Australian
Reward
Investment
Alliance

Deferred benefit

Continuing with Same Employer

Benefit Application Form & Explanatory Notes

Use this form to claim your CSS deferred benefit if you are continuing employment with the same employer who contributed to your CSS super (ie. the same employer you were with when you deferred your CSS benefit).

Before making any decisions, please read the **CSS Product Disclosure Statement** at **www.css.gov.au** or call us on **1300 000 277** for a copy.

Please read these explanatory notes first

Use these explanatory notes to assist you to complete the attached benefit application form. They are not intended to provide a detailed explanation of your benefit options.

Separate the notes from the form (if joined) so that you can refer to them as you complete the application form.

Where can you find out more about your benefit entitlements?

There are publications on *Tax and Your CSS Benefit* and *Preservation of Benefits* which you should read. You can view or download this information at **www.css.gov.au**

For more information, please do not hesitate to contact us by:

> Phone: **1300 000 277**

> Email: members@css.gov.au

> Fax: (02) 6272 9612

Forms you need to complete when claiming your CSS deferred benefit

> the attached Benefit Application form

> a 'Tax File Number Declaration' is obtainable from the Australian Taxation Office (ATO), or designated Newsagents that distribute ATO forms.

Preservation age restrictions

Because you are continuing in employment with the same employer, you cannot claim your deferred benefit until you reach your preservation age. Your preservation age is based on your date of birth as follows:

Date of Birth	Preservation Age
Before 1/7/60	55 years
1/7/60–30/6/61	56 years
1/7/61–30/6/62	57 years
1/7/62–30/6/63	58 years
1/7/63–30/6/64	59 years
After 1/7/64	60 years

Lump sum payments have conditions

If you want to take your benefit as a lump sum, then you cannot take it as cash in hand, but rather you must roll it over to a complying fund or Retirement Savings Account (RSA).

Take care when completing this form

Please complete this form carefully as any incorrect or incomplete information may delay processing of your payment.

Section A – Personal details

This section enables us to identify you and any other potential beneficiary, and tells us where we can contact you.

Relationship details

Details of your relationship status, including same sex or opposite sex de facto relationships, should be provided. You may wish to include a copy of your marriage certificate or registered relationship certificate with your application. This would speed up the process in the event that a spouse's benefit becomes payable.

For the definition of a spouse for death benefits see the **Death benefits** fact sheet at **www.css.gov.au**

Contact details

The postal address you provide is where all correspondence will be sent.

A contact phone number is also required in case we need to contact you regarding the payment of your benefit.

If you have an email address, inclusion of your current email address will be helpful.

Section B – Identification requirements

To protect against fraud, money laundering, terrorism financing and safeguard your benefit, we need you to provide documentation to prove your identity before we can process your benefit request.

You need to provide certified copies of four identifying documents listed in Section B on the application form. Faxed copies are not acceptable. The person certifying the documents must attest that the documents are true copies, and that you are the valid holder of the identification.

We will store copies of identification electronically in a secure environment and securely destroy the paper copies. We will use all copies only for the purpose of confirming your identity.

If you are providing copies of bills or statements, you should black out any personal financial information or details of transactions in order to protect your privacy.

Section C – Employment details

You must sign the Employment Status Declaration confirming that you remain employed by the same employer you were with when you preserved your CSS benefit. You must also confirm the name of that employer.

Note: There are penalties for making false declarations in respect of benefit claims.

Section D – Information acknowledgment

Please complete this acknowledgment that you have received and understood sufficient information to be able to make an informed choice of how you would like your benefit paid and that you have been advised to read the **CSS Product Disclosure Statement** before completing this form.

You are making a formal election under the provisions of the *Superannuation Act 1976*. This election is binding and cannot normally be changed, although ARIA may, at its absolute discretion, agree to cancel an election in certain circumstances.

