

NGS Super

Making a binding death benefit nomination

Who'll get your super if you die?

You can nominate one or more persons that you require the trustee of NGS Super to pay your death benefit to should you die while a member of NGS Super, by making a 'binding death benefit nomination'.

If you make a binding death benefit nomination and it is still valid and in effect at the event of your death, the trustee of NGS Super will be bound to follow it and pay your death benefit to the persons you have nominated and in the proportions specified by you.

If you do not wish to make a binding death benefit nomination, and the Trustee allows it, you may still nominate who you would prefer to receive your super payout in the event of your death, by completing a separate nomination of beneficiaries form, available from the website www.ngssuper.com.au or by calling NGS Super Customer Service Team on 1300 133 177. A preferred nomination would not be legally binding on the Trustee.

You may confirm, amend or revoke your binding death benefit nomination at any time. As your personal circumstances change, it's important to remember to keep your nomination up-to-date.

Completing the form

To make a binding death benefit nomination in NGS Super you must:

- Complete this form in full and sign and date it in the presence of two witnesses. The witnesses must be at least 18 years of age and neither of them can be nominated within this form. Each witness must also sign and date the form in Step 4.
- Only nominate someone who is your Dependant* and/or legal personal representative (of your estate).
- Ensure you clearly specify the percentage of your super that you wish to allocate to each person and that the total allocation equals 100%.

Once properly made, your nomination replaces any previous nomination you may have made, whether of preferred beneficiaries or a binding death benefit nomination.

To revoke a binding nomination

If you wish to revoke an existing binding death benefit nomination and not make a further nomination you need only complete Steps 1, 3 and 4 of this form, leaving Step 2 blank.

What you should know about binding death benefit nominations

In the event that you die without a valid and in effect binding death benefit nomination in place, the trustee of NGS Super will be required to either pay your entire death benefit to your estate or exercise its discretion and decide on payment of your death benefit to any one or more of your Dependents.

A binding death benefit nomination will become invalid if:

- it is completed prior to your admission to the Fund
- it is not made using the required *Making a binding death benefit nomination form*,
- the *Making a binding death benefit nomination form* has not been properly completed (for example, the nominated proportions are not clear or do not equal 100%, or the form has not been signed and witnessed correctly),
- at the time of your death, one or more of the persons nominated by you have died or is not your Dependant* or legal personal representative,
- you were legally incapable of making the nomination; or
- the trustee is legally restrained or prohibited from paying your super benefit to one or more of the persons nominated by you.

Binding death benefit nominations cease to have effect after a period of three years from the date you sign your nomination, or re-confirm it to apply for a further three years, unless revoked by you earlier. It would also cease to have effect if you are subject to a Court Order at the time of your death, that prohibited you from making a binding death benefit nomination or required you to amend or revoke a nomination, or if (and for so long as) the trustee is prevented from paying out your death benefit in accordance with your nomination due to Family Law.

If you need help

For assistance or to access the Privacy Policy and your personal information call NGS Super Customer Service Team on 1300 133 177.

* See Step 2



Step 1 – Complete your personal details

Please print in black or blue pen,
in uppercase, one character per box.



Title Mr Mrs Ms Miss

Date of birth / /

Given names

Surname

Postal address

Suburb

State

Postcode

Daytime Telephone

 -

Mobile

 -

E-mail

Membership number

Membership Category

Industry and Personal

Pension

SA Catholic Plan

Step 2 – Make your nomination

I direct the Trustee of NGS Super to distribute my death benefit to the following people in the proportions shown below, in the event of my death (please attach an additional page if you wish to nominate more than three beneficiaries):

- My estate Percentage of benefit %
- My dependant/s* If you make this selection, please provide full details below

First Nominee

Given names

Surname

Date of birth / /

Percentage of benefit %

Relationship to you

Spouse Child Other dependant (please specify)

Residential address

Suburb

State

Postcode



Step 2 – Make your nomination (cont)

Second Nominee

Given names

Surname

Date of birth / /

Percentage of benefit %

Relationship to you

Spouse Child Other dependant (please specify)

Residential address

Suburb

State

Postcode

Third Nominee

Given names

Surname

Date of birth / /

Percentage of benefit %

Relationship to you

Spouse Child Other dependant (please specify)

Residential address

Suburb

State

Postcode

* Please provide the contact address and date of birth for each of your nominees to assist us to contact them in the event of your death.

** The persons you nominate must be your 'Dependant' or legal personal representative (that is, the executor or administrator of your estate). 'Dependant' is defined as:

- your spouse – whether by marriage, a de facto relationship (including same-sex partners) or a registered relationship under a law of State or Territory (including same-sex partners)
- your children including step-children, adopted children and your spouse's children;
- any other person who the trustee considers is wholly or partially dependent on you at the time of death; and
- any person you have an interdependency relationship with.

Two people (whether or not related by family) have an interdependency relationship if:

1. they have a close personal relationship;
2. they live together; and
3. one or each of them provides the other with financial support; and
4. one or each of them provides the other with domestic support and personal care.

An interdependency relationship will also exist between two people if they have a close personal relationship but do not meet the other criteria as listed above (2, 3 & 4) because either or both of them suffer from a physical, intellectual or psychiatric disability.

Any amounts paid to your legal personal representative would be distributed according to your will, or if you don't have a will, according to the laws of the State in which you resided at the date of your death.



Step 3 – Sign the form

By signing this form I declare that I have read this form and understand that:

- My nomination in this form will be legally binding on the Trustee if it is still valid and in effect at the time of my death.
- My nomination in this form will be invalid if:
 - it has not been completed correctly, or completed prior to my admission to membership of the Fund
 - the persons nominated or my Dependants and/or legal personal representative at the time of my death are no longer alive
 - the Trustee is legally restrained or prohibited from paying my super to one or more of the persons nominated in this form.
- My nomination in this form will expire and cease to have effect:
 - after 3 years, unless I re-confirm, revoke or amend it at an earlier time;
 - if and for so long as the Trustee is prevented from making a payment due to Family Law; or
 - I am subject to a Court Order prohibiting me to make a binding death benefit nomination or requiring me to amend or revoke a binding death benefit nomination.
- The information provided within this form will be used by the Trustee to contact those nominated to determine whether they are still my dependants and/or legal personal representative at the time of my death. The information may be disclosed to the administrator, my employer and other parties as required and I consent to the handling of my personal information in this way.
- This form revokes any prior binding death benefit nomination or nomination of preferred beneficiaries I may have made.

Signature

Date / /

Step 4 – Witness declaration

Witness One (insert full name)

I, confirm that I am at least 18 years of age, am not a person nominated in Step 2 of this form and that the member named above has signed this form in my presence.

Signature

Date / /

Witness Two (insert full name)

I, confirm that I am at least 18 years of age, am not a person nominated in Step 2 of this form and that the member named above has signed this form in my presence.

Signature

Date / /

Please return your completed form to NGS Super, GPO Box 4303, Melbourne, VIC 3001.

Issued by NGS Super Pty Limited ABN 46 003 491 487 AFSL No 233154 as Trustee of NGS Super ABN 73 549 180 515.

