

Withdrawal or rollout

Please complete this form in CAPITAL letters.

Questions? Contact us on 1300 654 720 or smartsave@diversa.com.au.

Superannuation is a long term investment. Before transferring superannuation benefits, or making a withdrawal from Smartsave Member's Choice Superannuation Master Plan, you should consider:

- exit fees and any costs, as well as benefits you may be losing, such as insurance
- if you intend to make an application to split contributions or make a personal deductible contribution claim, please submit before making any withdrawal from Smartsave Member's Choice Superannuation Master Plan (otherwise the contribution split or tax deduction cannot occur).

A CHECKLIST has been provided in Section 11. In order to ensure any withdrawal from Smartsave Member's Choice Superannuation Master Plan can be completed in a timely manner, please ensure that all required documentation is attached to this form.

1. Member details

* Mandatory Fields

Member number*		Date of birth (DD/MM/YYYY)*	
<input type="text"/>		<input type="text"/>	
Title	Given name(s)*		
<input type="text"/>	<input type="text"/>		
Surname*			
<input type="text"/>			
Postal address			
<input type="text"/>			
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Residential address* (if same as postal address, write as above)			
<input type="text"/>			
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone (home)	Phone (work)	Mobile* (If available)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email*			
<input type="text"/>			

- I authorise Smartsave Member's Choice Superannuation Master Plan to update my address and contact details if the details provided above differ to the details currently held.

2. Residency status

Certain conditions apply to temporary residents.

- I am an Australian or New Zealand citizen, or a permanent resident of Australia.
- I am currently or have previously been in Australia on a temporary resident visa, and am applying for a Departing Australia Superannuation Payment (DASP). Refer to, Section 6 and ato.gov.au for requirements.

3. Tax file number (TFN) or exemption*

<input type="checkbox"/> I have already provided my tax file number (TFN) My TFN is below:	OR	<input type="checkbox"/> I do not wish to quote a TFN or exemption reason. My exemption is below:
<input type="text"/>		<input type="text"/>

* We are authorised by law to ask for your TFN, you do not have to provide it but if you don't, you may end up paying more tax than you need to. If your TFN is not quoted, the Trustee is obliged to deduct PAYG Tax from the relevant part of your benefit at the top marginal rate.

4. Withdrawal type

Partial cash withdrawal
\$ _____

▶ Proceed to Section 6, 9 and 10

Full cash withdrawal (account closure)

Partial Rollover
\$ _____

▶ Proceed to Section 5, 6, 7 and 10

Full rollover out (account closure)

IMPORTANT: For cash withdrawals, the amount will be paid out less any applicable fees and taxes. Refer to the Smartsave Member's Choice Superannuation Master Plan for terms and conditions for any disposal of investments necessary. If completing a full or partial rollover of funds to a self managed superannuation fund (SMSF), you must ensure you are registered as a member and trustee on the Australian Tax Office's (ATO) SMSF Trustee/Member Register.

5. Rollover fund details (complete only if you are transferring to another superannuation fund or SMSF)

Fund name

Fund address

Fund ABN

USI or SPIN No

Other Fund Member number

Rollovers to SMSFs ▶ Proceed to Section 9 and Section 10

All other rollovers ▶ Proceed to Section 10

6. Reason for withdrawing

Conditions of release

Please indicate below which withdrawal situation is relevant to you. Superannuation is by legislation preserved until retirement. To access superannuation benefits a condition of release must be met and the Trustee is required to confirm your eligibility to access your superannuation benefits.

I am withdrawing an unrestricted non-preserved amount.

▶ Proceed to Sections 9, 10 and 11

I am over 65 years of age.

▶ Proceed to Sections 9, 10 and 11

I am aged between 55 and 60 (inclusive), have reached preservation age and ceased gainful employment. I have no intention of being in any gainful employment in the future which exceeds 10 hours per week.

Date of retirement: ____/____/____

▶ Proceed to Sections 9, 10 and 11

I have terminated employment with my employer and my superannuation account balance does not exceed \$200.

▶ Proceed to Sections 9, 10 and 11

I am aged between age 60 and 64 (inclusive). I have ceased gainful employment with an employer after turning 60. I have no intention of being in any gainful employment in the future which exceeds 10 hours per week.

▶ Proceed to Sections 9, 10 and 11

I am withdrawing on the grounds of severe financial hardship.

▶ Refer to Section 8 for details. Financial hardship withdrawal forms can be obtained by phoning 1300 654 720 or by emailing smartsave@diversa.com.au

Documents to return with this form

Also refer to ID Requirements fact sheet for:

- Documents required to confirm your identity and how to certify your documents

▶ Certified copy of original identification.

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▶ Certified copy of original identification.
▶ Statutory declaration declaring you have no intention of working again.
▶ Proof of termination of employment.

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▶ Proof of termination of employment.

▶ Certified copy of original identification.
▶ Financial hardship application form.
▶ Proof/evidence of severe financial hardship.

