

Australian Government

Commonwealth Superannuation Corporation

PSS

Public Sector Superannuation Scheme

ACCESS-ASS-C 04/14

Early access to associate preserved superannuation benefit

Benefit application form & information

Before completing this benefit application form, you are advised to read our **Product Disclosure Statement (PDS)** and **Early access to superannuation benefits** factsheet, available from **pss.gov.au** or by calling us on **1300 000 377**.

This application is to be used by associate preserved benefit members of the Public Sector Superannuation (PSS) Scheme who are seeking early access to their compulsorily preserved benefits on the ground of severe financial hardship or specified grounds, as defined under the *Superannuation Industry (Supervision) Regulations 1994*. Early release under these provisions can only be approved:

a. on provision of specified documentary evidence that the applicant is personally in receipt of a defined Commonwealth income support payment

and

b. where release is necessary to meet proven reasonable and immediate family living expenses.

This form should also be used to advise payment arrangements for any early access to associate preserved benefits granted under a determination made by the Department of Human Services (DHS), which approves early release on specified grounds.

Important note: preserved benefit members who access their benefits under these provisions forfeit their pension entitlement.

Your Government Super at Work

Any financial product advice in this document is general advice only and has been prepared without taking account of your personal objectives, financial situation or needs. Before acting on any such general advice, you should consider the appropriateness of the advice, having regard to your own objectives, financial situation or needs. You may wish to consult a licensed financial advisor. You should obtain a copy of the PSS Product Disclosure Statement and consider its contents before making any decision regarding your super. Commonwealth Superannuation Corporation (CSC) ABN: 48 882 817 243 AFSL: 238069

RSEL: L0001397 Trustee of the Public Sector Superannuation Scheme (PSS) ABN: 74 172 177 893 RSE: R1004595 Industry Fund Services (IFS) ABN 54 007 016 195 AFSL 232514

Explanatory notes

Important

Before completing this benefit application form, you are advised to read the **PDS** and **Early access** to superannuation benefits factsheet available at pss.gov.au

Release of superannuation

Your superannuation is an investment for your retirement. For this reason, the government requires that a portion of your superannuation be 'preserved', or not accessible, until you reach your 'preservation age'.

Under limited circumstances you may be allowed to access your benefit prior to preservation age.

PSS follows the guidelines on early release issued by DHS.

Financial hardship release

PSS can only release a portion of your benefit on financial hardship if:

- > you have been on Commonwealth income support for an extended continuous period and
- > you are able to demonstrate financial hardship.

DHS releases

If you do not qualify for early access to your superannuation benefits on severe financial hardship grounds, you may consider asking DHS to approve the release of benefits on specified grounds. Some examples of the types of expenses you may be able to claim include:

- > medical expenses
- > renovations to your home necessitated by severe disability
- > mortgage payments, to prevent loss of your home.

All enquiries regarding applications for early release on these grounds should be directed to DHS on 1300 131 060. An application form is also available from their website at humanservices.gov.au

If you have already received a DHS approval for the release of your benefit, you only need to complete **Sections A, C, D** and E of this application. Identification documents as listed in **Section F** are also needed.

You do not need to complete **Section B**, which deals with the release of benefits on financial hardship.

You will need to supply a copy of your DHS approval letter with your application.

If you are claiming a DHS release, then go to the section entitled **Completing the application** of the **Explanatory notes**.

Commonwealth income support

To qualify for early access to your superannuation benefit, at the date of application you must have been on Commonwealth Income Support for a continuous period of 26 weeks, or 39 weeks.

Some support payments include:

- > income support supplements
- > service pensions
- > social security benefits
- > social security pensions.

Family allowance, Austudy payments or youth allowance payments in relation to full-time study are not eligible.

To ensure you have been receiving an income support payment for an appropriate period, please complete the authority in **Section B** to allow us to confirm your details with Centrelink.

If you are receiving a benefit from the Department of Veterans' Affairs, you must include, with your application, a statement from them. This statement is only valid for 21 days from the date on the statement and must refer to you and not to other members of your family.

