Accumulation account

Request for withdrawal



Please use this form to:

- make a partial or full cash withdrawal
- apply for early release on compassionate grounds
- roll over to another fund.

If you need help

Getting advice on your NGS Super account is easy. Whether it's a simple check in to understand your options or comprehensive advice for you and your family, we have you covered. Contact us on **1300 133 177** to make an appointment or learn more at **ngssuper.com.au/advice**.

Please print in black or blue pen, in capi				
NGS member number	Title	Da	ate of birth	
			/	/
Given names				
_				
Surname				
Residential address (must be a	dvised)			
·	·			
Suburb			State	Postcode
Postal address (if different to ab	ove)			
Suburb			State	Postcode
Suburb			State	rosicode
Phone number		Mobil	1-	
-none number		WOON	e 	
Personal email				

Step 2. Attach documentation if your personal details have changed

Name and date of birth changes – see Step 9 'Attach proof of identity' section for details of how and what to provide along with who can certify documents. For a full list of people who can certify documents and acceptable alternative documents, please visit 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 3. Employment details (to be completed by all members)					
Your last employer to pay into NGS Super					
Are you still working for this employer?					
Yes No					
If no, what date did you finish? / / /					
Step 4. Complete preservation declara	tion				
Please complete if you are selecting Option 1 (pay as cash) at Step 5					
A portion of your benefit may be subject to preservation. proof of identity (requested at Step 9) shows your date of	Please complete one of the following declarations and ensure that your birth.				
(select one option $\widehat{oldsymbol{psi}}$)					
I am at least 60 years of age and have ceased a gainfu permanently retired ²	ul employment ¹ arrangement since attaining age 60, even if I am not				
I am at least 65 years of age					
I do not meet any of the above conditions. I understa component (if available)	nd I can only make withdrawals from my unrestricted non-preserved				
My application for early release under compassionate	grounds has been approved by the ATO				
My balance is less than \$200 and I have ceased employ NGS Super.	byment with an employer who has a contribution arrangement with the				
¹ Gainful employment means being employed or self-emp or employment.	loyed for gain or reward in any business, trade, profession, calling, occupatio				
² Permanently retired is defined as never being gainfully	y employed again for more than 10 hours per week.				

Step 5. Provide payment instructions If you are intending to claim a tax deduction for personal contributions you have made to your NGS Super account, you should complete the Notice of intent to claim or vary a deduction for personal super contributions to claim a tax deduction before requesting a withdrawal. You will not be able to claim a tax deduction if the withdrawal occurs first. Find out more at ngssuper.com.au/deduction Please provide instructions on how you want your benefit paid by selecting one of the payment options below Option 1: Pay as cash – you must complete Step 4 for preservation declaration Are you an Australian or New Zealand citizen or an Australian Permanent Resident? The ability to pay as cash (and the rate of any applicable tax) may depend upon your residency or citizenship status. If your payment request is affected by your residency/citizenship status, you will be advised accordingly. Failure to respond to the above question may result in delays in the processing of your payment(s). () Pay **\$** gross (tax may be payable on cash payments - see our fact sheet Fees, costs and tax guide available on our website for more information). If you are under preservation age or if you do not meet a condition of release as shown in Step 4, payment can only be made from your unrestricted non-preserved component (if any). Please retain \$ in my NGS Accumulation account and pay out the remainder (a minimum of \$10,000 must be retained) Close my account and pay my total account balance (including my preserved benefit where my total account balance is \$200 or less) Please provide details of how you would like to receive your payment: Cheque (Cheques can only be made in your name) Cheque (Cheques can only be made in your name) EFT paid directly to my financial institution (bank/credit union/building society account) Please provide proof of your account details such as a statement that shows your BSB number, your bank account number and your account name. Financial institution Account held in the name of **BSB** Account Number Money cannot be paid into a credit card account or a third party account. We will take care to ensure your money is paid in line with the details you have provided. However, we accept no responsibility for any loss which occurs as a result of incorrect bank account details you provide us. If the bank rejects the payment of your money, we will pay you by cheque. Option 2: Early release of your superannuation benefit on compassionate grounds You will also need to apply online through my.gov.au. Further details can be found at ato.gov.au. I have applied for early release of super through the ATO by completing their online form. My application date

Continued over

I have attached a copy of my ATO approval for early release of super.

Step 5. Provide payment instructions (continued)	Note: If you request to roll over the full balance of		
Option 3: Rollover to another fund (select one option $\sqrt{}$)	your account and your employer is currently paying contributions into your NGS Super account, you must		
Total amount (if available under the rules of the Fund)	notify your employer prior to the rollover, to ensure		
Total remaining after above cash payment	your future contributions are paid to your other fund. If you don't, your employer may make further		
Please retain \$, in my NGS Accumulation account and transfer the remainder (a minimum of \$10,000 must be retained)	contributions for you into NGS Super, where a new account may be set up for you and fees and insurance premiums may be deducted.		
A partial withdrawal of \$,,			
(If you wish to transfer part of your super to more than one fund, copy inputting the amount to be transferred to each fund. Note that payme followed by your preserved amount. This order will apply to the first remaining funds in the order listed.)	ent will be allocated from any non-preserved amount first,		
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 abr.gov.au. Please provide a copy of the SMSF's bank account statem your SMSF's Electronic Service Address (ESA). Name of financial institution			
Account Number Account name Electronic Service Address (ESA) ³			
Fund address			
Suburb	State Postcode		
Fund contact number			
Fund ABN³	Unique Superannuation Identifier (USI) ³		
Membership or Policy number ³			
If exempt from an ABN, tick the reason for exemption:			
Exempt Public Sector Super Scheme Retirement Savings Accou	int		
2.5pt. abile decter daper deficition			
³ A rollover to another fund cannot occur without the ABN, USI/ESA and mer If you are rolling over to an SMSF, you will also need to supply a copy of a bahave an ABN, you will need to contact the fund directly to request evidence	ank statement of the Fund. If your rollover fund does not		

