

# Benefit transfer or payment request

Use this form to request a transfer/rollover of your benefit to another superannuation fund or a benefit payment to you. Transferring or paying benefits can have an impact on tax, fees and investments. We recommend you seek financial advice before completing this form. For more information, see your Product Disclosure Statement (PDS) and/or talk with your financial adviser.

If you have any questions, please call us on **1300 880 588** or email [contactaon@pillar.com.au](mailto:contactaon@pillar.com.au).

## IMPORTANT INFORMATION

- In order to prevent fraud and protect your benefit, all payment or transfer requests must be accompanied by a 'certified' copy of a photo ID (eg passport details page or driver's licence). You do not have to provide a certified ID to rollover/transfer your benefits within the Aon Master Trust.
- A document may be certified by one of the qualified witnesses listed on the last page of this form.

## YOUR DETAILS

Member number













Title

Given names

Surname

Date of birth









Sex (M or F)

Telephone











Mobile











Email

Residential address\*

Suburb

State




Postcode





\* You must provide us with a residential address to process a benefit payment. You may elect where you would like your cheque mailed in Payment details.

## YOUR REASON FOR PAYMENT

Please select the appropriate option below.

- Benefit transfer/rollover
- Benefit withdrawal (you may only withdraw unrestricted non-preserved benefits and restricted non-preserved benefits in certain situations – see your PDS)
- Retirement, over age 65 or employment termination after age 60
- Ill-health retirement (documentation required – call us for information)
- Terminal illness (documentation required – call us for information)
- Severe financial hardship or compassionate grounds claim (documentation required – call us for information)

To open a Pension if retiring or transitioning to retirement call us on 1300 880 588 for more information.

## YOUR TRANSFER/ROLLOVER TO ANOTHER SUPER FUND

For transfers to self managed superannuation funds (SMSFs), we will only transfer your benefit to your SMSF operating bank account. Please complete bank account details in *Payment details*.

Please note that we may require additional compliance documentation, such as a certified copy of a bank statement, trust deed and/or investment strategy for transfers to an SMSF.

Please select the appropriate option below.

- Transfer my entire benefit
- Transfer part of my benefit \$ \_\_\_\_\_ (complete amount)

Fund name

Fund postal address

Suburb

State

Postcode

Your member account number (if known)

Unique superannuation identifier (USI)

Fund's Australian business number (ABN)

Superannuation product identification number (SPIN)

## YOUR BENEFIT PAYMENT

### Payment instructions

- Pay my entire benefit to me
- Pay my entire unrestricted non-preserved benefit to me and transfer/rollover the balance as shown above

I confirm that the following applies. Please select the appropriate option below.

- I am withdrawing unrestricted non-preserved super
- I am over age 65
- I am over age 60 and ceased employment
- I have reached preservation age and permanently retired from the workforce

### Payment details

How would you like your benefit to be paid? Please select the appropriate option.

- Direct credit to my bank account/my SMSF operating bank account (shown below)

Name of account

Name of bank

Address of bank

Suburb

State

Postcode

BSB number

Account number

- ✎ Please attach a certified copy of a bank statement for your nominated account to confirm your bank details (unless we hold your bank account details already) and account information (ie bank name, BSB, account name and number).
- ✎ Your keycard number is not your account number.
- ✎ For transfers to an SMSF, the bank account must be in the name of the SMSF.
- ✎ All details must be provided.
- ✎ To transfer to more than one institution, photocopy this page.
- ✎ It will take at least two (2) business days after processing the request by the trustee for the money to be credited to your nominated bank account.

Cheque payment to my residential address as shown in *Your details*

Cheque payment to my postal address as shown below

Postal address

Suburb

State

Postcode

## YOUR TAX FILE NUMBER (TFN) DECLARATION

I understand that I do not have to provide my TFN. I am choosing to provide my TFN to the trustee:

- ✎ so that the trustee can accept my non-concessional contributions to super and so that any subsequent contributions and benefit payments may be taxed at concessional rates
- ✎ to facilitate the administration of my superannuation account, and to facilitate any other actual or proposed uses authorised by superannuation or taxation legislation.