Financial hardship

In order to qualify for a release of your superannuation, you must be able to demonstrate that you are in financial hardship.

Financial hardship means that you are unable to meet reasonable and immediate family living expenses.

An immediate expense is considered to be one that is due and payable at the time that you complete this application. Generally speaking, future expenses will not be considered unless the expense is urgent in nature and will undoubtedly become payable very soon.

Specific guidelines on common types of expenses are shown below, in the section entitled **Release guidelines**.

Assets

The guidelines issued by DHS state that one aspect of whether a member is in financial hardship is whether they have assets that could reasonably and realistically be sold to meet expenses.

For this reason we may not release money on hardship grounds if you have more than \$50,000 in assets.

To assist us in determining your assets, you will need to complete the **Income and expenditure statement** in **Section B**.

Note that your principal place of residence (generally, the family home) is excluded from this evaluation.

You should value any assets at resale, not replacement value. For example, if you are valuing a car, the value is the price that you could sell the car for, not the cost of buying a new, similar, car.

How much can be released

We can only release a maximum of \$10,000 gross in any 12-month period.

Only one payment may be made in any 12-month period.

Documentary evidence

We require you to provide enough current and valid documentary evidence to substantiate your claim for financial hardship. The evidence must include bills no older than 21-days old.

Release guidelines

This section details some common types of expenses, and how they will generally be treated. These are guidelines only. If you have any questions on whether or not you can claim specific expenses, please call us on **1300 000 377**. Furthermore, any release will be subject to the new proportioning rules. These rules require that your taxable and tax-free components be spread in equal proportions across those parts of the benefit payment you receive as cash.

Personal loans from family or friends

Please note: personal loans from family or friends will not be considered as evidence of immediate expenses associated with everyday living.

Credit cards and other loans

If you have not claimed a release on financial hardship in the past from PSS in which you claimed credit card or loan debts as an expense, we may release enough money (up to the \$10,000 limit) to enable you to reduce the outstanding balance on your credit cards.

If you have claimed credit cards or loans as expenses on a previous release on financial hardship grounds, we will only pay the minimum outstanding monthly payment that is due at the date that you applied for the release.

You should include copies of your last three credit card or loan statements in your application. Please do not use highlighters or blackout pens as we need to assess the information on the statements.

Regular bills

Expenses for utilities, such as gas, water, electricity and so on, will generally be approved provided that the release is to cover amounts due at the date of your application. You will need to include copies of your outstanding bills.

The following expenses would also generally be approved under similar circumstances, with sufficient documentary evidence:

- > rates or body corporate expenses
- > motor vehicle registration or insurance
- > medical, home and contents and similar insurance premiums.

Motor vehicle repairs and purchases

Funds for the purchase of a motor vehicle will not be approved except in exceptional circumstances.

Such circumstances may apply, for example, if you live in a remote area and rely on a private vehicle for transport. Please supply a Statutory Declaration stating why the vehicle is essential.

We may approve payments for repairs to a motor vehicle where they are required to make the vehicle roadworthy. If you are claiming on these grounds, you will need to provide a quote.

Education expenses

Provided you supply appropriate documentation, we may release funds to meet continuing educational expenses for yourself or your immediate family where these are due and payable in the near future or at the date that you make your application. Private school fees can only be released once.

Medical expenses

We will generally release funds for necessary and outstanding medical bills where documentary evidence is given.

For urgent medical treatment that will be undertaken in the near future, you should supply an estimate of the cost involved, which should also state the urgency of the work, from your medical practitioner.

If you have substantial medical costs, you should contact DHS on 1300 131 060 as they can authorise the release of superannuation amounts in excess of \$10,000.

Mortgage payments

We will generally only release funds to cover minimum outstanding amounts.

If you are in danger of foreclosure on your mortgage, you should contact DHS on **1300 131 060**.

Establishing a household

We may release funds to cover the cost of establishing a household.

We will examine such claims on a case-by-case basis, taking into account the circumstances of the individual. You must provide a Statutory Declaration stating the items needed and the reason you need them. Please note: this applies to essential household items only and limits apply depending on the item.

