# Third party authority



#### **About this form**

This form authorises Equip Super to provide your account information to a person you nominate as your nominee, such as your attorney (under Power of Attorney), accountant, financial planner etc.

Equip Super members have access to financial advice through the Fund. Equip Super can help you understand how to consolidate your super accounts, apply for additional insurance cover or start a Retirement Income or Transition to Retirement account. All of these products and services can be obtained at competitive prices through 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
Postal address (must be provided)	
Suburb	
State Postcode Country (if not Australia)	
Business hours phone After hours phone	Mobile
The route priorie	
Email	
2 - Nominee details	
First name of nominee	Last name of nominee
Company name (if applicable)	
Relationship to member	please specify
Financial planner Accountant Power of attorney	Other
Postal address of nominee	
Suburb	
State Postcode Country (if not Australia)	
Business hours phone Fax	Mobile
Email	
Nominee's signature	Date (ddmmyyyy)
X	

## Need help?







#### 3 - Terms and conditions

- 1. You may appoint a nominee to request information in relation to any of your Equip Super accounts on your behalf. The authorisation is not effective until we receive this completed form.
- 2. Once Equip Super receives this fully completed form, we will provide your nominee with requested information as if the request for information was made by you.
- 3. You agree that you must give us 14 days written notice if you wish to terminate this authority.
- 4. Equip Super is not responsible for any loss or delay which results from Equip Super providing information to your nominee.
- 5. You agree to release, discharge and indemnify Equip Super from and against all actions, claims, demands, expenses and liabilities (however they arise), suffered by you or suffered by or brought against Equip Super, in respect of information given by Equip Super to your nominee.

### **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.

## 4 - Sign the form

By signing this form I:	
• confirm that I have read and agree to the terms and conditions of use in appointing the nominee in section 3 of this form	
Signature	Date (ddmmyyyy)
X	

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

Need help?