Information sources are shown at the start of these explanatory notes and it is ***strongly recommended*** that you make use of them ***before*** proceeding to complete this application form.

You should also note that, if your benefit has been paid and you then change your mind about the payment arrangements, you will have to pay a fee for the re-issuing of the payment.

Section E - Claim date and benefit options

Claim date

This section is where you nominate the date from which you would like to claim your CSS deferred benefit. The deferred benefit pension commences with effect from the day after this claim date.

Because you are continuing in employment with the same employer, the date you nominate must be a date on or after you reach your preservation age (refer to Preservation Age Restrictions).

You must provide a claim date when completing your benefit application form. If you do not nominate a date the benefit application form will be returned to you.

The claim date is also used to determine the earnings rate that will be applied to your deferred benefit entitlements. It is, therefore, not possible for deferred benefits to be claimed retrospectively, i.e. it is not possible to nominate a claim date that is earlier than the date on which you are completing the benefit application form.

Benefit options

This section contains the benefit options that are available to CSS members who are claiming their CSS deferred benefit whilst remaining with the same employer. Each option requires a signed election by the applicant for the benefit choice to be valid. **Only make one choice**, otherwise your benefit application will be invalid and payment will be delayed. Please note that your election may be subject to the new proportioning rules.

Your benefit may also be subject to deduction of any outstanding superannuation contributions surcharge debt at the date of determination. (See **Section G** on surcharge for more information).

Option 1–maximum pension, no lump sum

This option provides you with a standard CPI-indexed pension together with an additional non-indexed pension purchased by your member and productivity components.

Option 2–maximum pension and productivity lump sum

This option provides you with a standard CPI-indexed pension together with an additional non-indexed pension purchased by your member component only.

The productivity benefit must be rolled over and you must provide us with the name of a rollover fund in **Section H1**.

Option 3–standard pension and lump sum

This option provides you with a standard CPI-indexed pension plus a lump sum of your member and productivity components.

The lump sum benefit must be rolled over to a complying fund - see **Section H1**.

Option 4–lump sum only, no pension

This option is only available to former Provident Account members who have reached age 60. The election provides you with a lump sum calculated on the basis of three times your accumulated basic contributions and earnings, plus any supplementary contributions and your productivity component.

The lump sum benefit must be rolled over and you must provide us with the name of a rollover fund in **Section H1**.

Section F – Election for reduced initial pension benefit in return for increased spouse and/or children's pension benefit

This section only applies to you if you are claiming all or some of your benefit as a pension (i.e. benefit options 1, 2 or 3).

The *Superannuation Act 1976* gives contributing and deferred or postponed benefit members a choice of rate for the reversionary pension payable on death.

If you elect to take all or part of your benefit as a pension then, should a spouse's pension become payable, your spouse will be entitled to 67% of your pension entitlement at date of death.

You may, however, elect to receive a reduced pension now in return for your spouse receiving an increased pension should a spouse's pension become payable.

If you elect for the reduced pension, your pension will be reduced to 93% of that payable had you not elected for this option. In return, an eligible spouse would be entitled to a pension of 85% of your reduced pension benefit.

Benefits to eligible children/orphans would also be increased under this option.

You need to complete this section to therefore advise us that you either,

a) do not wish to take a reduced pension of 93% of your initial pension entitlement, or

b) elect to take a reduced pension of 93% of your initial pension entitlement.

You should ensure that you are fully aware of the future implications in relation to this choice. In particular, you should be aware that you cannot change your choice should your situation change in relation to your spouse and/or children after your election is made.

If you need more information before making your choice, please do not hesitate to contact us on **1300 000 277**.

Section G – Superannuation Contributions Surcharge

A superannuation surcharge is payable by members whose adjusted taxable income (taxable income plus the value of employer contributions to their superannuation) exceeded certain levels before 1 July 2005. Also, members who had declined to provide their tax file number (TFN) for superannuation purposes may have had surcharge assessed.

