

Benefit Application

This form can be used to arrange a lump sum payment from your AGEST account to another super fund or directly to you.

Important notice

Please note the following before you complete this form:

- ▶ AGEST's Product Disclosure Statement (PDS) contains important information regarding your AGEST benefits. You should read the PDS before making an investment decision.
- ▶ AGEST handles your personal information in accordance with a set of National Privacy Principles. AGEST's privacy policy is available in our PDS, on our website or you can call us for a copy.
- ▶ Benefit payments from your account may impact any insurance cover you have in AGEST.
- ▶ The unit prices used to update your account can go up or down depending on movements in investment markets. You can view the latest daily unit prices and our unit pricing fact sheet online at www.agemst.com.au or by contacting us on 1300 724 378.
- ▶ You are not able to nominate a benefit payment or processing date. Benefits are usually processed within five days of AGEST receiving this form providing it is fully completed, signed and dated and correct identification provided. The payment may take longer if we need to collect further information from you to process your application.

Providing us with your Tax File Number (TFN)

You do not have to provide your TFN but if you don't your superannuation benefit may be taxed at a higher rate than necessary when you withdraw your benefit from the fund.

Further details on providing your TFN are located in AGEST's Product Disclosure Statement (PDS). Your TFN can be provided on the form attached, through our secure online service or by calling us.

Eligibility for cash withdrawals

You are eligible to have a benefit paid directly to you if:

- ▶ Your total benefit is less than \$200 and you have ceased employment.
- ▶ You have reached your preservation age (currently 55 for people born before 1 July 1960) and are permanently retired from the workforce.
- ▶ You are aged 60 or more and have ceased employment.
- ▶ You are aged 65 or more.
- ▶ You have permanently retired early due to invalidity or disablement.
- ▶ You have some existing unrestricted non-preserved benefits
- ▶ you have some restricted non-preserved benefits and have ceased the employment that gave rise to those restricted non-preserved benefits (The components of your benefit are shown on each AGEST member statement).

Most pension members can withdraw money from their account at any time however, some members that have established accounts since July 2005 have elected to establish an account with preserved money.

This means that their pension may currently be non-commutable or contain a non-commutable component. Non-commutable basically means that cash withdrawals cannot be made from the account (or from the component of the account that is non-commutable) until one of the above 'conditions of release' are met.

Eligibility for rollovers

Generally speaking, there are no restrictions on transferring a benefit from AGEST to another fund.

Before you lodge this form, you should considering checking with your other fund that they will accept a rollover from AGEST.

If you are transferring an amount to a self-managed super fund (SMSF), please make sure you review the SMSF information in section 5.2 of this form and provide the relevant supporting documentation.

Proving your identity

The law requires AGEST to verify the identity of members to safeguard member benefits. The accompanying form outlines when you need to provide proof of identity documents to support your application. If you have any questions, please contact us before returning your application as this will help avoid processing delays.

Please note that any proof of identity documents you provide will need to be certified as true copies by an individual approved to do so.

Below is a small list of the most commonly provided proof of identity documents and the most commonly used people who are authorised to certify your any supporting documents you need to provide with this application. If you are unable to satisfy these lists you can review expanded lists at www.agemst.com.au/id or contact us on 1300 724 378.

Common proof of identity documents

One of the following documents only:

- ▶ **Current** Driver's licence issued under State or Territory law
- ▶ Passport

----- OR -----

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

One of the following documents:

- ▶ Letter from Centrelink regarding a Government assistance payment
- ▶ Notice issued by Commonwealth, State or Territory Government or local council within the past 12 months that contains your name and residential address. For example, an ATO Notice of Assessment or a Rates Notice from your local council

Certified documents

All copied pages of **ORIGINAL** proof of identification documents, including any linking documents (see below), need to be certified as true copies by an individual approved to do so. They 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 date.

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
- ▶ 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)

Linking documents

A linking document is a document that proves a relationship between two (or more) names. The table below outlines when a certified copy of a linking document is required.