General shortfall in living expenses: We cannot release money to cover a general shortfall between your income and your expenses. A release can only be approved to cover specific outstanding expenses.

Discretionary expenditure

We will not release money to cover the cost of discretionary items.

Examples of such items include televisions, music systems, computers and internet access.

Completing the application

Following are some notes to assist you in completing each section of the benefit application.

Section A-Personal details

Please complete all boxes in this section.

The postal address you show is where all correspondence will be sent.

A contact phone number or email address is also needed in case we need to contact you regarding your application. This will help avoid delays in payment.

Section B–Application for early access to your superannuation benefit on the grounds of severe financial hardship

You do not need to complete this section if you have an approval letter from DHS for the release of your benefit. You should proceed to **Section** C.

If you are completing this section, you may need to refer to the notes above regarding your assets and the type of expenses that are acceptable under the guidelines.

Note that this section of the application is a Statutory Declaration and you must sign this section and have it witnessed by a person qualified to do so. A list of qualified people is shown in this section of the application at Note 1. Penalties exist for false or misleading declarations.

You must also sign the authority and give your Centrelink reference number to confirm that you have been on Commonwealth income support for a continuous period of 26 weeks or 39 weeks if you are over 55.

This section also asks you to nominate a NET (after tax) amount of your superannuation to be released.

This figure will not exceed \$10,000 gross. Please note that tax will be deducted from this amount. You are also required to state the purposes for which released monies will be spent. You must also supply documents to support your application.

You need to provide an estimate of your family assets and complete the Income and expenditure statement in **Section B**.

Section C–Application for early access to your superannuation benefit on specified grounds.

You only need to complete this section if you have a letter authorising the release of funds from DHS.

Please complete all boxes and enclose a copy of the DHS letter with your application.

Section D-Payment arrangements

We can only pay your benefit into an Australian account held in your name. If it's a joint account, one of the names listed must be yours.

Section E-Taxation matters

Your tax file number (TFN)

In accordance with the *Taxation Laws Amendment* (*Tax File Numbers*) Act 1988, we are required to deduct PAYG tax at the top marginal rate plus the Medicare levy from benefits if a person does not supply a tax file number (TFN).

If you have not been issued a TFN you should lodge an Australian Taxation Office Application/ Enquiry form with the Australian Taxation Office (ATO). Forms are available at all Taxation Offices. You must supply proof of identity at the time you lodge the form.

Note: We are required to validate your TFN with the ATO's records to confirm the TFN provided is yours and correct. Your TFN will be validated before your benefit will be paid using the SuperTICK validation service. If you do not provide your TFN, the processing of your benefit payment may be delayed.

Section F–Identification requirements

To protect against fraud, safeguard your benefit and comply with the Government's Anti-Money Laundering and Counter Terrorism Financing Legislation, you need to provide documentation to prove your identity.

You can do this via a 100 point identification check at Section F. Refer to Verify my identity electronically and Verify my identity using certified documents for more information.

Privacy

The Commonwealth Superannuation Corporation (CSC) and its Administrator, ComSuper are collecting the information on this form for the following reasons:

- > to confirm your identity
- > to assess your eligibility for payment of the benefit
- > to pay your benefit
- > to contact you

CSC and ComSuper are committed to protecting any personal information we hold about you. Your information will not be used for any other purpose or disclosed to another party unless:

- > you authorise us to do so
- > the disclosure is authorised by law. This may include disclosing your personal information to other government agencies that have specific legislative authority to collect this information as required by policy and legislation. We will not disclose your personal information to these agencies unless it is lawful to do so.