The surcharge was abolished from 1 July 2005 however any existing liabilities prior to this date must still be met.

If you had a surcharge debt advised to you by either the ATO or CSS, and you have not paid off the debt, this debt will be actioned as per your benefit application.

If the ATO advises you of a surcharge liability after the date you take your benefit, you should pay the debt direct to the ATO.

Section H – Benefit payment arrangements

This section allows to nominate where you would like your lump sum rolled over to.

All rollovers must be made to a complying fund or Retirement Savings Account (RSA), or be used to purchase an annuity.

CSS will not deduct tax from any amount rolled over to a rollover fund, however the untaxed components of the lump sum will be taxed at 15% by the receiving fund. This will alter the nature of the amount from 'untaxed' to 'taxed'.

A higher rate of tax will apply to transfers over $1.1 million from an untaxed scheme to a taxed scheme.

Lump sum payments

H1–Rollover fund nominations

You can nominate up to two rollover funds or RSAs to receive your lump sum benefit.

When completing this section you should include sufficient information to enable us to identify the rollover fund or RSA such as the name and Australian Business Number (ABN). You must also provide your Membership Number for the rollover fund or RSA or, if you have not yet been issued with a Membership Number, a Superannuation Product Identification Number (SPIN). These details can be obtained from the rollover fund or RSA concerned. Failure to provide these details will result in delays in the payment of your benefit.

Bank account details

Complete this section to provide us with bank account details for the payment of your pension.

H6–BSB number

Please ensure that you include your financial institution's Bank and State Branch (BSB) code, otherwise your payment may be delayed. If you do not know the BSB code, ask your financial institution.

H7–Account number

Please ensure that you use a correct account number–note that it has a maximum of nine (9) digits and is not necessarily the same as your Automatic Teller Machine (ATM) access card number.

It is very important that these details are correct and legible, as incorrect BSB or account numbers can lead to payments going astray or being returned to us.

Return of payment from the banking system and reissue can take a minimum of two weeks to finalise.

H8–Account names

Benefit payments can only be made to an account that is in your name. The account can be in your name alone, or in joint names. If it is a joint account one of the names must be yours.

Section I – Taxation matters

I1–Start date for taxation purposes

For taxation purposes, your lump sum benefit is called a Superannuation Lump Sum Payment.

The start date relates to the date your eligible service period (ESP) commenced and is used to calculate the various components of your Superannuation Lump Sum Payment for taxation purposes

Generally, your ESP is the number of days between the date you commenced the employment to which your CSS deferred benefit relates, (which may be earlier than the date you joined the CSS) and the date your payment is made. If your CSS membership commenced before 1 July 1983 and you have a Long Service Leave start date that is earlier than your CSS start date, that earlier start date applies as your ESP start date. Earlier periods of employment for which you paid a transfer value into the CSS are added to your ESP. If this is the case, please fill in the start date of that earlier service.

If you do not show a date in this section, we will use the date on which you joined the CSS Scheme as your start date.

I2 –Your Tax File Number

In accordance with the *Taxation Laws Amendment (Tax File Numbers) Act 1988*, we are required to deduct PAYG tax at the highest marginal tax rate plus the Medicare levy from benefits if a person does not provide a Tax File Number (TFN).

If you have not been issued a TFN you should lodge an *Australian Taxation Office Application/Enquiry* form with the Australian Taxation Office (ATO). Forms are available at **www.ato.gov.au** or all ATO branches. You must provide proof of identity at the time you lodge the form.

I3 –Approval to advise your TFN to Rollover funds

We will provide your TFN to the receiving fund unless you instruct us not to. Please note that there are consequences for not supplying your TFN to a fund.

I4–'Tax File Number Declaration'

If you have chosen to receive all or part of your benefit as a pension (Section E—Options 1, 2, or 3) and you wish to claim the tax free threshold and/or any available offsets and deductions against your pension benefit, you should complete a 'Tax File Number Declaration'. These declarations are obtainable from the ATO or designated newsagents that distribute ATO forms.