<p>I am withdrawing on compassionate grounds.</p> <p>By completing this option, I confirm I have applied to the ATO for early release of superannuation benefits on compassionate grounds and have provided an approval letter from the ATO. Further information on withdrawing your superannuation on compassionate grounds can be found at ato.gov.au</p>	<ul style="list-style-type: none"> ▶ Certified copy of original identification AND ▶ Letter from the ATO approving the early release of superannuation on compassionate grounds.
<p>I am permanently incapacitated.</p> <p>Permanent incapacity means that I am unlikely, because of ill health (physical or mental) to ever engage in gainful employment of the type for which I am reasonably qualified by education, training or experience. At least two medical practitioners must certify this.</p> <p>Date I last worked: ____ / ____ / ____</p> <p>Phone 1300 654 720 or email smartsave@diversa.com.au for the necessary forms and instructions to be forwarded to you.</p>	<ul style="list-style-type: none"> ▶ Permanent incapacity pack, or ▶ Total and permanent incapacity claim pack.
<p>I am suffering from a terminal medical condition.</p> <p>Two medical practitioners must certify that the illness or injury is likely to result in your death within 24 months. One of the medical certificates must be from a specialist practicing in the area related to your illness or injury.</p> <p>Phone 1300 654 720 or email smartsave@diversa.com.au for the necessary form and instructions to be forwarded to you.</p>	<ul style="list-style-type: none"> ▶ Certified copy of original identification. ▶ Two medical certificates, with one medical certificate being from a specialist practitioner in the area related to your illness or injury.
<p>I am a non-resident and permanently leaving Australia. I can:</p> <p><input type="checkbox"/> Obtain information on requirements to access my superannuation fund balance and ATO held superannuation at ato.gov.au,</p> <p><input type="checkbox"/> Apply online at ato.gov.au to access 'my super'. Online applications are free of charge and can be submitted through the DASP online application system.</p> <p><input type="checkbox"/> Use my TFN when I apply to search and display my superannuation accounts.</p> <p>Note: If your visa information is incorrect online, do not submit your online application. Contact Home affairs using the ato.gov.au link for assistance.</p>	<p>Eligibility requirements include providing:</p> <ul style="list-style-type: none"> ▶ Personal and passport details. ▶ Superannuation member account details, including, ▶ The providers ABN and USI. ▶ Certificate of Immigration Status.
<p>I am transferring my FULL superannuation balance to a Kiwi Saver account in New Zealand. I hold a New Zealand Inland Revenue Department (IRD) number to enable my superannuation transfer.</p> <p>My KiwiSaver scheme must have confirmed they will accept my Australian superannuation transfer.</p> <p>I understand that my payment will be forwarded by cheque and I will provide the payee and address details for my Kiwi Saver account.</p> <p>Further information can be found at ato.gov.au and kiwisaver.govt.nz.</p> <p>Phone 1300 654 720 or email smartsave@diversa.com.au for a KiwiSaver withdrawal form and instructions to be forwarded to you.</p>	<p>Certified copy of original KiwiSaver supporting documents including:</p> <ul style="list-style-type: none"> ▶ Certified copy of original identification. ▶ Proof of residence in New Zealand. ▶ Completed Statutory declaration. ▶ New Zealand IRD number. ▶ KiwiSaver registration number and Member account number.

7. Identification requirements*

- CERTIFIED copies of my original identification have been provided within the last 12 months and are held on my member account.
- I have attached a CERTIFIED copy of original identification to this withdrawal.

* The Identification Requirements Factsheet providing details of documents required to confirm your identity and how to certify your documents is available on the Secure Online Portal.

8. Financial hardship

To be eligible to claim severe financial hardship and be entitled to the early release of certain superannuation benefits you must prove that you are unable to meet reasonable and immediate family expenses.

The Trustee requires the following to determine your eligibility:

- Completion of the severe financial hardship withdrawal form.
- Evidence from Centrelink or the Department of Veteran Affairs confirming your Customer Registration Number (CRN) and that you have been receiving income support for 26 consecutive weeks and are still receiving payments. This evidence will either be provided by a Q230 letter or a Q251 letter. This letter must be less than 21 days old at the time of application.
- Income and expenditure Information including certified copies of outstanding bills and any unpaid invoices and information to verify your immediate financial hardship claim amount.

Phone 1300 654 720 or email smartsave@diversa.com.au for the necessary form and instructions if you believe you meet the above criteria.

IMPORTANT: Only one lump-sum payment for financial hardship can be made in any 12 month period. The minimum amount that can be paid is \$1,000 (unless your superannuation account balance is less than this amount) and the maximum amount payable is \$10,000.

9. Payment details

- I would like payment made into my personal bank account by electronic funds transfer (EFT).
- I would like payment made into my SMSF bank account by EFT.

Cash payment bank account details

IMPORTANT: To enable payment directly into the bank account as cleared funds.

The Trustee will need to confirm your bank details for this payment to proceed.

