

Pension division application

Accompanying the Pension division Product Disclosure Statement (PDS) - issued 1 October 2020



Please return this completed form ensuring you have completed Proof of Identity requirements shown in Section 9 and, if you are under age 60, a *Tax File Number Declaration form* to: **Club Plus Super Administration, Locked Bag 5042, Parramatta NSW 2124.**

If you would like to do any of the following, please complete these actions **BEFORE** you open a pension account:

- Include money from another super fund in your Pension
- Claim a tax deduction on any personal contributions you have made into Club Plus Super
- Split contributions with your spouse

Please complete in black ink using BLOCK letters. This request will be invalid if not signed and dated.

Section 1: Personal details

Club Plus Super member number

Date of birth (DD/MM/YYYY)

Gender

 Male Female

Please provide proof of birth date. See page 3 of this form.

Title: Mr/Mrs/Ms/Miss/Other

Surname

Given name(s)

Postal address

Suburb/Town

State

Postcode

Residential address (if different to postal address)

Suburb/Town

State

Postcode

Phone number

Mobile number

Email

Section 2: Your pension (please tick the box that describes your circumstances)

1 I have reached my preservation age and advise that I retired permanently from the workforce on:

Date (DD/MM/YY)

2 I am over age 60 and under age 65 and have ceased employment with the employer who was making payments to Club Plus Super on my behalf as of:

Date (DD/MM/YY)

3 I am over age 65

Section 3: Amount to be transferred to Club Plus Pension

Do you want to invest your whole Club Plus Super account balance or part of your account balance?

Whole amount - close my Club Plus Super account. An amount of \$

The maximum amount while keeping my Club Plus Super account open with a minimum balance of \$6,000.

Please note: If you have money from another superannuation fund that you want to include in your Pension, that amount must be transferred to Club Plus Super prior to commencing your pension.

Pension division application (cont.)

Section 4: Investment Choice

Before making a choice, please read the 'Choosing your investments' information in the Pension division PDS.

You may nominate to invest your pension balance in one of the below options, or in a combination of the investment options. I would like the balance of my Pension account to be invested in the following investment options:

Cash	Conservative Balanced	Balanced	Growth	Australian Shares	TOTAL
<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
					Total must equal 100%

Section 5: Withdrawal choice

Before making a choice, please read the 'Choosing your investments' information in the Pension division PDS.

Please nominate the investment options from which your regular pension payments will be withdrawn (only options you have selected in section 4 can be chosen here).

Cash	Conservative Balanced	Balanced	Growth	Australian Shares	TOTAL
<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
					Total must equal 100%

Please note: If you do not make a choice, your pension payments will be withdrawn from the same investment option(s) and in the same proportions as you have nominated in section 4.

Section 6: Payment instructions

Please provide the details of the bank, building society or credit union account that you wish your pension to be paid to.

Account name

Bank/Building Society/Credit Union name

BSB number

Account number

Section 7: Frequency and amount of Pension

Please read the section titled 'Choosing your pension amount and frequency' in the Pension division PDS prior to completing this section. Any nominated amount will be the gross pension payable. **The actual after-tax pension may differ depending on your personal tax rate.**

Please tick the box corresponding to the **pension payment frequency** you require and **nominate the payment amount** per period: If you would prefer not to nominate an amount you may nominate a "Minimum", which will be the age-based legislated percentage of your account balance.

<input type="checkbox"/> Twice monthly Payment will be made on the 5th and 20th of each month	<input type="checkbox"/> Monthly Payment will be made on the 20th of each month	<input type="checkbox"/> Quarterly Payment will be made on the 20th of March, June, September and December	<input type="checkbox"/> Half yearly Payment will be made on the 20th of June and December	<input type="checkbox"/> Yearly Payment will be made on the 20th of June
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\$ <input type="text"/>	OR	<input type="checkbox"/> Minimum amount	<input type="checkbox"/> Prorated Minimum
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Gross payment amount

Pension division application (cont.)

Section 8: Nomination of Reversionary Pensioner

You may nominate a spouse or in some circumstances, a child, as your Reversionary Pensioner. In the event of your death, this person will be entitled to receive the balance of your allocated payments. Refer to the Pension division PDS for more details.

Reversionary Pensioner name

Date of birth (DD/MM/YYYY)

Relationship

Address

Suburb/Town

State

Postcode

Section 9: Proof of identity

Complete option 1 (below) OR option 2 (overleaf):

Option 1: Electronic verification

I authorise the Fund to use the personal information provided below to verify my identity for the purposes of the *Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) Act* using reliable and independent data sources. I understand the Fund uses a third party for this purpose and consent to its use.

Important: Make sure the details you provide are accurate. If your personal details provided in Section 1 do not match your electronic identification details, we will not be able to use your personal details to prove your identity, which will delay processing your pension application. **You must provide your registered street address** in Australia in Section 1: Personal Details if you would like to electronically verify your identity.

You must provide details of at least two of the following documents:

Document 1: Medicare card

Full name as shown on your Medicare card, including initials:

Card number:

Valid to:

I am person number on this card

Document 2: Australian Driver's Licence

First name as shown on your licence:

Surname as shown on your licence:

Australian driver's licence number:

Expiry date:

State of issue:

Pension division application (cont.)