Purpose:	Suitable linking documents:
Change of name	Certified copy of a Marriage certificate, deed poll or change of name certificate from the Births, Deaths and Marriages Registration Office.
Signed on behalf of applicant	Certified copy of Guardianship papers or Power of Attorney.

1. PERSONAL DETAILS

Please tick this box if the statement applies to you: **I am an Australian Citizen/Permanent Resident or a New Zealand citizen.**

If this statement does not apply to you, please contact us on 1300 724 378 as you may not be using the correct form.

Membership number

Title (please tick)

Miss Ms Mrs Mr Dr

First name(s)

Family name

Date of birth

Gender

F M

Telephone numbers

Home

Work

Mobile

Email address (work or home)

Residential address (AGEST requires this by law to authorise a payment)

Suburb/Town

State/Territory

Postcode

Country (if not Australia)

Postal address (if different to residential address)

Suburb/Town

State/Territory

Postcode

Country (if not Australia)

Do you expect further contributions to be received into this account?
(not applicable for pension members)

No Yes, if yes, when (approximately)

Do you want us to hold and review/process this application after the expected contribution date? Yes No

2. YOUR TAX FILE NUMBER (TFN)

You do not have to provide your TFN to AGEST, but if you don't your superannuation benefit may be taxed at a higher rate than necessary when you withdraw your benefit from the fund. Further details on providing your TFN are located in AGEST's Product Disclosure Statement (PDS).

I have already provided my TFN to AGEST for this member account.

I choose not to provide my TFN.

I choose to provide my TFN - it is

3. PAYMENT OPTIONS

I am closing my AGEST account OR I am leaving my AGEST account open

(Pension members must leave sufficient funds in their account to pay the regular pension payments remaining in the current financial year. Other members should maintain a minimum balance of \$1,500).

Please make my payment as follows:

(a) **Cash withdrawal (payment to me)** - Please indicate the amount directly below and complete sections 4 and 6
my full account balance OR the following amount: \$

(b) **rollover to another fund** - Please indicate the amount directly below and complete sections 5 and 6
my full account balance OR the following amount: \$

PLEASE NOTE

If you are closing your account and requesting a payment to you **AND** a rollover to another fund, you need to complete sections 4, 5 and 6. You should also indicate below which amount is to be processed first.

I would like the following payment to be processed first: **Payment to Me** **Rollover to another fund**

The remaining balance will be paid according to your second instruction. If you do not choose an option below, we will process the payment to you first.



4. PAYMENT TO ME (CASH WITHDRAWAL)

4.1 Eligibility for a cash benefit

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 tick any of the following statements that apply to you:

- | | |
|---|--|
| <input type="checkbox"/> I am applying to withdraw from my standard AGEST pension | <input type="checkbox"/> My AGEST benefit contains a restricted non-preserved amount and I confirm that I have ceased the employment that gave rise to that restricted amount. |
| <input type="checkbox"/> My AGEST benefit is less than \$200 (before tax) and I have ceased employment. | <input type="checkbox"/> My AGEST benefit contains an unrestricted non-preserved amount and I wish to make a withdrawal of some or all of that amount. |
| <input type="checkbox"/> I declare that I am aged 55 to 59 and have ceased employment and do not intend to be employed again. | <input type="checkbox"/> I declare that I have permanently retired early due to disablement, invalidity or terminal illness. You will need to complete and attach our Certificate of Invalidity/Incapacity form. You can download this from our website or contact us for a copy. If you have insurance cover in AGEST and wish to lodge a claim on it, you will also need to complete our insurer's claim forms. Please contact us on 1300 724 378. |
| <input type="checkbox"/> I declare that I am aged 60 to 64 and have ceased employment. | |
| <input type="checkbox"/> I declare that I am aged 65 or more. | |

4.2 Payment method

- Please transfer this payment to the same bank account used for my regular pension payments (**for payments from pension accounts only**), or
- Please send a cheque to the postal address I have noted on this form, or
- Please transfer this payment electronically to my bank account as follows:

Bank/Financial institution name <input type="text"/>	Bank address <input type="text"/>
<input type="text"/>	<input type="text"/>
BSB number <input type="text"/>	Suburb/Town <input type="text"/>
<input type="text"/>	<input type="text"/>
Account number <input type="text"/>	State/Territory <input type="text"/> Postcode <input type="text"/>
<input type="text"/>	<input type="text"/>

To safeguard your benefit payment, please ensure that the bank account you nominate is held in your name or in a joint account that includes your name. AGEST takes no responsibility for amounts transferred according to the information you have provided above. Please note that if our electronic payment to the above account is unsuccessful, we will draw a cheque payable to you and send it to the postal address you have noted on this form.

