Benefit payment application

About this form

This form can be used to arrange a lump sum payment from your Equip Super account to another super fund or directly to you. There are different benefit payment forms if you are seeking other payment types, such as financial hardship or compassionate grounds, or for a payment from a Retirement Income or Transition to Retirement Income account. See our website for further details.

Preservation rules

Super benefits are subject to preservation rules set by government law. This means that you may not be able to access some or all of the money in your Equip Super account until you reach your preservation age listed in the table below:

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

Proving your identity

The law requires Equip Super to verify the identity of members to safeguard member benefits. The accompanying form outlines when and how you need to provide proof of identity documents to support your application.

Please note that if you need to change the name on your account, you will need to provide a linking document. This document proves a relationship between two (or more) names. Suitable linking documents are a certified copy of a marriage certificate, deed poll or change of name certificate from the Births, Deaths and Marriages Registration Office.

Tax file number

Equip Super is authorised to request your tax file number (TFN) under the Superannuation Industry (Supervision) Act 1993 (SIS). Providing your TFN to Equip Super is optional, but if you don't, your benefit payment may be taxed at the highest marginal rate. For further details on providing your TFN, please see our website or the *Product Disclosure Statement (PDS)* applicable to your membership.

Important information for benefit payments

Benefits are usually processed within five business days of Equip Super receiving a fully completed and signed application along with the correct proof of identity documents. The payment may take longer if we need to collect further information from you.

The unit price applied to your benefit payment will be the latest price available on the day your benefit is processed. You cannot nominate a processing date for your payment.

If you do not provide correct bank account details, we will pay your benefit by cheque, if possible.

If your account is closed as a result of this application and we receive further contributions for you from a participating employer, a new account will be established for you.

For further information about tax, preservation rules or your benefit payment options, please see our website or the PDS applicable to your membership.

Insurance cover

If you are applying for the full balance of your account, any insurance cover on your account will cease from the date your account is closed.

Get advice

Equip Super wants to help its members make good decisions about their super. Before withdrawing your benefit, we encourage you to seek professional financial advice to help you make the right decision for your needs.

As part of your Equip Super membership, you have access to Equip Financial Planning, who can provide you with advice about your specific circumstances.

You can speak to Equip Financial Planning by calling **1800 065 753** or go to our website to book an appointment.

Need help?

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

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as trustee for Equipsuper ABN 33 813 823 017 USI 33 813 823 017 000

EQ450_Form_BP_040926

Benefit payment application

Equip Super

1 – Your member details

Please complete in pen using CAPITAL letters

Member number

Title
Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other ☐

Sex
Male ☐ Female ☐

Date of birth (ddmmyyyy)

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

2 – Your tax file number (TFN) - don't pay more tax than you have to

Your TFN is confidential and you don't have to give it to Equip Super. However if you are under age 60, you may pay more tax than you have to if you don't supply it. For more information about providing your TFN, please see our *Product Disclosure Statement (PDS)*.

☐ **My TFN is:** ___ - ___ - ___ **OR** ☐ I've already provided my TFN to Equip Super

OR ☐ I choose not to provide my TFN

3 – Payment options

☐ I want the funds to be paid directly to me *(indicate amount below and go to step 4)*

- ☐ Whole account balance
- ☐ Partial amount of **$** ☐ , ___ , ___ **.00** *(net of tax)*
- ☐ Partial amount, leaving a minimum of $6,000 to keep my account open

and/or

☐ I want to roll over to another fund *(indicate amount below and go to step 5)*

- ☐ Whole account balance
- ☐ Partial rollover of **$** ☐ , ___ , ___ **.00**
- ☐ Partial rollover, leaving a minimum of $6,000 to keep my account open

Please note that if you are electing both payments, the payment to you will be processed first.

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4 – Cash withdrawal

(a) Residency declaration

If the statement below does not apply to you, please contact us as you may not be using the correct form.

☐ I am an Australian citizen/permanent resident or a New Zealand citizen

(b) Eligibility for a cash withdrawal

Your benefit may consist of preserved and/or non-preserved components. To enable us to determine these components and to confirm your eligibility for a cash withdrawal, please select any options that apply to you:

☐ I am aged 65 or older

☐ I am aged 60 to 64 and have ceased employment since turning 60

☐ I have reached my preservation age, have ceased employment and do not intend to be employed again

☐ My benefit is less than $200 (before tax) and I have ceased employment

☐ I wish to withdraw from my *unrestricted non-preserved benefits*

☐ My benefit contains *restricted non-preserved benefits* and I have ceased the employment that gave rise to that amount

☐ I have permanently retired early due to disablement, invalidity or terminal illness. Equip Super will require supporting evidence. For further information, please contact us on **1300 721 139.**

(c) Cash withdrawal payment method

☐ Send a cheque to the postal address I have noted on this form; or

☐ Transfer this payment electronically to my bank 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

☐ I have attached a copy of a bank statement that shows the account name, BSB and account number.