After your benefit is paid

Documents you may receive from us.

After your benefit is paid you will receive some documents associated with your entitlements. Depending on which benefit you choose, these documents may include:

- a benefit payment letter, advising you of your benefit entitlement and when your payment will be made
- a *Rollover Benefits Statement*, in duplicate for each rollover nominated in Section H, which shows the breakup, for taxation purposes of each fund you nominate
- a rollover payment cheque (or cheques), made payable to your nominated rollover fund(s), or
- a pension group certificate and twice yearly pension increase advice (which are sent to you in January and July each year if you are receiving a pension).

Do NOT lose these documents. They may be required to complete tax returns, lodge rollovers, or apply for Centrelink benefits, etc. It will take some time to issue replacements.

Rollover Process

All rollover cheques will be made payable to your nominated complying fund or RSA, and sent to you at your home address, unless extenuating circumstances exist. It is your responsibility to lodge them with the rollover fund with a copy of the Rollover Benefits Statement. Please do not send any rollover forms to us.

What next?

Please send your complete form to us: CSS Benefit Payments, PO Box 22 BELCONNEN ACT 2616.

Note: We cannot start the payment of your benefit until **after** the date you have nominated for payment of your beneft. You may, however, submit your application form before this date. This will allow us to check that all documentation and information has been provided well ahead of your exit.

Privacy

ARIA and its Administrator, ComSuper are collecting the information on this form for the following reasons:

> to confirm your identity
> to assess your eligibility for payment of the benefit
> to pay your benefit
> to contact you.

ARIA and ComSuper are committed to protecting any personal information we hold about you. Your information will not be used for any other purpose or disclosed to another party unless:

> you authorise us to do so
> the disclosure is authorised by law. This may include disclosing your personal information to other Government agencies that have specific legislative authority to collect this information as required by policy and legislation. We will not disclose your personal information to these agencies unless it is lawful to do so.

Change of address

If you receive a pension it is very important that you advise us of any change in your postal address or your bank account details. This will enable us to contact you about your pension.

Unclaimed benefits

You must claim your CSS deferred benefit once you reach age 65. If you do not claim your benefit when you reach age 65 you may be treated as a 'lost member' and your benefit may be transferred to the ATO for administration as a *'lost membership'*.

Alternatively, if you have claimed your benefit and made an election to receive a lump sum benefit but have not provided details of where the lump sum is to be paid, we may pay your lump sum to the Eligible Rollover Fund (ERF). The ERF we use is AUSFund, Australia's Unclaimed Super Fund.

Outstanding benefits will also be paid to AUSFund in the following circumstances:

> if you do not nominate a rollover fund in Section H1 to receive your lump sum benefit, or
> a rollover payment cheque is returned unclaimed or goes stale (e.g. not presented within 15 months of the issue date).

Australian Reward Investment Alliance

Deferred benefit

Continuing with Same Employer
Benefit Application Form

Hints for using this form

> **Read the Explanatory Notes and each section of the form carefully** before filling it in
> Use Capital Letters and a blue and black pen
> Sign your name where needed. If you don't sign the relevant sections of the form, it will be returned to you.

SECTION A - Personal details

Reference (AGS) number

Title (please tick one) Mr Ms Mrs Miss Other

YOUR NAME
Surname

Given name/s

Your date of birth DAY / MONTH / YEAR

Relationship details Married Single De facto

SPOUSE'S FULL NAME
Surname

Given name/s

Start date of de facto relationship (if applicable) DAY / MONTH / YEAR

Spouse's date of birth DAY / MONTH / YEAR

YOUR CONTACT DETAILS
Your residential address

STATE POSTCODE

Your postal address

STATE POSTCODE

Contact phone number

Email address

SECTION B – Identification requirements

To protect against fraud, money laundering, terrorism financing and safeguard your benefit, we need you to provide documentation to prove your identity. Please be aware that under some circumstances we may request further information from you.