Section 9: Proof of identity (cont.)

Option 2: Provide certified copies of identification documents

I have attached copies of my certified proof of identity with this application, in accordance with the requirements set out below.

All proof of age or identity documentation must be **CERTIFIED** copies of the original (refer example below).
The following documents may be used.

EITHER:

One of the following documents only:

- driver's licence issued under state or territory law which has not expired; or
- current passport, or for a passport issued by the Commonwealth, a passport that expired less than two years ago.

OR

One of the following documents:

- birth certificate or birth 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 federal, state or territory government or local council the past twelve months that contains your name and residential address.
- For example:
- Notice of an ATO assessment
 - Rates notice from a local council

Certification of personal documents

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

The following are some of the people who can certify copies of your originals as true and correct copies:

- | | | |
|------------------------|------------------------|---|
| • Dentist | • Psychologist | • Accountant |
| • Nurse | • Veterinary surgeon | • Teacher |
| • Pharmacist | • Optometrist | • Judge or Magistrate |
| • Medical Practitioner | • Police Officer | • Australia Post employee |
| • Chiropractor | • Justice of the Peace | • Bank, building society or credit union employee |
| • Physiotherapist | • Engineer | |

If you can't access any of these people, the full list of who can certify documents is available at clubplussuper.com.au/tools-forms

Have you changed your name or are you signing on behalf of another person?

If you have changed your name or are signing on behalf of the applicant, you will need to provide a certified linking document. A linking document is a document that proves a relationship exists between two (or more) names.

The following table contains information about suitable linking documents.

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

Example of how to certify identification

Step 1: Take a photocopy of both sides of the original document (see list of documents).

Step 2: Take the photocopy and the original document(s) to an authorised person.

Step 3: The authorised person should state on the front side of each copy:

'This is a true and correct copy of the original.'

The authorised person should write on each copy their:

- full name;
- qualification (from list above);
- registration number (if applicable); and
- signature and date.



Pension division application (cont.)

Section 10: Nomination Beneficiary (if you have not nominated a Reversionary Pensioner)

You can nominate beneficiaries that you wish to be considered for payment of your entitlements in the event of your death.

Please note: percentages must be whole numbers and the total of all beneficiaries must sum to 100%.

Surname	Given names	Relationship (e.g. wife, husband, son)	Portion of benefit
			%
			%
			%
TOTAL			100%

Please note: If you wish to make a binding death nomination, please complete a Binding death nomination form instead of the section above. This form is available at clubplussuper.com.au/tools-forms.

Section 11: Privacy

The personal information provided on this form is collected by and held for Club Plus Super by the fund administrator Australian Administration Services (AAS) in accordance with the Australian Privacy Principles of the *Privacy Act 1988 (Cth)*, for the purpose of administering accounts and providing services associated with your membership of the Fund.

You should read the *Privacy Policy* at clubplussuper.com.au before completing the form. Call us on **1800 680 627** for a hard copy of the Policy. The Policy contains information about how personal information is collected, used and disclosed, how you can correct your personal information, make a complaint about a privacy breach and other important information about safeguards in place to protect your personal information.

By providing your information, you acknowledge that you have read and understood the *Privacy Policy*.

Section 12: Applicant's declaration

I hereby apply for a Pension with Club Plus Super. I confirm that I have personally received (including an electronic version issued or a print out of it, accompanied by or attached to this application form) and read and understood the Pension division PDS.

I acknowledge that this application is subject to the terms and conditions of the PDS.

- I am a citizen or permanent resident of Australia or a citizen of New Zealand.
- The information provided on this application form is true and correct.
- I understand that the pension will operate in accordance with the rules contained in the Club Plus Superannuation Trust Deed dated 27 February 1987, as amended from time to time, and the relevant Commonwealth Government Laws pertaining to superannuation and taxation. I agree to be bound by the provisions of the Club Plus Superannuation Trust Deed.
- I understand that Club Plus Super may deduct taxation from regular pension payments and any lump sum payments in accordance with Commonwealth Government taxation laws, and based on the information that I have provided.

- I understand that pension payments will be paid to my nominated bank, building society or credit union account on the dates nominated above.
- I understand that I have 14 days from the date that you confirm my membership to withdraw my application at no cost (Cooling Off period). After the Cooling Off period, I may withdraw my entire balance from Club Plus Super at any time, and there will be no charge to me to receive this payment.
- I agree to be notified of changes of details relating to my pension through the website and member communications.
- I agree that neither I nor any other person claiming through me has any claim against Club Plus Superannuation Pty Limited in relation to a payment made or action taken by Club Plus Superannuation Pty Limited if the payment or instruction is made in accordance with the relevant conditions and includes instructions that are later shown to have been made by me.
- I acknowledge and agree that Club Plus Superannuation Pty Limited has not expressed any opinion as to the appropriateness of any particular investment in the circumstances of any particular member.

Member's signature

Date (DD/MM/YY)

Contact us

pension hotline: 1800 204 194
email: member@clubplussuper.com.au
website: clubplussuper.com.au

Club Plus Superannuation Pty Ltd ABN 26 003 217 990, AFSL No. 245362
RSE Licence No. L0000529 as trustee of Club Plus Superannuation Scheme
ABN 95 275 115 088, RSE Registration No. R1000757

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