

THIRD-PARTY AUTHORISATION FORM

This form allows you to give permission for a third party, such as a financial planner, to access your NGS Super account information. **It does not allow them to transact on your account.** If you want your representative to provide us with instructions on your behalf, you will need to give them formal *power of attorney*. You should talk to a solicitor or the public trustee in your state or territory for information about appointing a *power of attorney*.

Once your completed form has been received by NGS Super, this authorisation will remain in place for 18 months. If you require a longer period, you should consider a power of attorney.

If you need help

If you're unsure of your decision, consider obtaining professional advice. We offer

- advice at no extra cost through our advice Helpline or
- low-cost advice through NGS Financial Planning.

To make an appointment phone us on 1300 133 177 or complete the **Financial planning enquiry form** on our website at ngssuper.com.au/advice

Please send your completed form to NGSAdminTeam@mercero.com or upload it through **Member Online**.

Please return your completed form to:

**NGS Super
GPO Box 4303
MELBOURNE VIC 3001**

or email to NGSAdminTeam@mercero.com

Step 1. Complete your personal details

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



Your member number

Your account number (if known)

Please apply this third-party authority to all my accounts

Given name(s)

Date of birth

Surname

Address

Suburb

State

Postcode

Postal address (if different to above)

Suburb

State

Postcode

Contact number

Personal email

Step 2. Details of third party (financial planner, solicitor, accountant or other)

If you would like to provide third-party authorisation to more than one person, please complete a new form for each person.

I hereby provide third-party authorisation to the following person:

Authorised person's first name

Authorised person's surname

Company (if applicable)

Relationship:

Financial planner

FP authorised rep number

AFSL number

Solicitor

Accountant

other (e.g. spouse) — please advise

Address (if this is a company, this should be the registered business address)

Suburb

State

Postcode

Authorised person's phone number

Authorised person's email

Authorised person's signature

Step 3. Declaration

- I authorise the named person in this form to request and receive information in relation to my NGS Super accounts.
- I understand this authority will apply for 18 months from the date of my signature unless cancelled or changed by me before then.
- I consent to my personal information being collected, disclosed and used as described in the **Privacy Collection Statement**.

Signature

Date

Privacy Collection Statement

NGS Super Pty Limited ABN 46 003 491 487 of **Level 4, 14 Martin Place Sydney NSW 2000** 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, most likely by our administrator's processing centre in India. For any other offshore locations, details of how to access and change your personal information and the privacy complaints process, go to ngssuper.com/pcs and ngssuper.com/privacy or call us on **1300 133 177**.