

Family law instructions for payment or entitlement



Our information sheet Super and family law matters available at ngssuper.com.au/pds provides additional information.

If you need help

For assistance call us on 1300 133 177.

This form should be completed by the non-member spouse following the split of the superannuation benefit of a member of NGS Super as per instructions received by the trustee of NGS Super in a court order or agreement. The information in Step 1 of this form is required under Regulation 144 of the Family Law (Superannuation) Regulations 2001.

| Please print in black or blue pen, in capital letters, one character per box. | | |
|---|---------------|------|
| Non-member spouse details | | |
| Title | Date of birth | |
| Mr Mrs Ms Miss Other | | |
| Given names | | |
| Surname | | |
| Previous name (if applicable) | | |
| Residential address (must be advised) | | |
| Suburb | State Postcoo | le |
| | | |
| Postal address (if different to above) | | |
| Suburb | State Post | code |
| | | |
| Phone number | Mobile | |
| | | |
| Personal email | | |
| Legal Representative (If applicable) | | |
| Name | Date of birth | |
| Postal address (if different to above) | | |
| C. L L | Chata | |
| Suburb | State Post | code |
| Email address | | |
| | | |
| Existing member | | |



| Name of your spouse Spouse's member number | |
|---|--|
| Spouse's member number | |
| Spouse's member number | |
| | |
| | |

Step 3. Attach documentation if your personal details have changed

Name and Date of birth changes – see the 'Completing proof of identity' fact sheet on the website ngssuper.com.au/poi.

Address changes – attach a copy of a recent bill, mail item or driver's licence that displays your new residential or postal address.

If the required supporting documentation is not provided, the payment of your benefit will be delayed.

Step 4. Provide payment instructions

- It is important that you provide all of the information requested on this form to ensure prompt payment of your entitlement
- Appropriate proof of identity (as detailed on this form) MUST accompany these payment instructions
- The completed form must be received by the Trustee within 28 days of the date specified in the attached letter
- If you do not provide the Rollover Fund's Unique Superannuation Identifier (USI) **OR** your new member account number, your benefit cannot be processed. In the event that you do not provide this information, you will be contacted by NGS Super
- Failure to provide the required information, or failure to provide it within the required time, may result in your benefit being transferred to the Australian Taxation Office

| otion 1: Pay as cash – (y | ou must be eligible and complete Step 5 for preservation declaration) |
|--|--|
| Are you an Australian | or New Zealand citizen or an Australian Permanent Resident? |
| Yes No | |
| payment request is aff | ash (and the rate of any applicable tax) may depend upon your residency or citizenship status. If you ected by your residency/citizenship status, you will be advised accordingly. Failure to respond to the esult in delays in the processing of your payment(s). |
| Pay \$ | gross (tax may be payable on cash payments – see our Fees, costs and tax guide available on ou |
| | formation). If you are under preservation age or if you do not meet a condition of release as shown in only be made from your unrestricted non-preserved component (if any). |
| | n only be made from your unrestricted non-preserved component (if any). |
| Step 5, payment ca | on only be made from your unrestricted non-preserved component (if any). available of your account details such as a statement that shows your BSB number, your bank account |
| Step 5, payment ca Maximum amount a Please provide proof | on only be made from your unrestricted non-preserved component (if any). available of your account details such as a statement that shows your BSB number, your bank account |
| Step 5, payment ca Maximum amount a Please provide proof number and your according to the step of the | on only be made from your unrestricted non-preserved component (if any). available of your account details such as a statement that shows your BSB number, your bank account bunt name. |
| Step 5, payment ca Maximum amount a Please provide proof number and your according institution | of your account details such as a statement that shows your BSB number, your bank account bunt name. |

Continued over

incorrect bank account details you provide us.



Step 4. Provide payment instructions (continued) Option 2: Rollover to another fund (select one option $\sqrt{\ }$) If you are rolling over you may be requested to provide additional information to enable the Trustee to confirm the validity of the Fund.) Maximum amount available Total remaining after above cash payment in option 1 (insert amount to be transferred) (If you wish to transfer part of your super to more than one fund, copy this section of the form and complete it for each fund, inputting the amount to be transferred to each fund. Note that payment will be allocated from any unrestricted non-preserved amount first, then from any restricted non-preserved amount, followed by your preserved amount. This order will apply to the first rollover fund listed on these instructions, followed by the remaining funds in the order listed.) Please provide details of the fund to which you are transferring Name of fund This fund is a Self Managed Super Fund (SMSF) Note: All payments to an SMSF will be paid by EFT. Please ensure the SMSF bank details are up-to-date on the ATO's website abr.gov.au. Please provide a copy of the SMSF's bank account statement. Payments can only be processed if you have provided your SMSF's Electronic Service Address (ESA). Name of Financial Institution **BSB** Account Number Account name Electronic Service Address (ESA)1 Fund address Suburb State Postcode Contact person (if applicable) Phone number Fund ABN¹ Unique Superannuation Identifier (USI)1 Membership or Policy number¹ If exempt from an ABN, tick the reason for exemption: Exempt Public Sector Super Scheme Retirement Savings Account A rollover to another fund cannot occur without the ABN, USI/ESA and Membership/Policy Number of the fund you are transferring to. If you are rolling over to an SMSF, you will also need to supply a copy of a bank statement of the Fund. If your rollover fund does not have an ABN you will need to contact the fund directly to request evidence of their complying status, such as their notice of compliance.



Step 5. Complete preservation declaration

Please complete if you are selecting Option 1 (pay as cash) at Step 4.