Step 6. Provide investment option details				
Your withdrawal will normally be made to have withdrawals made from spe	ade in the same proportions as your selected investment options. However, you may elect			
Make my withdrawal in the same proportions as my account balance				
Make my withdrawal from the fol	lowing options:			
Percentage to be withdrawn	Pre-mixed options			
%	Diversified (MySuper) — default investment option			
%	High Growth			
%	Balanced			
%	Defensive			
%	Indexed Growth			
	Sector-specific options			
%	Australian Shares			
%	International Shares			
%	Infrastructure			
%	Property			
%	Diversified Bonds			
%	Cash & Term Deposits			
1 0 0 %	TOTAL			

Step 7. Confirm if splitting contributions

Should you wish to split your super contributions with your spouse for the current or previous financial years, you will also need to complete and return a **Contribution splitting form** available at **ngssuper.com.au/forms**. Note that contributions splits cannot be processed after your benefit payment has been made, so it is important that any split request is lodged with (or before) these payment instructions.

Find out more in our fact sheet Split super contributions with your spouse available at ngssuper.com.au/PDS

Tick here if you intend to lodge a split request either before or with this form.

Step 8. Advise your tax file number on attached form (optional)

Should you choose not to provide your tax file number, additional tax may be deducted. Please refer to the **Providing your tax file number form** for details.

Step 9. Attach proof of identity

For identification purposes, you MUST attach a certified copy of either your driver's licence (front and back) 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.

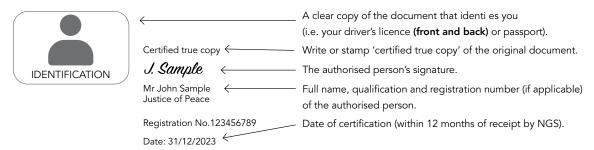
I have attached a certified copy of the appropriate proof of identity.

Failure to provide appropriate proof of identification may result in the processing of your payment(s).

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.

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

Step 10. Complete the checklist

To O US H

е е	nable your payment to be processed promptly, please ensure you have correctly completed thisw form before returning it to
ave	e you:
) F	provided your member details in Step 1 ?
) a	attached supporting documentation for any change of name, date of birth or address detailed in Step 2?
) F	provided complete payment instructions in Step 5 ?
(Other documents requested in Step 5:
(If you are requesting early release of your super benefit on compassionate grounds (option 2), have you applied with the ATO for early release?
(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 5 option 1 .
I	If you are transferring to a Self Managed Super Fund in Step 5 option 3, have you provided:
(SMSF bank account statement?
(Electronic Service Address?
) s	signed and dated the form in Step 11 ?

Continued over

Step 10. Complete the checklist (continued)				
Completing proof of identity				
Have you attached the correct identification as outlined in Step 9 ? S	elect the identification you have provided:			
One primary identification document or				
Two alternative identification documents (one from each of the li	sts specified)			
Is your identification current? If providing an Australian Passport, one	that has expired within the last two years is acceptable.			
Is your document 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 r	eceive your completed form			
Qualification (such as Justice of the Peace, Australia Post employee with more than two years' continuous service, etc)				
Please refer to ngssuper.com.au/POI for more details on how to certify a	a document and a list of valid certifiers.			
Step 11. Sign the form				
By signing this form I understand that there may be a delay in payment i	-			
I consent to my personal information being collected, disclosed and use	d as described in the Privacy Collection Statement.			
X				
Signature	Date / / / /			
Send your completed form together with your proof of identity to:				
NGS Super				
GPO Box 4303				
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, 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.au/pcs** and **ngssuper.com.au/privacy** or call us on **1300 133 177**.

Tax file number notification

In line with the Superannuation Industry (Supervision) Act 1993, the Trustee of NGS Super is authorised to ask for your tax file number (TFN). The Trustee will only use your TFN for lawful purposes. These purposes may change in the future if there are changes to legislation.

The Trustee may pass your TFN to any other super fund or account to which your super is transferred in the future unless you request in writing that this not be done.

By providing your TFN:

- we will be able to accept all types of contributions made by or for you (some limits may apply)
- you can avoid paying tax at a higher rate than would otherwise apply on your contributions
- you can avoid paying tax at a higher rate than would otherwise apply on your super benefit
- it will be easier for you to find your super in the future and ensure that you receive all of your super benefits when you retire.

Choosing not to provide your TFN is not an offence. However, if you don't provide your TFN now or in the future:

- we will only be able to accept contributions made for you by your employer. No other contributions, for example after-tax contributions, can be accepted
- you may pay more tax on contributions made for you by your employer. In some circumstances you may be able to claim back this additional tax, however time limits, fees and other rules may apply additional tax, however time limits, fees and other rules may apply
- you may pay more tax on your super benefit than you would otherwise (although you can claim this back when you lodge your tax return).

If you wish to provide your TFN, please complete this form and return it with your Request for withdrawal form.

Please note that your signature will serve as an acknowledgment that you understand the circumstances in which your TFN may be collected and used.

Given names		
Surname		
Date		
/ / /		
NGS member number		
(select one option $\widehat{\sqrt{\ }}$)		
I have previously provided my TFN		
My TFN is		
I do not wish to provide my TFN		
Signature	Date / /	