

# Member Rollover Request Form

# ISPF

Independent Superannuation Preservation Fund

ALL SECTIONS MUST BE COMPLETED

PLEASE  NOT

PLEASE USE BLOCK LETTERS

ISPF Member Number

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**Please provide full details of the superannuation fund to which your benefit is to be rolled:**

**Name of superannuation fund**

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**Address of superannuation fund**

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**Superannuation Fund Number (SFN)**

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**Australian Business Number (ABN)**

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**Your member/policy number**

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**Superannuation Product Identification Number (SPIN)**

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So that we may process your request it is mandatory that you supply the ABN of your chosen fund and either the SPIN or your member/policy number in that fund. These numbers can be obtained from your fund.

If your benefit is being transferred (rolled over) to a self-managed superannuation fund a copy of the fund's trust deed is required.

**Processing of your request will not commence until we have received these details.**

## Personal details

Date of Birth

		/			/				
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Title

	MR		MS		MRS		MISS
--	----	--	----	--	-----	--	------

Gender

	Male		Female
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First Name

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Middle Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Family Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Tax File Number (see Important Information page)

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Your Telephone Number

(			)																
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Mobile Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

## Residential Address

Street Number

--	--	--	--	--

Street Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Suburb/Town

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

\*State

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\*Postcode

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## Postal Address (If same as above, write "as above")

PO Box

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Suburb/Town

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State

--	--	--

Postcode

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PLEASE COMPLETE DETAILS ON REVERSE SIDE

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Independent Superannuation Preservation Fund

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## Checklist

- Have you completed all of the fields on the form?
- Have you signed and dated the form?
- Have you attached your certified identification?
- Have you supplied your Tax File Number?

## Declaration

- I am aware that I may ask the Trustee for all information that I need to understand my benefit entitlements (including information on fees and the effect on my entitlements as a result of this Rollover Request) and I do not require any further information.
- I authorise the Fund to deduct the appropriate rate of tax.
- I discharge the Trustee from any future liability in respect of the benefits paid or transferred.
- I certify that all information given on this form is true and correct.

**By signing below I indicate my agreement to all the statements made in the Member Rollover Request form and I authorise/do not authorise (please indicate) the Trustee to use my TFN for the purposes advised to me in the 'Important Information' section.**

SIGNATURE

DATE

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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PLEASE TURN OVER TO READ THE IMPORTANT INFORMATION PAGE

RETURN COMPLETED FORM TO: ISPF PO BOX 1047 MILTON QLD 4064

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## Identification requirements

We are required by law to obtain proof of your identity before paying any benefit. We must obtain certified copies of the following to prove your identity. If you have international identification documents or are unable to provide the documents sought, please contact us.

## Completing proof of identity

You will need to provide documentation with this transfer request to prove you are the person to whom the superannuation entitlements belong.

The following documents may be used:

### EITHER:

One of the following documents:

- Current Driver's licence issued under State or Territory law
- Current Passport (or expired within the last 2 years)
- 18+ Card

### OR

Two of the following documents (one from each column)

<p>One of the following documents:</p> <ul style="list-style-type: none"> <li>• Birth certificate or birth extract, or</li> <li>• Citizenship certificate issued by the Commonwealth, or</li> <li>• Pension card issued by Centrelink that entitles the person to financial benefits.</li> </ul>	<b>AND</b>	<p>One of the following documents:</p> <p>Notice that contains your name &amp; residential address that was issued by:</p> <ul style="list-style-type: none"> <li>• Commonwealth, State or Territory Government within the past 12 months that records the provision of a financial benefit, for example: Letter from Centrelink regarding a Government assistance payment, or</li> <li>• Australian Taxation Office within the past 12 months that records a debt or refund payable, for example: Tax Office notice of Assessment, or</li> <li>• Notice issued by Local Council or Utilities Provider within the past 3 months that records the provision of services for example: Rates Notice, Electricity or Phone Bill.</li> </ul>
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## Have you changed your name?

If you have changed your name, you will need to provide a certified copy of: Marriage Certificate, Decree Nisi, Deed Poll or change of name certificate from the Births, Deaths & Marriages Registration Office.

## Certification of Documents

All copied pages of ORIGINAL proof of identity documents must be certified as true copies by any individual approved to do so (see below). The person who is authorised to certify documents 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" followed by their signature, printed name, qualification (eg Justice of the Peace, Australia Post employee, etc) and date. The following can certify copies of the originals as true and correct copies:

- A permanent employee of Australia Post with 2 or more years of continuous service;
- An agent of Australia Post who is in charge of an office supplying postal services to the public;
- An officer with 2 or more continuous years of service with one or more financial institutions;
- A finance company officer with 2 or more years of continuous service (with one or more finance companies);
- An officer with, or authorised representative of, a holder of an Australian Financial Services Licence (AFSL), having 2 or more years of continuous service with one or more licensees;
- A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership;
- A notary public officer;
- A registrar or deputy registrar of a court;
- A police officer;

- A Justice of the Peace or Commissioner for Declarations;
- A person enrolled on the roll of a State or Territory Supreme Court or the High Court of Australia, as a legal practitioner;
- An Australian consular officer or an Australian diplomatic officer;
- A judge of a court;
- A magistrate; or
- A Chief Executive Officer of a Commonwealth court.

## Tax File Number (TFN)

You are not obligated to provide your TFN to your superannuation fund. However, if you do not provide your TFN, your benefit may be taxed at the highest marginal tax rate plus the Medicare levy on employer and salary sacrifice contributions made to your account in the year, compared to the concessional tax rate of 15%. Your fund may deduct this additional tax from your account.

If your superannuation fund does not have your TFN, you will not be able to make personal contributions to your superannuation account. Choosing to quote your TFN will also make it easier to keep track of your superannuation in the future.

Under the Superannuation Industry (Supervision) Act 1993, your superannuation fund is authorised to collect your TFN, which will only be used for lawful purposes. These purposes may change in the future as a result of legislative change. The TFN may be disclosed to another superannuation provider, when your benefits are being transferred, unless you request in writing that your TFN is not to be disclosed to any other trustee.

If you choose NOT to provide your TFN:

- Your Fund cannot accept any personal (after tax) contributions on your behalf;
- Benefits paid to you will be subject to PAYG tax at the highest marginal rate, plus Medicare levy (currently 46.5%). (This may be recovered after lodgement of your tax return);
- Your Fund may not be able to locate and amalgamate multiple benefits in the Fund for you; and
- Your taxable contributions received by the Fund may be subject to additional tax of 31.5% (this is in addition to the 15% tax currently applicable on taxable superannuation contributions).

## Providing Information to ISPF - PRIVACY

ISPF has outsourced the administration of the Fund to Independent Fund Administrators & Advisers Pty Ltd ABN 28 081 966 243. This includes all information processing, record keeping and claims management. The information you provide in the benefit payment application will be processed and retained by the Fund's administrator. You will be able to access information ISPF holds about you on request and update any information that is inaccurate or out-of-date.

ISPF's privacy policy will be provided to you on request or is available on the Fund's website at [www.ispf.com.au](http://www.ispf.com.au).

The purpose of collecting the information we have requested is to enable us to pay your benefit. In addition, if there is any dispute about your entitlement, ISPF may disclose information about you to other advisers (for example, legal advisers).

**By signing the benefit payment application, you consent to the disclosure of information about you for those purposes.**

If you do not provide the information required on the benefit payment application, ISPF may be unable to properly administer your benefit payment.