

Roll your super into Equip



It's simple: Complete this form, return it to us and we'll do the rest.

You should check whether your previous fund will charge you any exit or withdrawal fees, or how other benefits may be affected. For example, if you close your account any insurance cover you hold will cease. You may be eligible to transfer this cover to Equip, contact us if you wish to do that.

1 – Your member details

Please complete in pen using CAPITAL letters

| | | | |
|---|---|----------------------------|----------------------|
| Title | Sex | Date of birth (ddmmyyy) | Member number |
| Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="checkbox"/> | Male <input type="checkbox"/> Female <input type="checkbox"/> | <input type="text"/> | <input type="text"/> |
| First name | Last name | | |
| <input type="text"/> | <input type="text"/> | | |
| Residential address | | | |
| <input type="text"/> | | | |
| Suburb | | | |
| <input type="text"/> | | | |
| State | Postcode | Country (if not Australia) | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Business hours phone | After hours phone | Mobile | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Email | | | |
| <input type="text"/> | | | |

2 – Other fund details

| | | |
|----------------------|---------------------------------------|---|
| Fund name | | |
| <input type="text"/> | | |
| Fund phone number | Fund Australian Business Number (ABN) | Fund Unique Superannuation Identifier (USI) |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Member number | | |
| <input type="text"/> | | |

3 – Amount to transfer

- Close the account and transfer the whole balance to Equip.
- Leave the account open, but transfer this amount to Equip: \$, , .

4 – Previous name or address (if your other fund held different details for you, noting them here may help avoid transfer delays)

| | | |
|--|----------------------|----------------------------|
| Other previous name/s | | |
| <input type="text"/> | | |
| Previous street address (if the details with your other fund are different to those above) | | |
| <input type="text"/> | | |
| Suburb | | |
| <input type="text"/> | | |
| State | Postcode | Country (if not Australia) |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Need help?

☎ Call us on 1800 682 626 or 🌐 www.equipsuper.com.au 📍 Equip, GPO Box 4303, Melbourne VIC 3001

Issued by Togethr Trustees Pty Ltd ABN 64 006 964 049 AFSL 246383 as trustee for Equipsuper Superannuation Fund ABN 33 813 823 017 USI 33 813 823 017 000

5 – Proving your identity

To protect your super, you need to prove your identity when you move money between super funds.

Use my tax file number to identify me: - -

By choosing this option, you are authorising us to pass your TFN to your other super fund who will use it to confirm your identity with the Australian Taxation Office. Your TFN is confidential and you don't have to give it to Equip, however you may pay more tax than you have to if we don't have it and you will need to provide certified proof of identity documents to transfer super between funds. For more information about providing your TFN, please see your *Product Disclosure Statement (PDS)*.

I have attached certified proof of identity documents

For information about the documents you can provide and who can certify them, go to www.equipsuper.com.au/identity. This form and the identity documents you provide will be sent to your other fund so they can process your request.

Privacy

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

We collect, use and disclose personal information about you in order to manage your superannuation benefits and give you information about your super. We may also use it to supply you with information about the other products and services offered by us and our related companies. If you do not wish to receive marketing material, please contact us on 1800 682 626. You can also manage your communication preferences via Equip's secure website or by following any instructions in the emails we may send you.

Equip's Privacy 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, will also handle your personal information. You can view Mercer's Privacy Policy online at www.mercer.com.au/privacy.html.

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.

6 – Sign the form

By signing this form I:

- declare I have read and understood this form and the information I have provided is complete and correct;
- am aware I may ask my super providers for information about any fees and charges that may apply and about the effect this transfer may have on my benefits (such as insurance in my previous fund);
- understand that on payment by my previous super fund, I discharge that super fund from any further liability in respect of the amount transferred;
- authorise Equip (and its agents) to contact my previous super fund regarding this request to combine that account into Equip.

Signature

Date (ddmmyyyy)

This form does not change the fund to which your employer pays your future contributions. To choose Equip for your future contributions, simply download and complete a *Choice of Fund* form from our website or contact us for a copy.

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

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