A portion of your benefit may be subject to preservation. Please complete one of the following declarations and ensure that your proof of identity (requested at Step 6) shows your date of birth.

(select one option $\sqrt{}$)

- I am at least 60 years of age, have ceased employment and have permanently retired² from the workforce
- I am at least 60 years of age and have ceased a gainful employment³ arrangement since attaining age 60, even if I am not permanently retired²
- 🔘 I am at least 65 years of age.
- I do not meet any of the above conditions. I understand I can only make withdrawals from my unrestricted non-preserved component (if available).
- ² Permanently retired is defined as never being gainfully employed again for more than 10 hours per week.
- ³ **Gainful employment** means being employed or self-employed for gain or reward in any business, trade, profession, calling, occupation or employment.

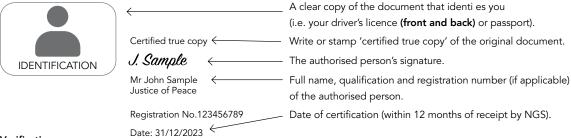
Step 6. Attach proof of identity

For Identification purposes, you **MUST** attach a certified copy of either your driver's licence or passport (or acceptable alternatives). You can have these documents certified by a number of people including either a full-time teacher or by a post office employee with more than two years' continuous service. For a full list of people who can certify documents and acceptable alternative documents, please visit **ngssuper.com.au/poi**. An example of how to certify documents is shown below.

How to certify documents

After sighting the original and the copy and making sure both documents are identical, the certifier must include on EACH page:

- written or stamped 'certified true copy'
- signature and printed full name
- qualification (such as Justice of the Peace, Australia Post employee with more than 2 years' continuous service, etc.)
- date (the date of certification must be within the 12 months prior to our receipt).



Verification

A verification of the certifying party may be performed. If a discrepancy arises, you may be requested to re-certify documentation.

Important note

The information in this document is a guide only and we may request additional documentation prior to any payment.



Step 7. Providing your tax file number

There may be tax implications if you have not yet provided, or choose not to provide, your tax file number (TFN). Whilst it is not compulsory to provide your TFN, not doing so could cost you in the following ways:

• you may have paid more tax than necessary on super contributions made for you by your employer (including SG, salary sacrifice and other contributions) in this financial year. This additional tax can be reversed if you provide your TFN to the fund before the

| end of the financial year, or your earlier payment from the fund. Although you may be able to claim back this additional tax if you later provide your TFN, time limits and other rules may apply, which may affect the size of any refund. | |
|---|---|
| you may pay additional tax on your super payout. However it might be possible to claim this back when lodging your tax return. | |
| • you may miss out on any government Super Co-contributions for which you may be eligible; and | |
| • you may have difficulty locating your super in the future, should you lose contact with your fund(s). | |
| (select one option \checkmark) | |
| My tax file number is | |
| I do not wish to provide my tax file number to the Trustee | |
| Signature Date / / / | / |
| Step 8: Complete the checklist | \ |
| To enable your payment to be processed promptly, please ensure you have correctly completed this form before returning it to the fund. Have you: | |
| Provided your personal details in Step 1 ? | |
| Attached supporting documentation for any change of name, date of birth or address detailed in Step 3 ? | |
| Provided complete payment instructions in Step 4 ? | |
| Signed and dated the form (Step 9)? | |
| If you are requesting payment via EFT, provided proof of your account details such as a statement that shows your BSB number, your bank account number and your account name Step 4 Option 1 . | |
| Completing proof of identity | |
| Have you attached the correct identification as outlined in Step 6 ? | |
| Select the identification you have provided: | |
| One primary identification document or | |
| Two alternative identification documents (one from each of the lists specified) | |
| Is your identification current? If providing an Australian Passport, one that has expired within the last two years is acceptable. | |
| Are your documents correctly certified? Ensure the certifier has included ALL of the following on each page: | |
| Written or stamped 'certified true copy' | |
| Signature and printed name | |
| Date – the date MUST be within twelve months of the date we receive your completed form. | |
| Qualification (such as Justice of the Peace, Australia Post employee with more than two years' continuous service, etc) | |
| | |

Please refer to the Proof of Identity information sheet at ngssuper.com.au/poi for more details on how to certify a document and a list of valid certifiers.



Step 9. Sign the form

By signing this form I understand that:

- information contained in this form will be relied upon and used by the Trustee to process my benefit payment
- there may be delay in payment if my details have recently changed
- I consent to my personal information being collected, disclosed and used as described in the **Privacy Collection Statement**.

| Signature | X | Date | / | |
|-------------|---|--------------|---|--|
| Please retu | ırn your completed form together with your proof of | identity to: | | |
| NGS Supe | r | | | |

GPO Box 4721 MELBOURNE VIC 3001

Privacy Collection Statement

NGS Super Pty Limited ABN 46 003 491 487 collects personal information from you (or from third parties such as your employer or another super fund) to manage your NGS Super account, keep you informed, improve our products and services or take action on a matter you have contacted us about. If we don't have your personal information, we may not be able to perform these services. We may be authorised to collect your personal information by certain laws, including laws relating to superannuation, taxation and anti-money laundering/counter-terrorism financing.

We disclose personal information as required to manage the Fund, to service providers (including our administrator, our insurer and professional advisers), employers or parties required by law. Personal information may be accessed by service providers overseas. For offshore locations, details of how to access and change your personal information and the privacy complaints process, go to ngssuper.com.au/pcs and <a href="mailto:ngssuper.com.au