Your TFN will be provided to any new fund to which you may later transfer, unless you advise us otherwise.

Tax file number

## PRIVACY

Aon is committed to protecting your personal information in accordance with the Australian Privacy Principles under the Privacy Act 1988 (Cth). We collect, use and disclose personal information to offer, promote, provide, manage and administer the many financial services and products we and our group of companies are involved in as set out in the *Aon Privacy Notice*. In order to do this, we may also share your information with other persons or entities who assist us in providing or promoting our services as set out in the *Aon Privacy Notice*.

Further information about our privacy practices can be located in the *Aon Australia Group Privacy Policy Statement* which can be viewed on our website at [erf.aon.com.au](http://erf.aon.com.au) or a copy can be sent to you on request by your Aon representative. You may also gain access to your personal information, or modify your privacy preferences, by contacting your Aon representative or our Privacy Officer through the means set out in the *Aon Privacy Notice*.

## DECLARATION AND AUTHORISATION

I declare that:

- I have fully read this form and the information I have provided on this form is true and correct
- I am aware that I may ask the trustee of the Aon Eligible Rollover Fund for all the information I need to understand my benefit entitlements in the fund (including exit, transfer, withdrawal and other fees, investment options and the effect of transfer on these benefit entitlements) AND I do not require any further information
- I understand and acknowledge the implications of transferring my benefits from the Aon Eligible Rollover Fund or applying for my benefit to be paid by the Aon Eligible Rollover Fund
- I authorise the deduction of any applicable benefit payment or transfer fees by Aon Superannuation Pty Limited as the trustee of Aon Eligible Rollover Fund
- I have read the *Aon Privacy Notice* and consent to my personal information (including sensitive information) being handled in accordance with the *Aon Privacy Notice*
- If I am disclosing personal information about another person, I have obtained their consent to disclose their personal information to you and I have made them aware that you may disclose their information to third parties that are reasonably necessary to assist in the provision of the relevant services or products. If I have not obtained the consent of the other person, I will inform you of such.

Unless you tick here, we or any of our group of companies may be in touch by any means (including email or SMS) at any time to let you know about goods, services or promotions that may be of interest to you.

➤ 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"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

## CHECKLIST

Before you return this form, please tick the checklist below to ensure your form is complete.

- I have provided a residential address in *Your details*
- I have signed and dated the form
- I have provided a certified copy of my bank statement/SMSF bank statement if I have requested a direct credit to my bank account/SMSF bank account, if relevant
- I have enclosed a certified copy of a photo ID or certified copies of two ID documents, one each from list 'A' and list 'B' shown below
- I have also enclosed a certified copy of a 'Change of name' document/Guardianship order/POA, if relevant. See below

## Supporting documents that you need to provide

### Identification

We are required under the rules of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to verify a member's identity when making a payment or transfer. Your application must be accompanied by a 'certified' copy of a photo ID (eg passport details page or driver's licence).

Where a photo ID is not held, we will accept a certified copy of one document from list 'A' plus one document from list 'B' below.

You are not required to provide a certified copy of a photo ID for rollovers within the Aon Master Trust.

### List A

- Birth certificate or birth extract
- Citizenship certificate issued by the Commonwealth
- Pension card issued by Centrelink that entitles the person to financial benefits.

### List B

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

### Change of name

If you have changed your name you must produce certified copies of 'link' documents. Link documents prove that a relationship exists between two or more names.

In the event that you have changed your name by marriage or divorce, the link documents you would be expected to provide would be a certified copy of a marriage certificate or a decree nisi (divorce certificate). In both cases, there must be evidence of your current name and previous name or names.

If you have changed your name legally you will need to provide the trustee with a certified copy of a change of name certificate or deed poll from the Registry of Births, Deaths and Marriages or similar body in your State.