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Public Sector Superannuation Scheme

ACCESS-ASS-C 04/14

Application for early access to your superannuation benefit

SECTION A Personal details

| Reference number (AGS) | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|-------------------------|-------|------|--------|-----|---------------|----------------|---------------|---------------|---------------|----------------|--------------|--------------|--------------|--------------|------|--------------|--------------|-------|-----|---|--|
| Salutation | | Mr | | | Ν | ſrs | | | Ms | 6 | | 1 | Miss | S | |] 0 | the | r | | | | | |
| Surname | | | | | | | | | | | | | | | | | | | | | | | |
| Given name(s) | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | D | D | / | M | M | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| PREVIOUS NAME - IF CHA | ANC | GED | | | | | | | | | | | | | | | | | | | | | |
| Surname | | | | | | | | | | | | | | | | | | | | | | | |
| Given name(s) | | | | | | | | | | | | | | | | | | | | | | | |
| lf you have changed your name marriage certificate, birth certi | ficat | ase si e, or Dent | deed | d po | ll (na | ame | s tha chai | it coi nge) | nfirı cert | n bo ifica | th y te. C | our j Certi | prev fied | ious copi | and ies a | cur re ac | rent | nan table | 1e; si e. | ıch a | as, | | |
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| Phone number | | | | | | | | | | | | | | | | | | | | | | | |
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| Email address | | | | | | | | | | | | | | | | | | | | | | | |
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Your Government Super at Work

Any financial product advice in this document is general advice only and has been prepared without taking account of your personal objectives, financial situation or needs. Before acting on any such general advice, you should consider the appropriateness of the advice, having regard to your own objectives, financial situation or needs. You may wish to consult a licensed financial advisor. You should obtain a copy of the PSS Product Disclosure Statement and consider its contents before making any decision regarding your super. Commonwealth Superannuation Corporation (CSC) ABN: 48 882 817 243 AFSL: 238069

RSEL: LOO01397 Trustee of the Public Sector Superannuation Scheme (PSS) ABN: 74 172 177 893 RSE: R1004595 Industry Fund Services (IFS) ABN 54 007 016 195 AFSL 232514

SECTION B Application for early access to your superannuation benefit on grounds of severe financial hardship or specified grounds

Member authorisation

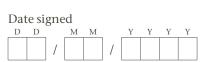
To whom it may concern,

| I, | FULI | NAN | /IE | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | |
| Centrelink customer reference number: | | | | | | | | | | | | | | | | | |

Request all relevant information regarding my income support benefits from Centrelink be released to the employees of ComSuper who are authorised representatives and administrators of PSS on request.

Signature and date

| NATURE | | |
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Statutory declaration

| T | FULL NAME | | | | | | | | | | | | | | |
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| of | RESIDENTIAL ADDRESS | | | | | | | | | | | | | | |
| of | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | |
| | SUBURB | STATE POSTCODE | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

Do solemnly declare that:

- 1. I am unable to meet reasonable and immediate family living expenses as defined in the attached **Explanatory notes** and I do not have assets (apart from my home) which could be used or sold to alleviate financial hardship.
- 2. The net amount I am requesting to be released is:

SIG



3. The purposes for which the released monies will be used are as follows

| Purpose of release monies | 1. | | | | | | | | | \$ | | | | |
|---------------------------|--------------|---------|---------|---------|--------|------|-------|----------|--------|-----------|--------|------|------|--------|
| Terease momes | 2. | | | | | | | | | \$ | | | | |
| | 3. | | | | | | | | | \$ | | | | |
| | 4. | | | | | | | | | \$ | | | | |
| | 5. | | | | | | | | | \$ | | | | |
| | 6. | | | | | | | | | \$ | | | | |
| | 7. | | | | | | | | | \$ | | | | |
| | 8. | | | | | | | | | \$ | | | | |
| | 9. | | | | | | | | | \$ | | | | |
| | 10. | | | | | | | | | \$ | | | | |
| 4. The value of my tot | al assets (e | xcludin | g the v | value o | of the | equi | ty in | my j | princi | pal pla | ce of | resi | iden | ce) is |
| | \$ | | | | | | | | | | | | | |
| Declaration has been made | de at: | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Signature and date | SIGNATURE | | | | | | | Dat D | e sign | ed M M | ſ / | Y | Y | Y Y |

I declare that the information I have provided is true and correct to the best of my knowledge. I acknowledge that it may be a criminal offence to knowingly provide false or misleading information or documents.