4.3 Investment Choice (Not applicable if you are closing your AGEST account)

If you have previously chosen to invest your AGEST account balance in more than one investment option, you should complete this section to indicate from which investment option/s this payment is to be withdrawn. If you do not complete this section your payment will be withdrawn from your investment option/s in proportion to the balance of each investment option at the time of withdrawal.

Pre-Mixed options

Growth	\$	<input type="text"/>	■	<input type="text"/>
Balanced	\$	<input type="text"/>	■	<input type="text"/>
Moderate	\$	<input type="text"/>	■	<input type="text"/>
Stable	\$	<input type="text"/>	■	<input type="text"/>
Conservative	\$	<input type="text"/>	■	<input type="text"/>
MultiStrategy	\$	<input type="text"/>	■	<input type="text"/>

Single-Sector options

Australian Shares	\$	<input type="text"/>	■	<input type="text"/>
International Shares (Hedged)	\$	<input type="text"/>	■	<input type="text"/>
International Shares (Unhedged)	\$	<input type="text"/>	■	<input type="text"/>
Listed Property	\$	<input type="text"/>	■	<input type="text"/>
Fixed Interest	\$	<input type="text"/>	■	<input type="text"/>
Cash	\$	<input type="text"/>	■	<input type="text"/>



6. PROOF OF IDENTITY AND AUTHORISATION

The cover page of this application includes important information about providing proof of identity documents to support your benefit application. Any documents you provide **must** be certified as true copies by a person authorised to certify documents. Read on for more information.

Do I need to provide certified proof of identity documents with this benefit application?

For most benefit applications, the answer is **YES**. To safeguard member benefits, AGEST must verify the identity of its members before processing certain requests. The safest and quickest option is to provide certified proof of identity with every benefit application you lodge.

You *must* provide certified proof of identity documents if:

- ▶ you are rolling over any amount to a self-managed super fund;
- ▶ your account balance is \$1,000 or more and you are requesting to close your account by withdrawing or rolling over the **full balance**.
- ▶ your name, date of birth or address details noted on this application are different to the details recorded on your AGEST account.

You can check your account balance or account details by logging in securely to your AGEST account online or by calling us on 1300 724 378.

Please note that we do not require any proof of identity documents if you are closing your AGEST account and the balance is less than \$1,000 when we process the benefit. AGEST *may* also process other benefit applications without receiving certified proof of identity documents on each occasion *if* we already hold valid certified proof of identity documents for you and you are requesting a payment to be made to the same address, bank account or rollover fund as a previously approved payment. We reserve the right to contact you to verify your application or to request certified proof of identity documents at any time. If you wish to avoid any verification delays, we recommend you provide certified proof of identity with all benefit payment requests. If you have any questions, please contact us on 1300 724 378.

6.1 Proof of Identity checklist

A certified copy of one of the following documents ONLY:

- ▶ **Current** driver's licence issued under State or 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 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.

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. They 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 date.

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
- ▶ 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)

6.2 Authorisation

By signing this request form I am making the following statements:

- ▶ I declare that, to the best of my knowledge, the information I have provided on this form is true and correct.
- ▶ I authorise AGEST to transfer and/or pay a benefit as instructed on this form.
- ▶ I discharge the Trustee of AGEST from all further liability in respect of the benefits paid and transferred.
- ▶ If I have insurance cover, I understand that such cover will cease for any event occurring on or after the date the full account balance is paid.

Signature

Date

Please send this form to:

AGEST Administration
Locked Bag 20
Wollongong NSW 2500