To do this, you will need to provide certified copies of **one** document from column A in the table below **AND** certified copies of **three** documents from column B.

A	B
Passport (current or expired by less than two years)	Medicare card
Birth certificate or extract, issued by an Australian or foreign government (either in English or accompanied by an English translation prepared by an accredited translator)	A current statement from a financial institution with the same address and name as on the application and not more than three months old. This statement must be the account that you are requesting payment into
Birth card issued by a state registry of births, deaths and marriages	Copy of an electricity bill with the same address and name as on the application
Australian citizenship certificate	Copy of a telephone bill with the same address and name as on the application
Current drivers licence or permit issued by state or territory or foreign government	Copy of a gas bill with same address and name as on the application
Current identification card issued to a public sector employee	Copy of a rates bill with same address and name as on the application
An identification card issued to a student at a tertiary education institution	Valid credit card
Pension or other social security benefit card	A document from column A not yet provided
Proof of age card issued by a state or territory, containing your photograph	Copy of a tax return letter from the Australian Taxation Office with the same address and name as on the application
A national identity card, containing your photograph, issued by a foreign government (either in English or accompanied by an English translation prepared by an accredited translator)	A letter from Centrelink or Department of Veterans' Affairs with the same address and name as on the application
Citizenship certificate issued by a foreign country (either in English or accompanied by an English translation prepared by an accredited translator)	

For example, you could provide a copy of your birth certificate (from Column A) and copies of your Medicare card, a phone bill and an electricity bill (from Column B).

If you are providing copies of bills or statements, you should black out any personal financial information or details of transactions in order to to protect your privacy. We will store copies of identification electronically in a secure environment and securely destroy the paper copies. We will use all copies only for the purpose of confirming your identity.

All copies of documents provided must be certified as true and correct copies of the original by one of the following:

- a legal practitioner enrolled on the roll of a supreme court or the high court of Australia
- a judge or magistrate of a court
- a chief executive officer of a Commonwealth court
- a registrar or deputy registrar of a court
- a Justice of the Peace (JP)
- a notary public
- a police officer
- an agent or a permanent employee of the Australian Postal Corporation with two or more years of continuous service in an office supplying postal services to the public
- an Australian consular officer or an Australian diplomatic officer
- a finance company officer with two or more years of continuous service with one or more finance companies
- a person employed by, or an authorised representative, of the holder of an Australian financial services licence with two or more continuous years of service
- a member of the Institute of Chartered Accountants of Australia (ICA), Certified Practicing Accountants (CPA Australia) or National Institute of Chartered Accountants (NIA) with two or more years of continuous membership.

The certifying authority also must confirm in writing that you are the valid holder of the identification that you are presenting and that any copies are true copies of the original.

The certification must include the name, address, occupation, phone number and registration number (if applicable) of the certifying authority.

Section C - Employment details

☐ I am continuing in employment with the same employer I was with at the time I deferred my CSS benefit. The name of my employer is:

NAME OF EMPLOYER

SIGNATURE

DATE

DAY / MONTH / YEAR

Section D - Information Acknowledgement

[Benefit processing may be delayed if this acknowledgment is NOT completed].

I have been given enough information to make an informed decision about how I would like my benefit to be paid and I have been advised to read the CSS Product Disclosure Statement before completing this form.

I also understand that, by choosing a benefit option in Section E, I am making a formal election under the provisions of the CSS legislation and this benefit election cannot be changed ***except in certain circumstances approved by ARIA***.

SIGNATURE

DATE

DAY / MONTH / YEAR

If you need more information, please contact us on **1300 000 277**, email **members@css.gov.au** or fax **(02) 6272 9612**.

Section E - Claim date and benefit options

PLEASE DO NOT BACKDATE YOUR CLAIM DATE - see Section E in the Explanatory Notes.