Details of the person before whom the declaration is made (PLEASE PRINT):

| Salutation | | Mr | | Mrs | | | Ms | | | Mis | S | | Otł | ner | | | | | |
|------------------------------------|---------|----------|--------|---------|-------|--------|-------|------|---------|-------|--------|-------|--------|---------|---|------|-----|---|--|
| Surname | | | | | | | | | | | | | | | | | | | |
| Given name(s) | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
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| Qualifications | | | | | | | | | | | | | | | | | | | |
| Note: Provision exists for penalti | es to b | e applie | d whei | e false | decla | aratio | ns ar | e ma | de in r | espec | t of c | laim | for be | enefits | | | | | |
| Signature and date | SIGN | IATURE | | | | | | | | | Dat | e sią | gned | | | | | | |

For details on who can witness this declaration please refer to information in Section F on page 19.

Section B continued over page

D D

M M

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Statement of fortnightly household income and expenditure

The figures you provide should reflect your household's current situation. If you have a partner their income and expenditure also needs to be included. These items are a guide; you may include other items.

| 1 | | 0 | / / | <i>,</i> |
|--------------|--------------------------------------|---|-----|----------|
| Expenses | | | | |
| 1. Housing | Rent | | \$ | |
| | First mortgage | | \$ | |
| | Second mortgage | | \$ | |
| | Land rates | | \$ | |
| | Water rates | | \$ | |
| | Home & contents insurance | | \$ | |
| | House repairs | | \$ | |
| | House replacements | | \$ | |
| | Strata plan levies | | \$ | |
| | Total (1): | | \$ | |
| 2. Utilities | Electricity | | \$ | |
| | Gas | | \$ | |
| | Heating (other than gas/electricity) | | \$ | |
| | Telephone | | \$ | |
| | Total (2): | | \$ | |
| 3. Transport | Petrol | | \$ | |
| | Repairs | | \$ | |
| | Registration | | \$ | |
| | Insurance | | \$ | |
| | Licence | | \$ | |
| | NRMA or similar | | \$ | |
| | Fares (bus, train, ferry) | | \$ | |
| | Total (3): | | \$ | |
| | | | | |

| | | \$ |
|----------------|----------------------|----|
| В | Bank cards | \$ |
| C | Credit cards | \$ |
| S | tore accounts | \$ |
| F | inance companies | \$ |
| L | oans | \$ |
| R | entals | \$ |
| Т | Cotal (4): | \$ |
| 5. Food | Groceries | \$ |
| Ν | ⁄leat | \$ |
| F | ruit and vege | \$ |
| Ν | /ilk and bread | \$ |
| L | unches | \$ |
| Р | Pet food | \$ |
| Т | Cotal (5): | \$ |
| 6. Medical H | Iealth insurance | \$ |
| E | Doctor/dentist | \$ |
| C | Chemist/vitamins | \$ |
| C | Optometrist | \$ |
| C | Other (specify) | \$ |
| Т | Total (6): | \$ |
| 7. Transport E | ducation | \$ |
| S | chool fees | \$ |
| U | Jniforms/school bags | \$ |
| E | excursions/sports | \$ |
| S | tationery/books | \$ |
| C | Childcare | \$ |
| Т | fotal (7): | \$ |

| 8. Other | Maintenance | \$ |
|------------------------------------|-----------------------------------|----|
| | Life insurance | \$ |
| | Savings | \$ |
| | Clothing/haircut | \$ |
| | Union fees | \$ |
| | Entertainment | \$ |
| | Sport | \$ |
| | Holidays | \$ |
| | Gifts | \$ |
| | Alcohol | \$ |
| | Cigarettes | \$ |
| | Laundry | \$ |
| | Gambling | \$ |
| | Vet fees | \$ |
| | Personal spending | \$ |
| | Total (8): | \$ |
| | | Ŧ |
| | Total Expenditure (1-8): | \$ |
| | | |
| Your fortnightly income (less tax) | Centrelink benefits | \$ |
| | Compensation | \$ |
| | Board | \$ |
| | Annuity (eg pension or allowance) | \$ |
| | Maintenance | \$ |
| | Other | \$ |
| | Total income:: | \$ |
| Your partner's | Centrelink benefits | \$ |
| fortnightly income (less tax) | Compensation | \$ |
| () | Board | \$ |
| | Annuity (eg pension or allowance) | \$ |
| | Maintenance | \$ |
| | Other | \$ |
| | Total income:: | |
| | iotai meome:: | \$ |