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5 – Roll over to another Equip Super account or to another fund

If you are transferring an amount to another Equip Super account, simply write *Equip Super* in the Fund name field and the relevant *member number* in the member number field. Please note you can't transfer funds to a Retirement Income or Transition to Retirement Income account that has already commenced. If you are rolling over to another fund, please ensure you provide all details below to avoid any processing delays.

Fund name

Postal address of new fund

Suburb | State | Postcode

Fund Australian Business Number (ABN)* | Unique Superannuation Identifier (USI) | Member number (if known)

*** If your fund does not have an ABN, you should attach their complying fund letter to avoid any delays in processing your request.**

Is the fund a self-managed super fund (SMSF)?

☐ No – go to step 6

☐ Yes – provide SMSF bank details below:

Name of bank, building society or credit union | BSB

SMSF account name | Account number

☐ I have attached a copy of an SMSF bank statement that is less than 6 months old and shows the SMSF account name, BSB and account number.

SMSF electronic service address

6 – Investment choice

If you have made an investment choice and are requesting a partial withdrawal or rollover, you can nominate below how your payment/s are drawn from your investment options. If you don't, your payment/s will be withdrawn in proportion to the balance in each investment option at the time of payment.

Diversified investment options		**Single Sector investment options**	
Growth Plus	**%**	Australian Shares	%
Growth	**%**	Overseas Shares	%
Balanced Growth	**%**	Diversified Fixed Interest	%
MySuper	**%**	Cash	%
Balanced	**%**		
Capital Stable	**%**		
Index Diversified	**%**		

Must total 100%

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7 – Proving your identity

To protect your super, you need to prove your identity when you withdraw a benefit or move money between super funds. For information about the documents you can provide and who can certify them, go to **equipsuper.com.au/identity**.

(a) For transfers within Equip Super or to another super fund, you can authorise Equip Super to use your TFN

☐ I authorise Equip Super to use my TFN to verify my identify with the ATO.

I understand that if my TFN is unable to be verified, Equip Super will require me to provide certified copies of proof of identity documents before my benefit payment request can be processed.

(b) For all other payments including cash withdrawals or if you don't want to use your TFN for identification purposes, you must provide certified proof of identity documents

☐ I have attached certified proof of identity documents in accordance with the information on the last page of this form.

8 – Splitting contributions with your spouse?

Should you wish to split your super contributions with your spouse for the current or previous financial years, you will need to complete and return a *Split your contributions* form available on our website or by contacting us.

If you are closing your Equip Super account, you should ensure your contribution split request is processed before this form. If you are leaving the account open, you should ensure there is sufficient concessional or non-concessional contribution balances remaining to be able to process your contribution split later.

☐ Tick here if you have lodged a split request recently with Equip Super or if you have attached one to this form.

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.

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.

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9 – Proof of identity

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.

☐ A certified copy of **ONE** of the following documents **ONLY**:

- Current driver's licence issued under State/ Territory law
- Passport

OR

☐ A certified copy of **ONE** of the following documents:

- Birth certificate or extract
- Citizenship certificate issued by the Commonwealth
- Pension card issued by Centrelink that entitles the person to financial benefits

AND

☐ A certified copy of **ONE** of the following documents:

- Letter from Centrelink regarding a Government assistance payment
- 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

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.

Certified true copy
J. Sample
Mr John Sample
Justice of the Peace
Registration No.123456789
Date: 01/01/2020

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
- 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
- Accountant (CA/CPA)
- Legal practitioner
- Financial planner (Officer with or Authorised Representative of an Australian Financial Services Licensee) (with two years' experience)
- Full time teacher (school or tertiary)
- Bank/credit union/building society officer (with two years' experience)
- Permanent employee of a Commonwealth, State/Territory or local government (with two years' service)

10 – Sign the form

By signing this form I:

- authorise my benefit to be paid by Equip Super as instructed on this form
- understand when my full benefit is paid, Equip Super shall be released from all claims, liabilities and obligations
- understand any insurance arrangements with Equip Super will cease from the date that the full benefit is paid
- understand there may be a delay in processing my payment request if I do not provide correct and complete proof of identity documents or if I authorised Equip Super to use my TFN to verify my identity with the ATO and Equip Super was unable to do so.

Signature

X

Date (ddmmyyyy)

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

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