Claim date

I, FULL NAME

whose Reference (AGS) No. is AGS NUMBER

hereby give written notice to ARIA that I wish to claim my deferred benefit on DAY / MONTH / YEAR

(the deferred pension will commence with effect from the day after the claim date).

SIGNATURE

DATE

DAY / MONTH / YEAR

Section E continued over page

Section E continued

Benefit options

PLEASE ENSURE THAT ONLY ONE BENEFIT OPTION IS COMPLETED

Option 1–Maximum pension, no lump sum

FULL NAME

I, ______________________________

AGS NUMBER

whose Reference (AGS) No. is ________ **elect** to take my entire benefit as a pension.

SIGNATURE

DATE

DAY / MONTH / YEAR

You must now complete **Section F** to tell us which spouse's pension option you want.

Option 2–Maximum pension and productivity lump sum

FULL NAME

I, ______________________________

AGS NUMBER

whose Reference (AGS) No. is ________ **elect** to take my benefit as a maximum pension plus a refund of my productivity component.

SIGNATURE

DATE

DAY / MONTH / YEAR

Note: You must provide us with the name of a complying fund or Retirement Savings Account (RSA) for your lump sum in **Section H1.**

You have now completed this section. You must now complete **Section F** to tell us which spouse's pension option you want.

Option 3–Standard CPI indexed pension and lump sum of member and productivity components

FULL NAME

I, ______________________________

AGS NUMBER

whose Reference (AGS) No. is ________ **elect** to take my benefit as a standard CPI indexed pension plus a lump sum of my member and productivity components

SIGNATURE

DATE

DAY / MONTH / YEAR

Note: You must provide us with the name of a complying fund or Retirement Savings Account (RSA) for your lump sum in **Section H1**.

You have now completed this section. You must now complete **Section F** to tell us which spouse's pension option you want.

Section E continued over page

Section E continued

Option 4–Lump sum only, no pension

(only available if you are a former Provident Account member and you have reached age 60)

FULL NAME

I, ______________________

AGS NUMBER

whose Reference (AGS) No. is ________ **elect** for a Provident Account Lump Sum.

SIGNATURE

DATE

DAY / MONTH / YEAR

Note: You must provide us with the name of a complying fund or Retirement Savings Account (RSA) for your lump sum in **Section H1**.

If you have an outstanding superannuation contributions surcharge debt it will be deducted from your lump sum. You have now completed this section. You must now go to **Section H—Payment Arrangements**, to tell us how you would like your lump sum paid.

SECTION F–Election for reduced initial pension benefit in return for increased spouse's and or children's pension benefit

Only complete this section if you have chosen benefit options 1, 2 or 3.

I have read the information contained in Section E of the Explanatory Notes,

☐ advise that I do not wish to take a reduced pension of 93% of my initial pension entitlement

OR

☐ elect to take a reduced pension of 93% of my initial pension entitlement

SIGNATURE

DATE

DAY / MONTH / YEAR

You have now completed this section. If you have an outstanding superannuation contributions surcharge debt you will need to complete Section G to tell us which component of your benefit you would like the surcharge debt deducted from. If not, go to **Section H—Payment Arrangements** to tell us how you would like your benefit paid.

SECTION G - Superannuation contributions surcharge

I would like my outstanding superannuation contributions surcharge debt to be deducted from either:

☐ my standard CPI indexed pension, or

☐ my additional non-indexed pension (if applicable) ,or

☐ my lump sum benefit (if applicable)

SIGNATURE

DATE

DAY / MONTH / YEAR

SECTION H–Benefit payment arrangements

Lump sum payments

H1. Please nominate the complying fund or Retirement Savings Account (RSA) you want to receive your lump sum benefit, or split your benefit payment between two.