SECTION C Application for early access to superannuation benefit on specified grounds

| Ŧ | FULI | NAM | ſΕ | | | | | | | | | | | | | | | | | | | | |
|---|-------------|-------|------|------|------|------|-----|-------|-------|-----|------|-------|------|------|-----|-----|-----|------|------|-------|------|------|---|
| I, | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| hereby apply for part of m | iy su | iper | anr | nuat | tion | ı be | nef | it fr | om | the | PSS | scl | hem | ie a | mo | unt | ing | to t | he | sum | ı of | k | |
| | \$ | | | | | | | | | | | | | | | | | | | | | | |
| | * Th may | | | | | | | | | | | | | | | | | | | | tion | . DH | S |
| following approval by DH | S fo | r eai | ly ı | elea | ase | on | spe | cifie | ed g | rou | nds | | | | | | | | | | | | |
| I have enclosed the writte superannuation benefit of | | | | | | - | OHS | tha | t I ł | nav | e sa | tisfi | ed t | he | con | dit | ion | of r | elea | ise o | of m | ıy | |
| I request that part of my benefit released on specified grounds by DHS be paid into the account shown Section D of this application. | | | | | | | | | | | | | | | | | | | | | | | |

Signature and date



SECTION D Payment arrangements

| Type of financial institution | Savings bank | Building society | Trading bank | Credit union |
|-------------------------------|--|---|--|-------------------------------------|
| Name of institution | | | | |
| | | | | |
| Name of account holder | | | | |
| nonder | | | | |
| Branch location | | | | |
| Branch (BSB) number | - | | | |
| Account number | | | | |
| | If the BSB number or acc accepted by your finance | count number you have p ial institution. If you have | omponents will be released firs rovided is incorrect, the paym e any doubts what your correc ails with your financial institu | nent will not be t BSB number or |
| | The information I | have supplied is true | e and correct. | |
| Signature | SIGNATURE | | Date signed | |

SECTIONE Taxation matters

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.

It is not an offence not to quote your TFN however higher tax rates will apply if you do not supply it.

If you have already given us your TFN, you are under no obligation to supply it again in this application.

| Full name | | | | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | |
| Tax file number | | | | | | | | | | | | |

I acknowledge that I have read Section E of the Explanatory notes and agree to supply my TFN as set out above.

I declare that the TFN in this segment is the same number advised to me by the Australian Taxation Office.

Note: We are required to validate your TFN with the ATO's records to confirm the TFN provided is yours and correct. Your TFN will be validated before your benefit will be paid using the SuperTICK validation service. If you do not provide your TFN, the processing of your benefit payment may be delayed.

SECTION F Identification requirements

To protect your benefit against fraud, money laundering and terrorism financing, under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* you must prove your identity. To do this you will need to provide identification documents which **total at least 100 points**. Each document is valued at 70, 40 or 25 points. For example your birth certificate and driver's licence total 110 points.

You can elect to have these documents verified electronically by completing the section Verify my identity electronically.

OR

You can provide certified hard copy documents by completing the section Verify my identity using certified documents.

An electronic copy of documents will be stored in a secure environment and hard copies will be securely stored off-site. All copies will only be used for the purposes of confirming your identity.

Verify my identity electronically

Your documents will be verified electronically using Document Verification Service (DVS), a national online system that allows approved government agencies and organisations to compare a member's identifying information with a government record. It is not a database and does not store any personal information. Requests to verify a document are encrypted and sent via a secure communications pathway to the document issuing authority for checking.

I agree to the use of DVS to verify my documents

Note that if you do not agree, you will need to provide certified hard copy documents and complete the section 'Verify my identity using certified documents.'

You need to provide the requested details of documents (exactly as they appear on the documents) which total at least 100 points.

