



# Superannuation and family law

## Payment instruction form *(for spouse to complete)*

This form is to be completed by the non-member spouse following the split of the Rest member's superannuation benefit as advised by a court order or superannuation agreement. Please read Section 8 - 'Important notes' on page 4 before completing this form.

Please write in **BLOCK LETTERS** and use a **BLACK** or **BLUE** pen. This request will be invalid if unsigned and undated.

Once you've completed and signed this form, please mail to: **PO Box 350, Parramatta NSW 2124.**

### Section 1: Rest member personal details

|                            |                               |                      |
|----------------------------|-------------------------------|----------------------|
| Mr/Mrs/Ms/Miss/Dr          | Gender                        | Surname              |
| <input type="text"/>       | <input type="radio"/> (M/F)   | <input type="text"/> |
| Given name(s)              |                               |                      |
| <input type="text"/>       |                               |                      |
| Date of birth (dd/mm/yyyy) | Rest member number (if known) |                      |
| <input type="text"/>       | <input type="text"/>          |                      |

### Section 2: Non-member spouse details

|                            |  |                      |
|----------------------------|--|----------------------|
| Mr/Mrs/Ms/Miss/Dr          | Gender   | Surname              |
| <input type="text"/>       | <input type="radio"/> (M/F)  | <input type="text"/> |
| Given name(s)              |  |                      |
| <input type="text"/>       |  |                      |
| Date of birth (dd/mm/yyyy) | Temporary number <i>(or if applicable, current Rest member number)</i> |                      |
| <input type="text"/>       | <input type="text"/>   |                      |
| Unit number                | Street number  | Street name          |
| <input type="text"/>       | <input type="text"/>   | <input type="text"/> |
| Suburb/Town                | State  | Postcode             |
| <input type="text"/>       | <input type="text"/>   | <input type="text"/> |
| Telephone (business hours) | Mobile   |                      |
| <input type="text"/>       | <input type="text"/>   |                      |
| Email address              |  |                      |
| <input type="text"/>       |  |                      |

Your Tax File Number (TFN)

It is not compulsory to provide your TFN. However, if you do not provide your TFN, we may have to deduct a higher tax rate from your account when your benefit payment is made. Refer to the TFN information in Section 7.

### Section 3: Your payment instructions

#### 3A - to be completed for a cash withdrawal (please tick one box)

You will need to provide proof of identity (see Section 5) and you must meet one of the following criteria to make a cash withdrawal (please tick):

- You are aged 55 or over, have ceased employment and do not intend to work 10 or more hours per week in the future
- You are aged 60 or over and finished work with your employer after you turned age 60
- You are aged 65 or over
- You are entitled to an unrestricted non-preserved amount

Please choose one of the following:

- Total amount (please go to Section 4)
- Partial amount: \$  (please go to either Section 3B or 3C)

#### 3B - to be completed for a payment to a Rest account

Rest member number

OR Please create a new Rest Select account  (see Section 8)

- 100% rollover to a Rest account
- Partial rollover (amount to be rolled over to your Rest account will be the balance of your benefit after the cash withdrawal)

#### 3C - to be completed for a payment to be rolled over to another superannuation provider

- 100% rollover  Partial rollover (amount to be rolled over will be the balance of your benefit after the cash withdrawal)

Make cheque payable to\*

Fund name

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Your Membership number in new fund<sup>^</sup>

USI of new fund<sup>^</sup>

ABN of new fund<sup>^</sup>

\* IMPORTANT: If you are transferring to a Self-managed superannuation fund (SMSF), the benefit payment cheques can only be sent to the address registered on the Super fund look up website at [www.superfundlookup.gov.au](http://www.superfundlookup.gov.au). Please ensure that your SMSF address is up to date with the ATO prior to submitting your benefit payment request to avoid delays.

You will need to provide us with proof of identity before we can process the rollover to your SMSF. Please see Section 5 'Proof of Identity'.

<sup>^</sup> To enable us to process your rollover request you must quote your membership number and the USI (Unique Superannuation Identifier) and the ABN of the rollover fund. You can find your rollover fund's ABN and USI by visiting their website or referring to their Product Disclosure Statement. If this information is not quoted, we may not be able to process your application.

### Section 4: Authority - your signature must be provided below

To the Trustee, I declare that:

- The information I have provided on this form is correct.
- I request payment of my benefit as indicated above.
- I understand family law splits incur a \$50 fee split between the member spouse and non-member spouse, and \$25 will be deducted from my benefit when this transaction is processed.
- I have read and understand the 'Important notes' and 'TFN information'.

Signature of non-member spouse

(dd/mm/yyyy)

## Section 5: Proof of Identity (for cash withdrawals and payments to SMSF's)

### How to certify your proof of ID

You need to provide certified\* copies of documentation<sup>^</sup> to prove you are the person to whom the superannuation entitlements belong.

#### Acceptable documents

The following documents may be used

#### EITHER

One of the following documents only

- Current driver's licence or passport that contains your photograph and signature
- Current card issued by a State or Territory for the purpose of providing your age that contains your photograph

#### OR

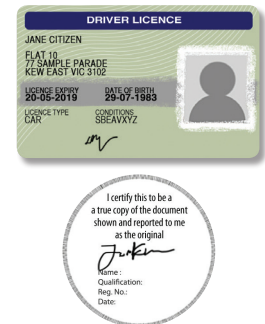
- Birth/Citizenship Certificate or Centrelink Pension Card **AND**
- Centrelink payment letter or Government or local council notice (<1 year old) with your name and address.