## Signing on behalf of a member

If you are signing on behalf of a member you must produce a certified copy of a current Guardianship order or Power of Attorney (POA) document. You must ensure that you provide all pages to the trustee, duly certified.

In the case of a POA you must also provide a signed declaration that the POA is current and has not been revoked.

## Document certification

A document may be certified by one of the qualified witnesses listed below. All copied pages of original proof of ID documents must be certified.

The authorised individual must ensure that the original and the copy are identical; then write or stamp on the copied document 'certified true copy'. This must be followed by the date and signature, printed name and qualification of the authorised individual. In cases where an extract of a document is photocopied to verify customer ID, the authorised individual should write or stamp 'certified true extract'.

## Qualified witnesses for document certification

- ⊘ Chiropractor
- ⊘ Dentist
- ⊘ Legal practitioner
- ⊘ Medical practitioner
- ⊘ Nurse
- ⊘ Optometrist
- ⊘ Patent attorney
- ⊘ Pharmacist
- ⊘ Physiotherapist
- ⊘ Psychologist
- ⊘ Trade marks attorney
- ⊘ Veterinary surgeon
- ⊘ Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- ⊘ Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the *Consular Fees Act 1955*)
- ⊘ Bailiff
- ⊘ Bank officer with 2 or more continuous years of service
- ⊘ Building society officer with 2 or more years of continuous service
- ⊘ Chief executive officer of a Commonwealth court
- ⊘ Clerk of a court
- ⊘ Commissioner for Affidavits
- ⊘ Commissioner for Declarations
- ⊘ Credit union officer with 2 or more years of continuous service
- ⊘ Employee of the Australian Trade Commission who is:
  - > in a country or place outside Australia, and
  - > authorised under paragraph 3 (d) of the *Consular Fees Act 1955*, and
  - > exercising his or her function in that place
- ⊘ Employee of the Commonwealth who is:
  - > in a country or place outside Australia, and
  - > authorised under paragraph 3 (c) of the *Consular Fees Act 1955*, and
  - > exercising his or her function in that place
- ⊘ Fellow of the National Tax Accountants' Association
- ⊘ Finance company officer with 2 or more years of continuous service
- ⊘ Holder of a statutory office not specified in another item in this Part
- ⊘ Judge of a court
- ⊘ Justice of the Peace
- ⊘ Magistrate
- ⊘ Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the *Marriage Act 1961*
- ⊘ Master of a court
- ⊘ Member of Chartered Secretaries Australia
- ⊘ Member of Engineers Australia, other than at the grade of student
- ⊘ Member of the Association of Taxation and Management Accountants
- ⊘ Member of the Australian Defence Force who is:
  - > an officer, or
  - > a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with 2 or more years of continuous service, or
  - > a warrant officer within the meaning of that Act
- ⊘ Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- ⊘ Member of:
  - > the Parliament of the Commonwealth, or
  - > the Parliament of a State, or
  - > a Territory legislature, or
  - > a local government authority of a State or Territory
- ⊘ Minister of religion registered under Subdivision A of Division 1 of Part IV of the *Marriage Act 1961*
- ⊘ Notary public
- ⊘ a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- ⊘ Permanent employee of:
  - > the Commonwealth or a Commonwealth authority, or
  - > a State or Territory or a State or Territory authority, or
  - > a local government authority; with 2 or more years of continuous service who is not specified in another item in this Part
- ⊘ Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- ⊘ Police officer
- ⊘ Registrar, or Deputy Registrar, of a court
- ⊘ Senior Executive Service employee of:
  - > the Commonwealth or a Commonwealth authority, or
  - > a State or Territory or a State or Territory authority
- ⊘ Sheriff
- ⊘ Sheriff's officer
- ⊘ Teacher employed on a full-time basis at a school or tertiary education institution
- ⊘ Member of the Australasian Institute of Mining and Metallurgy
- ⊘ Person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)
- ⊘ Officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more years of continuous service with one or more licensees.