70 points

You can only provide the details of one document valued at 70 points.

Australian Birth Certificate

| Family name | | | | | | | | | | | | | | | | | |
|--------------------|------|---|---|---|---|---|---|---|---|---|--|--|--|--|--|--|--|
| Given name(s) | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Date of birth | D | D | / | М | М | / | Y | Y | Y | Y | | | | | | | |
| Registration State | STAT | E | | | | | | | | | | | | | | | |
| Registration No | | | | | | | | | | | | | | | | | |
| Registration date | D | D | / | M | М | / | Y | Y | Y | Y | | | | | | | |
| Date printed | D | D | / | M | М | / | Y | Y | Y | Y | | | | | | | |
| Certificate No | | | | | | | | | | | | | | | | | |

OR

Australian Citizenship Certificate

| Family name | | | | | | | | | | | | | | | | | |
|------------------|---|---|---|---|---|---|---|---|---|---|--|---|--|--|--|--|--|
| Given name(s) | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Date of birth | D | D | / | М | M | / | Y | Y | Y | Y | | | | | | | |
| Stock No | | | | | | | | | | | | | | | | | |
| Acquisition date | D | D | / | М | М | / | Y | Y | Y | Y | | • | | | | | |

OR

Current Australian Passport

| Family name | | | | | | | | | | | | | | | | | |
|---------------|---|----|----|---|---|-----|-----|---|---|---|--|--|--|--|--|--|--|
| Given name(s) | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Date of birth | D | D | / | М | М | / | Y | Y | Y | Y | | | | | | | |
| Document No | | | | | | | | | | | | | | | | | |
| Gender | | Ma | le | | F | ema | ale | | | | | | | | | | |

40 points

Australian Driver's Licence or another licence or permit issued under a law of the Commonwealth, a state or territory

| Family name | | | | | | | | | | | | | | | | | |
|----------------|------|---|---|---|---|---|---|---|---|---|--|--|--|--|--|--|--|
| Given name | | | | | | | | | | | | | | | | | |
| Middle name | | | | | | | | | | | | | | | | | |
| Date of birth | D | D | / | М | М | / | Y | Y | Y | Y | | | | | | | |
| Licence No | | | | | | | | | | | | | | | | | |
| State of issue | STAT | E | | | | | | | | | | | | | | | |

25 points

You can provide the details of more than one document valued at 25 points and points will accumulate.

| Type of Certificate | | Ma | rria | ige | | | | | Change of name | | | | | | | | | | | | | | |
|---|-------|-----|------|-----|---|-----|---|---|----------------|------|--------|---|---|----------|----------|---|---|---|---|---|--|--|---|
| Family name (new) | | | | | | | | | | | | | | | | | | | | | | | |
| Given name(s) (new) | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| T 11 (11) | | | | | | | | | | | | | | | | | | | | | | | |
| Family name (old) | | | | | | | | | | | | | | | | | | | | | | | |
| Given name(s) (old) | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Date of event (Date of Birth or Date of Marriage) | D | D | / | М | M | / | Y | Y | Y | Y |] | | | | | | | | | | | | |
| Registration No | | | | | | | | | | | | |] | | | | | | | | | | |
| Spouse's Family name | | | | | | | | | | | | | | | | | | | | | | | |
| Spouse's Given name(s) | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Registration State | STATI | E | | 1 | | | | | | | | | | | | | | | | | | | |
| ingiona di ottato | | | |] | | | | | | | | | | | | | | | | | | | |
| Registration date | D | D | / | М | M | / | Y | Y | Y | Y |] | | | | | | | | | | | | |
| Registration year | | | | | | | | | | | | | | | | | | | | | | | |
| Date printed | D | D | / | М | М | / | Y | Y | Y | Y |] | | | | | | | | | | | | |
| Certificate No | | | | | | | | | | | | | | | | | | | | | | | |
| Medicare Card | | | | | | | | | | | | | | | | | | | | | | | |
| Card No | | | | | | | | | | | |] | | | | | | | | | | | |
| Reference No | | | | | | | | | | | | | | | | | | | | | | | |
| Family name | | | | | | | | | | | | | | | | | | | | | | | |
| Given name(s) | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Card colour | | Gre | en | | B | lue | | | Ve | ello | i W | 1 | | <u> </u> | <u> </u> | 1 | 1 | 1 | I | 1 | | | 1 |
| Expiry date | D | D | / | M | M | / | Y | Y | | Y |] | | | | | | | | | | | | |

Marriage Certificate or Change of Name Certificate

Verify my identity using certified documents

Note that if you have completed the section 'Verify my identity electronically', you do not need to complete this section and can go to Section G.

