PERSONAL DETAILS

Last name

First name

Date of birth

Male

Female

Mr

Ms

Mrs

Miss

Dr

Member number

Account number

Street address

Suburb

State

Postcode

Postal address (if different)

Suburb

State

Postcode

Telephone (business hours)

Telephone (after hours)

Mobile

Email

STEP 2. TELL US HOW YOU ARE ELIGIBLE

Choose (X) the option that best describes you.

I have a Choice Income account and I request a full payment and account closure. [go to Step 3]

I have a TTR Income account. [complete section below]

To request a payment you must meet one of the conditions of release below. Please choose (X) one.

I am between my preservation age and the age of 64 and have permanently retired from the workforce.

I have unrestricted non-preserved super (usually after-tax contributions made before 1 July 1999).

I want to transfer my account to another super fund.

I'm aged 60 to 64 and still working, but since turning 60 I changed employers.

Former employer name:

Date you finished work:

STEP 3. PROVIDE PROOF OF YOUR IDENTITY

Please complete (X) one of the three options below.

To protect your account, you need to prove your identity when you take a cash payment, move money to a self managed super fund or move money between super funds.

Option 1 – Use my Tax File Number (TFN) to identify me.

This option is not available for cash payments or for transfers to self-managed super funds. By giving us your TFN, you are authorising us to give this information to your other super fund. They will confirm your ID with the Australian Tax Office.

Enter your TFN here

! For how we use your TFN, go to australiansuper.com/RefTFN. If you don't provide your TFN you're likely to pay more tax than you need to.

Option 2 – I want to use electronic verification

By giving you my Medicare, driver's licence or Australian passport details below, I authorise the use of my personal details (including the information below) for the purpose of electronic data verification. I understand that my information will be subject to an information match request in relation to relevant official record holder information and a corresponding information match result will be provided via the use of third party systems.

Any TWO of the following:

| | | |
|---|--|-------------------------------------|
| 1. Full name as it appears on my Medicare card | <input type="text"/> | |
| My Medicare number is | Valid to | My reference number on this card is |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2. Full name as it appears on my Driver's licence | <input type="text"/> | |
| My Australian Driver's Licence number is | State of issue | Expiry date |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3. My Australian Passport number is | Place of birth (as shown on your passport) | |
| <input type="text"/> | <input type="text"/> | |
| Country of birth (not shown on your passport) | | |
| <input type="text"/> | | |
| Family name at birth (not shown on your passport) | | |
| <input type="text"/> | | |

Option 3 – I want to attach paper copies of certified documentation

I have attached my certified proof of identity to this application.

Please ensure that you provide photocopies of your original identification documents and that they are correctly certified. Each page must be certified as a true copy. For instructions on who can certify documents, go to australiansuper.com/IDHelp

Electronic verification if paper copies of certified documentation are incorrectly certified or unable to be read

I authorise the use of my personal details for the purpose of electronic data verification if the paper copies of my certified documentation are incorrectly certified or unable to be read. I understand that my information will be subject to an information match request in relation to relevant official record holder information and a corresponding information match result will be provided via the use of third party systems.

STEP 4. TELL US HOW YOU WILL WITHDRAW YOUR ACCOUNT BALANCE

A full withdrawal will close your account. Investment earnings, regular payments, fees, costs and tax will change the final amount paid. If you received a Balance Booster when you opened your Choice Income account, a clawback could apply. See the *Choice Income Product Disclosure Statement* for details.

This withdrawal will attract a \$35 exit fee.

Choose (X) one of the four options below

Option 1

- Withdraw all of my account in cash** (This option is available for Choice Income only. Cash withdrawals are not available for TTR Income accounts).

Please tell us how to pay this to you.

- Make the payment to the same account my regular income payments go to.

- Make the payment to a different account:

Name of bank, building society or credit union

BSB number

Your account name (this must be a personal account, held solely or jointly in your name)

Account number

- Mark (X) this box if you've provided a copy of your bank statement so we can double check your details to avoid any payment delays.

Option 2

- Transfer all of my account to my AustralianSuper superannuation account:**

Member number

Option 3

- Transfer all of my account to another super fund or self-managed super fund.**

Please provide details.

- Transfer to another super fund:

Fund name

Address

Suburb

State

Postcode

Other super fund member number

Australian Business Number (ABN)

USI (Unique Superannuation Identifier)

- Transfer to a self-managed super fund (SMSF):

If you are transferring to a self-managed super fund, are you a member and trustee or director of the fund? Yes No

SMSF name

Australian Business Number (ABN)

SMSF bank details:

Account name

BSB number

Account number

STEP 4. TELL US HOW YOU WILL WITHDRAW YOUR ACCOUNT BALANCE (CONTINUED)

Option 4

Withdraw part of my account in cash and transfer the rest to another super fund or self-managed super fund (SMSF).

Amount to withdraw in cash: \$

Please tell us how to pay this to you.

Make the payment to the same account my regular income payments go to.

Make the payment to a different account:

Name of bank, building society or credit union BSB number

Your account name (this must be a personal account, held solely or jointly in your name) Account number

Mark (X) this box if you've provided a copy of your bank statement so we can double check your details to avoid any payment delays.

Please also provide details of your other super fund or SMSF:

Transfer to another super fund:

Fund name

Address

Suburb State Postcode

Other super fund member number Australian Business Number (ABN)

USI (Unique Superannuation Identifier)

Transfer to a self-managed super fund (SMSF):

If you are transferring to a self-managed super fund, are you a member and trustee or director of the fund? Yes No

SMSF name Australian Business Number (ABN)

SMSF bank details:
Account name BSB number Account number

STEP 5. SIGN THIS FORM

I acknowledge that in certain circumstances AustralianSuper will make a retirement income payment prior to making this withdrawal payment. The information I have supplied on this application is true and correct at the date of signing this application.

I understand the Trustee of AustralianSuper will disclose my TFN to another super fund if my benefits are being transferred, unless I request in writing that the Trustee does not disclose my TFN to any other super fund.

I understand that if I withdraw my whole account balance this will close my AustralianSuper account and AustralianSuper will no longer have any responsibility for the account.

I have read the Privacy Collection Statement and I understand how AustralianSuper will use my personal information.

I understand that any cash withdrawal will be treated as a superannuation lump sum payment for tax purposes.

Sign here:



Date

Print full name

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 26/50 Lonsdale Street, Melbourne, Victoria, collects your personal information (PI) to run your super account (including insurance), improve our products and services and keep you informed. If we can't collect your PI we may not be able to do these tasks. PI is collected from you but sometimes from third parties like your employer. We will only share your PI where necessary to perform our activities with our administrator, 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. A list of countries can be found at the URLs below. Our Privacy Policy details how to access and change your PI, as well as the privacy complaints process. For complete details on the above go to australiansuper.com/CollectionStatement and australiansuper.com/privacy or call us on 1300 300 273.