# Lifetime pension benefit payment



# About this form

Your quote contains important information about the options available to you, so please refer to it to help you complete this form. Your quote will also show if you have an additional benefit that can only be taken as a lump sum. Any additional benefit will generally be the current balance of your additional account less any family law or surcharge account (if applicable).

#### Your options are: (tick a box)

	Take your entire benefit as a pension ONLY	You can elect to receive a pension. If you are not immediately eligible to receive your pension under Preservation Rules, your pension will be deferred. Please complete and return this form to provide us with your pension instructions.	
		If you have an additional benefit that can only be paid as a lump sum, please complete and return the accompanying <i>Benefit payment application</i> form to provide instructions for that amount.	
	Take your entire benefit as a lump sum amount ONLY	You can elect to convert your pension benefit to a lump sum amount plus investment earnings to the date of payment. To do this, please complete and return only the accompanying <i>Benefit payment application</i> form.	
	Take your benefit as part pension and part lump sum (if available)	If available to you, you can elect to take your benefit as part pension and part lump sum. If you are not immediately eligible to receive your pension under Preservation Rules, your pension will be deferred. You will need to complete and return this form to provide us with your pension instructions AND the accompanying <i>Benefit payment application</i> form for your lump sum payment instructions.	

### 1 – Your member details

# Please complete in pen using CAPITAL letters

Member number	
Title	Sex Date of birth (ddmmyyyy)
Mr         Ms         Miss         Other	
First name	Last name
Residential address (must be provided)	
Suburb	
State Postcode Country (if not Australia)	
Postal address (if different from Residential address)	
Suburb	
State Postcode Country (if not Australia)	
Business hours phone After hours phone	Mobile
Email	

# **Need help?**

1800 682 626 0 equipsuper.com.au Equip Super, GPO Box 4303, Melbourne VIC 3001



# 2 – Pension payment instructions

I would like to receive:	
an annual pension of the maximum amount permitted	
an annual pension of \$ , with the remaining benefit paid as a lu	mp sum.
Please pay my pension to my nominated account as follows:	
Name of bank, building society or credit union	BSB
Your account name (must be a personal account held solely or jointly in your name)	Account Number

Please provide a copy of your bank statement that shows the account name, BSB and account number. If required, Equip Super may seek further evidence prior to payments commencing.

### 3 – Reversionary spouse details

Please complete the details for your reversionary spouse. In the event of your death, your pension may be payable to your reversionary spouse under the Fund Rules.

Title		Sex [	Date of birth (ddmmyyyy)
Mr Mrs Ms Miss	Other	Male Female	
Marital Status Married Defacto			
First name		Last name	
Postal address			
Suburb			
State Postcode	Country (if not Australia)		
Daytime phone	Mobile		
Email			

### **Privacy**

The personal information you provide on this form will be used in accordance with Togethr Trustee's Privacy Statement, which you can view online at **equipsuper.com.au/privacy** or you can obtain a copy by contacting us on **1800 682 626**.

Togethr Trustee's Privacy Collection Statement details how we deal with your personal information and who you can talk to if you wish to access and seek correction of the information we hold about you. It includes details on how we collect, disclose and manage your personal information, including other entities and offshore locations that may receive or provide your information.

Our administrator, Mercer Outsourcing (Australia) Pty Ltd (Mercer), will also handle your personal information. You can view Mercer's Privacy Policy online at **mercer.com.au/privacy** 

If you have any other queries in relation to privacy issues, you can contact us or write to our Privacy Officer, GPO Box 4303, Melbourne VIC 3001.

# **Need help?**

1800 682 626 0 equipsuper.com.au Equip Super, GPO Box 4303, Melbourne VIC 3001



# 4 – Proof of identity information

Please find below a list of documents that you can use to prove your identity. Any documents you provide must be certified as true copies by a person authorised to certify documents. Read on for further information or see our full proof of identity information online at equipsuper.com.au/identity. Equip Super reserves the right to request further identification documents.

<ul> <li>A certified copy of ONE of the following documents ONLY:</li> <li>Current driver's licence issued under State/ Territory law</li> <li>Passport</li> </ul>	OR	<ul> <li>A certified copy of <b>ONE</b> of the following documents:</li> <li>Birth certificate or extract</li> <li>Citizenship certificate issued by the Commonwealth</li> <li>Pension card issued by Centrelink that entitles the person to financial benefits</li> </ul>
		<ul> <li>A certified copy of ONE of the following documents:</li> <li>Letter from Centrelink regarding a Government assistance payment</li> <li>Notice issued by a Commonwealth, State or Territory Government or local council within the past twelve months that contains your name and residential address. For example, an ATO Notice of Assessment or a Rates Notice from your local council</li> </ul>

#### Change of name

If you have changed your name, you must provide a certified copy of the relevant name change document, for example, a marriage certificate, deed poll, decree nisi/divorce order or change of name certificate issued by the Births, Deaths and Marriages Registration office.

#### Make sure your documents are correctly certified

All copied pages of ORIGINAL supporting documents or proof of identity documents need to be certified as true copies by an individual approved to do so.



#### The authorised person 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', then
- · Sign, print their name, qualification (eg Justice of the Peace, Australia Post employee etc) and registration number (if applicable), then

• Full time teacher (school or tertiary)

State/Territory or local government

(with two years' experience)

(with two years' service)

· Bank/credit union/building society officer

· Permanent employee of a Commonwealth,

· Date their certification (must be within 12 months of receipt)

Common people used to certify proof of identity documents:

- Pharmacist
- · Justice of the Peace
- Notary Public
- Medical practitioner or nurse
- Police officer

# 5 – Sign the form

#### By signing this form I:

- · acknowledge I have read and understood this form.
- acknowledge I have received the information I require to make the choices I have made.
- authorise Equip Super to process my payment request as instructed on this form.

Signature

Date (ddmmyyyy)					

Please return your completed form to Equip Super, GPO Box 4303, Melbourne VIC 3001

# **Need help?**

1800 682 626 0 equipsuper.com.au Equip Super, GPO Box 4303, Melbourne VIC 3001

Accountant (CA/CPA)

· Financial planner (Officer with or

(with two years' experience)

Authorised Representative of an

Australian Financial Services Licensee)

Legal practitioner

Issued by Togethr Trustees Pty Ltd ABN 64 006 964 049 AFSL 246383 as trustee for Equipsuper ABN 33 813 823 017 USI 33 813 823 017 000 EQ379\_Form\_BP\_Lifetimepension\_181224