I wish to verify my identity using certified documents

You need to provide clear and legible, validly certified documents, as outlined below, which total at least 100 points.

70 points (you can only provide one certified document valued at 70 points)

- > Australian birth certificate
- > Australian citizenship certificate
- > Current Australian passport
- > Birth card issued by the NSW Registry of Births, Deaths and Marriages
- > Another document of identity having the same characteristics as a passport (eg diplomatic documents or some documents issued to refugees)

40 points

- > Australian driver's licence or another licence or permit issued under a law of the Commonwealth, a state or territory
- > Student ID card issued by a tertiary education institution
- > Identification card issued by the Commonwealth, a state or territory as evidence of your entitlement to a financial benefit
- > ADF ID card/pass
- > Identification card issued to a public employee

You can provide more than one of these documents, but only one will be valued at 40 points. Additional documents will only be valued at 25 points each.

25 points

- > Marriage certificate (for maiden name)
- > Medicare card
- > Change of name certificate
- > Credit card (one per financial institution)
- > Rates notice
- > Telephone account
- > Foreign driver's licence

You can provide more than one of these documents and points will accumulate. If you are providing copies of bills or statements you should black out any personal financial information or details of transactions in order to protect your privacy.

Examples

Your birth certificate + driver's licence = 110 points ✓

Your current passport + Medicare card + marriage certificate = 120 points ✓

Your birth certificate + Medicare card = 95 points ×

Certifying your documents

The following sample of certifying authorities can certify your documents:

- > Justice of the Peace (JP)
- > Pharmacist
- > Police officer
- > Medical practitioner
- > Legal practitioner enrolled on the roll of a supreme court or the High Court of Australia
- > Bank officer with two or more continuous years of service
- > Permanent employee of Australia Post with two or more years of continuous service
- > 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 two or more years of continuous service; or
 - > a warrant officer within the meaning of that Act

For a full list of certifying authorities refer to the *Statutory Declarations Regulations 1993* available at comlaw.gov.au

The certifying authority must confirm in writing that you are the valid holder of the identification that you are presenting and that any copies are true copies of the original. The certification must include the name, address, occupation, telephone number, registration number of the certifying authority (if applicable) and the date of the certification.

If you live overseas and need to have documents certified or make a Statutory Declaration, it needs to be done by a person who is on a list of persons before whom a Statutory Declaration may be made and who has a connection to Australia. For example a doctor who is registered in Australia and working overseas or an Australian Consular Officer. Refer to **ag.gov.au** and **dfat.gov.au** for more information.

SECTIONG Member checklist

| Have you: | read all the Explanatory notes, received a benefit estimate, and any other information you require to make an informed decision |
|-----------|---|
| | read the Early access to superannuation benefits factsheet |
| | filled in all the sections applicable to you |
| | completed and signed the Centrelink authority in Section B (confirming receipt of Commonwealth income support if claiming on financial hardship) |
| | signed the statutory declaration at Section B (if applicable) |
| | had the statutory declaration at Section B witnessed by a qualified person (if applicable) |
| | completed the Income and expenditure statement in Section B (if applicable) |
| | checked your bank account details at Section D |
| | attached a copy of your DHS release letter (if applicable) |
| | attached a copy of the letter from the Department of Veterans' Affairs confirming receipt of Commonwealth income support (if claiming on financial hardship) |
| | attached enough documentary evidence to support your application (if claiming on financial hardship) |
| | signed the Declaration |
| | attached certified copies of documents to prove your identity |
| | END FORM |

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