<sup>^</sup> Documents that are not written in English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above.

### \*Certifying your proof of ID in 4 easy steps

This example to the right shows how a certified copy of your proof of identity should look. The steps to follow are:

1. take a photocopy of the original ID that identifies you (i.e. your driver's licence)
2. take both your original ID and the photocopy to an authorised person who can certify (i.e. your police station, see 'who can certify' below for full list)
3. get an authorised person to stamp or write 'I certify this to be a true copy of the document shown and reported to me as the original', followed by their signature, full name, qualification, registration number (if applicable) and the date.
4. attach the certified copy of your proof of ID to your completed benefit payment form.



### \*Who can certify?

- a Justice of the Peace
- a pharmacist, medical practitioner, nurse, dentist, optometrist, chiropractor, physiotherapist, psychologist or veterinary surgeon
- a teacher employed on a full-time basis at a school or tertiary education institution
- a police officer
- a notary public
- a bank, building society, credit union or finance company officer with 5 or more years of continuous service
- an officer with, or authorised representative of, a holder of an AFSL with 5 or more years of continuous service with one or more licensees
- a permanent employee of the Commonwealth or a Commonwealth authority, a State/Territory or a State/Territory authority or a local government authority, with 5 or more years of continuous service
- a Member of the Parliament of the Commonwealth, the Parliament of a State/Territory or local government authority of a State/Territory
- an Australian consular or diplomatic officer (within the meaning of the *Consular Fees Act 1955*)
- a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants
- a registrar or deputy registrar of a court
- a person enrolled as a legal practitioner on the roll of the Supreme Court of a State/Territory or the High Court of Australia
- a judge or magistrate of a court

## Section 6: Proof of identity - change of name

### Have you changed your name or are you signing on behalf of another person?

If you have changed your name or are signing on behalf of the applicant, you will need to provide a certified linking document that proves a relationship exists between the two (or more) names.

The following table contains information about suitable linking documents:

| Purpose                           | Suitable linking documents   |
|-----------------------------------|--|
| Change of name                    | Marriage certificate, deed poll or change of name certificate from Births, Deaths and Marriages Registration Office. |
| Signed on behalf of the applicant | Guardianship papers or Power of Attorney.  |

## Section 7: Tax File Number (TFN) information

You are not required to provide your TFN to Rest. However, if you do not provide your TFN, you may be taxed at the highest marginal tax rate plus the Medicare levy on contributions made to your account in the year, compared to the concessional tax rate of 15%. Rest may deduct this additional tax from your account. Under the *Superannuation Industry (Supervision) Act 1993*, Rest 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 a legislative change. The Trustee of Rest will disclose your TFN to another superannuation provider when your benefits are being transferred, unless you request the Trustee of Rest in writing that your TFN not be disclosed to any other superannuation provider.

**For more information please contact us on 1300 300 778 or the ATO Superannuation helpline on 13 10 20.**

## Section 8: Important notes

### If you wish to retain your payment in Rest, complete 3B.

If you are a current member of Rest, you can roll your payment into your existing account. If you are not a current member and would like to roll your payment to a new Rest account, please see the Rest Select Product Disclosure Statement enclosed and provide the appropriate forms to us.

### If you wish to claim your benefit as a cash payment, complete 3A

Part of your benefit may be available to you if it includes any restricted or unrestricted non-preserved benefits

Restricted non-preserved benefits are non-preserved benefits accrued in a fund before 1 July 1999. This component is generally made up of contributions made by your spouse before 1 July 1999 that have not been claimed as a tax deduction. These benefits cannot be paid to you until you satisfy a condition of release.

Unrestricted non-preserved benefits are superannuation benefits to which no payment restrictions apply. They may be paid out at any time on demand, irrespective of your age, employment situation or financial position.

If you want your whole benefit to be paid to you, you must either:

- have reached your preservation age (refer to table) and left your employer and:
  - have genuinely retired; or
  - are working less than 10 hours per week; or
- are age 60 or above and have left or changed employers.
- have reached age 65

### RELEVANT PRESERVATION AGE

| Date of Birth              | Preservation Age |
|----------------------------|------------------|
| Before 1 July 1960         | 55 years         |
| 1 July 1960 - 30 June 1961 | 56 years         |
| 1 July 1961 - 30 June 1962 | 57 years         |
| 1 July 1962 - 30 June 1963 | 58 years         |
| 1 July 1963 - 30 June 1964 | 59 years         |
| After 30 June 1964         | 60 years         |

### If you wish to rollover 100% of your benefit to another superannuation fund, complete 3C.

We will send the amount directly to the superannuation fund of your choice. Please ensure you quote the Australian Business Number (ABN) so your rollover is not delayed. In addition to the new fund's ABN, you must also provide your membership number of the fund you are rolling into, the name of the product you are rolling into and its associated USI (Unique Superannuation Identifier). If this information is not quoted we may not be able to process your application.

### Your privacy is important to us

When your personal details are provided to Rest, they are securely stored and are accessible only to authorised personnel for the purpose of maintaining your account and any insurance arrangements. If you would like to see Rest's Privacy Policy, visit [www.rest.com.au](http://www.rest.com.au) or contact us on 1300 300 778 for a copy of the Policy.