- ▶ Please attach a CERTIFIED copy of the top of the bank statement funds are being paid to, showing the full name and account details to verify the information entered above.
- ▶ The Trustee will retain the CERTIFIED identification and bank statement details for 12 months prior to requiring an updated copy.

Any personal payment to your bank account will be paid less any applicable fees and taxes.

- I have provided details of the bank account and a certified copy of the top of my personal or SMSF bank account statement within the last 12 months
- My personal bank account details are noted below, and I have attached a certified copy of the top of my personal bank account (held in my name or joint names).
- The SMSF bank account details are noted below and I have attached a certified copy of the top of the SMSF bank account statement.

Name of financial institution

Branch

BSB

Account number

Account name

10. Declaration and signature

- ▶ I am aware of and do not require any information on the impact of this payment on my superannuation benefits.
- ▶ I am aware of any fees and charges that may apply.
- ▶ I declare that I have read this form completely and the information I have provided in it is true and correct, and I authorise Smartsave Member's Choice Superannuation Master Plan to process my benefit request in accordance with my instructions.
- ▶ I acknowledge that I have read and understood the implications of supplying or not supplying my TFN.
- ▶ I request payment to be made in the manner indicated on this form and accompanying material, and I understand that this withdrawal may cause my insurance cover (if any) to be cancelled, unless I establish an alternative payment method.
- ▶ I understand that any tax that may be payable will be deducted from the withdrawal, and I have read and understood the information regarding TFNs in Section 3 of this form.
- ▶ I understand that if applicable, it is my responsibility to notify Centrelink of any payments I receive.
- ▶ I consent to my personal information being used in accordance with Diversa Trustees Limited Privacy Policy (available for viewing at diversa.com.au).
- ▶ I discharge Smartsave Member's Choice Superannuation Master Plan from all further liability in respect of the benefits paid.

Full name

Signature

Date (DD/MM/YYYY)

Please return completed and signed form to: Smartsave, PO Box 1282, Albury NSW 2640.

11. Checklist

- I have completed all of the required sections of this form, signed and dated the declaration. Refer Section 10.
- I have attached a CERTIFIED copy of original identification*, and any other necessary documents to this form (where applicable).
- If I have elected to have payment made to my bank account, I have attached a CERTIFIED copy of the top of my bank, building society or credit union account statement showing my full name BSB and account number details if not already held and supplied within the last 12 months. Refer Section 9.
- If I am withdrawing on grounds of termination of employment, I have attached a statutory declaration and/or termination of employment advice where applicable. Refer Section 6.
- If I am withdrawing on the grounds of permanent incapacity or terminal illness, I have submitted the appropriate permanent incapacity/TPD application forms with attached necessary medical statements and required medical evidence, with this form. Refer Section 6.

* An identification requirements factsheet on providing proof of identity can be found on the documents and forms page of the Secure Online Portal.

Forward the signed form, certified identification and the top of your nominated bank statement by:

- ▶ Your Nominated Representative – by scanning and emailing to smartsave@diversa.com.au (If you have registered your Nominated Representative to access the Secure Online Portal and act on your behalf).
- ▶ Directly – Post your original application, and CERTIFIED copies of original documents (if you can access Smartsave Member's Choice Superannuation Master Plan directly) to: Smartsave, PO Box 1282, Albury NSW

Privacy Policy

The collection of your personal information (PI) in this form is governed by the Privacy Act 1988 (Cth). Diversa Trustees Limited uses your PI to administer your superannuation account (including insurance (if any)), improve our products and services and keep you informed. If we cannot collect this information, we may not be able to do these tasks. We may collect your PI from you, or from third parties such as your employer. We will only share your PI where necessary to perform our activities with our administrator, other service providers, as required by law or court/ tribunal order or with your permission. Your PI may be accessed overseas by some of our service providers. For full details of how we use your PI, the countries where your PI may be accessed, how you can access and change your PI, and the privacy complaints process please read our Privacy Policy at smartsavesuper.com.au or call us on 1300 654 720.

Contact us

Phone: 1300 654 720 | **Email:** smartsave@diversa.com.au | **Website:** smartsavesuper.com.au

Smartsave Employer Super and Smartsave Personal Choice and Smart Pensions are part of the Smartsave Member's Choice Superannuation Master Plan ABN 43 905 581 638 RSE R1001341 (Fund). Diversa Trustees Limited ABN 49 006421 638, AFSL 235153. RSE Licence L0000635 (Trustee) is the Trustee of the Fund and the product issuer. The information in this document has been prepared by Diversa Superannuation Services Pty Ltd ABN 77 107 165 962, AFSL 273321 as the Fund Administrator. It is intended to provide you with general information only and does not take into account your personal objectives, financial situation or needs. Before making any financial decisions about Smartsave Employer Super and Smartsave Personal Choice & Smart Pensions, it is important that you read the current product disclosure statement (PDS) relevant to your membership and consider your particular circumstances and whether the particular financial product is right for you. The current PDS for each product is available on smartsavesuper.com.au. You should consult a financial adviser if you require personal advice.