Name of first (or only) nominated Fund or RSA

Australian Business Number (ABN) for Fund or RSA

Your Membership number for Fund or RSA

OR

Superannuation Product Identification Number (SPIN) for Fund or RSA (if you cannot provide your membership no.)

(These numbers can be obtained from the fund or RSA concerned—refer to Section H1 of the Explanatory Notes for further details.)

The amount you would like to be paid to this Rollover fund or RSA:

Either: A gross dollar amount: $

Or A percentage: %

Name of second nominated Fund or RSA

Australian Business Number (ABN) for Fund or RSA

Your Membership number for Fund or RSA

OR

Superannuation Product Identification Number (SPIN) for Fund or RSA (if you cannot provide your membership no.)

(These numbers can be obtained from the fund or RSA concerned—refer to Section H1 of the Explanatory Notes for further details.)

The amount you would like to be paid to this Rollover fund or RSA:

Either: A gross dollar amount: $

Or A percentage: %

You have now completed this subsection. You must now go to **Bank Account Details** to tell us where you would like your pension benefit paid.

Bank account details

Please provide the account details for the payment of your pension.

H4. What is the name of your bank/ building society/ credit union?

H5. What is the branch address?

STATE POSTCODE

H6. What is your bank/building society/credit union state branch number (BSB No.)?

H7. What is your account number?

Note: If the BSB or account number you provide is incorrect the payment will not be accepted by your financial institution. If you have any doubts what your correct BSB or account number is, you should confirm these details with your financial institution before including them in this form.

H8. My account is in the name(s) of:

The information I have supplied is complete and correct.

SIGNATURE

DATE

DAY / MONTH / YEAR

You have now completed this section. You must now go to **Section I—Taxation Matters**, to tell us your taxation information.

SECTION I - Taxation matters

I1. What is your start date for taxation purposes? *(See Section I in the Explanatory Notes)*

DAY / MONTH / YEAR

I2. Under the *Superannuation Industry (Supervision) Act 1993*, your superannuation fund 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 legislative change. We may disclose your TFN to another superannuation provider, when your benefits are being transferred, unless you request in writing that your TFN not be disclosed to any other superannuation provider.

It is not an offence not to quote your TFN. However giving us your TFN will have the following advantages (which may not otherwise apply):

> we will be able to accept all types of contributions (subject to scheme rules)

> the tax on contributions to your superannuation account/s will not increase

> other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits, and

> it will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

If you have already provided your TFN to us, you are under no obligation to provide it again in this application.

What is your Tax File Number?

I3. Select this box if you do not want us to pass on your TFN

Tax File Number Declaration

I4. Pension recipients should also obtain and complete a *Tax File Number Declaration* form (obtainable from the ATO) in order to claim any available tax offsets and deductions. **Attach the completed Declaration to this application form.**

Member checklist

Have you:

- ☐ read all the explanatory notes, received a benefit estimate, and any other information you require to make an informed choice
- ☐ filled in all the sections applicable to you
- ☐ attached certified copies of documents requested in Section B to prove your identity
- ☐ signed the Declarations at sections C and D
- ☐ signed an election option in section E
- ☐ signed an election option regarding spouse's/children's pension at section F
- ☐ completed the rollover nomination details in section H1
- ☐ completed the bank account details in sections H4 to H8
- ☐ provided an 'ESP Start date' (if appropriate) in Section I1
- ☐ provided your TFN in section I2
- ☐ attached your completed 'Tax File Number Declaration', and
- ☐ attached a copy of your marriage certificate or registered relationship certificate?

YOU HAVE NOW COMPLETED THIS FORM

Please send it to: CSS Benefit Payments
PO Box 22
BELCONNEN ACT 2616

END FORM

Australian Reward Investment Alliance (ARIA) ABN: 48 882 817 243 AFSL: 238069
RSE Licence no: L0001397
Trustee of the Commonwealth Superannuation Scheme (CSS) ABN: 19 415 776 361 RSE: R1004649