



CSS Spouse (or spouse and children) of a deceased member

Part 2–

Benefit application form & information leaflet

Before completing this benefit application form, you are advised to read the CSS Product Disclosure Statement (available from the CSS website at www.css.gov.au or by ringing 1300 000 277).

This form is to be completed by any person who considers themselves to be the spouse of a deceased contributing member or who acts on behalf of children who may be eligible for a benefit.

Explanatory notes

Introduction

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

Before completing this benefit application form, you are advised to read the **CSS Product Disclosure Statement** (available from the CSS website at www.css.gov.au or by ringing 1300 000 277).

It is suggested that you separate the notes from the form (if joined) so that you can refer to them as you complete the application form.

Our Contact Centre can provide details of your benefit entitlement, explain the benefit options and provide information on the value of your benefits. For more information:

- > Telephone: 1300 000 277
- > Facsimile: (02) 6272 9612 or
- > Email: members@css.gov.au

It is in your interest to seek professional advice before you make a decision on a benefit. We cannot provide you with financial advice.

See also *Section C–Information Acknowledgment*, to complete an acknowledgment that you have received sufficient information to make an informed decision about how you would like your benefit paid.

The Benefit Application form

Your accurate completion of the benefit application form allows us to process the application as soon as possible after it is received. Take care when completing this form. If you do not complete the benefit application form correctly, the processing of your benefit will be delayed, or may be paid incorrectly.

Section A – About the deceased

Please complete all the boxes in this Section.

Please also attach a copy of the full death certificate.

Section B – Your details

Please complete all the boxes in this Section. It enables us to identify you, and tells us where we can contact you.

Contact details

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

Contact phone numbers are also required, in case we need to contact you regarding the payment of your benefit.

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

Section C – 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.

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 benefit payment arrangements, a fee will be charged by us for the re-issuing of the payment.

Section D–Benefit options

This section contains the benefit options that are available to those who are eligible to receive a spouse's benefit. 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.

Your benefit may also be subject to deduction of any outstanding superannuation contributions surcharge debt at the date of determination.

Option 1–maximum pension, lump sum of productivity component and supplementary contributions

This option provides you with an employer-financed (indexed) standard pension together with an additional pension (non-indexed) purchased by accumulated basic contributions only. Any supplementary contributions and the productivity component will be paid as a lump sum.

Option 2–standard CPI indexed pension and lump sum

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

Option 3–lump sum only (former Provident Account members only)

This option is only available if the deceased member was a former Provident Account contributor. The election provides you with a lump sum calculated on the basis of three times accumulated basic contributions and Fund earnings, plus any supplementary contributions together with the productivity component.

Option 4–lump sum only (less than 15 years' contributory service and benefit reduced on medical grounds)

This option is only available if we have advised you that the benefit is to be reduced on medical grounds and the deceased had less than 15 years' contributory service. The benefit payable is a lump sum of 3.5 times accumulated basic contributions and Fund earnings, plus any supplementary contributions together with the productivity component.

Section E – Benefit payment arrangements

This section allows you to advise us where your pension and/or lump sum benefit is to be paid.

E3–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.

E4–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 re-issue can take a minimum of two weeks to finalise.

E5–Account name

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 F–Taxation matters

Lump sums paid to spouses and/or children of deceased members are not considered to be Superannuation Lump Sum Payments for the purposes of the taxation legislation.

For this reason, any lump sum paid to a spouse is not taxable income and a PAYG payment summary statement will not be issued by this office.

F1–Your Tax File Number (TFN)

In accordance with the *Taxation Laws Amendment (Tax File Numbers) Act 1988*, we are required to deduct PAYG tax at the Top Marginal 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 Taxation office. Forms are available at all Taxation Offices. You must provide proof of identity at the time you lodge the form.

F2–Tax File Number Declaration

If you have chosen to receive part of your benefit as a pension (Section D–Options 1 or 2) and you wish to claim the tax free threshold and/or any available offsets and deductions against your pension benefit, you should complete this **Australian Taxation Office (ATO) Declaration** form and attach it to your benefit application.

Superannuation contributions surcharge

A superannuation contributions surcharge is payable by members whose adjusted taxable income (taxable income and the value of their employer's contribution 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 Australian Taxation Office (ATO) is responsible for the administration of the surcharge, and calculates and advises surcharge liability to individual members and superannuation providers.

ComSuper, acting on behalf of ARIA, administers the collection and remittance of surcharge payments to the ATO. The liability is imposed on individual members to either pay the surcharge assessment as it issues or have the outstanding debt recovered from their retirement benefits. Additional information on this topic is contained in the CSS leaflet **Superannuation Contributions Surcharge** available from ComSuper or from the CSS website at: www.css.gov.au

The surcharge debt payable by the spouse of a member may be determined by ARIA under Scheme rules. Any outstanding surcharge debt recorded at the time the benefit is determined MUST be recovered from the spouse's superannuation benefit prior to payment. Surcharge debts are recovered from the pre-taxed benefit.

Deduction of the surcharge debt is automatic from lump sum only benefits. In cases where the benefit is a pension or a lump sum/pension combination, an election is required to nominate where the surcharge debt is to be recovered from (Section E of the benefit application form).

After your Benefit is Paid

Documents you may receive from us

After your benefit has been 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; and
- > a pension payment summary and annual pension advice letter (which are sent to you in July each year if you are receiving a pension).

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

What Next?

Please return this application form to us at the postal address shown on page 1 of this form.

Remember, the sooner we get your correctly completed application form, the less likelihood there is of any delay in the processing of your benefit.

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 forward information to you each year regarding your benefit.

This will delay payment of any future benefits.

All enquiries: 1300 000 277

Reference (AGS) Number

Please keep a record of the deceased member's Reference (AGS) Number for any future contact with us.



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CSS Spouse (or spouse and children) of a deceased member

Part 2–Benefit application form: Benefit Options

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 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 - About the deceased

Reference (AGS) number	<input type="text"/>																							
NAME OF DECEASED Surname	<input type="text"/>																							
Given name/s	<input type="text"/>																							
Date of birth	DAY		MONTH				YEAR																	
Date of death	DAY		MONTH				YEAR																	
Name of former employer	<input type="text"/>																							
Previous Memberships <small>Did the deceased have any other periods of CSS membership? If so, please list the AGS reference number(s) for each of those memberships.</small>	1	<input type="text"/>					2	<input type="text"/>					3	<input type="text"/>					4	<input type="text"/>				

SECTION B - Your details

Title (please tick one)	<input type="checkbox"/> Mr	<input type="checkbox"/> Ms	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Other	<input type="text"/>															
YOUR NAME Surname	<input type="text"/>																				
Given name/s	<input type="text"/>																				
YOUR CONTACT DETAILS Postal address	<input type="text"/>																				
STATE	<input type="text"/>		POSTCODE	<input type="text"/>																	
Residential address	<input type="text"/>																				
STATE	<input type="text"/>		POSTCODE	<input type="text"/>																	

Section B continued over page

Section B continued

Your date of birth	DAY MONTH YEAR	
	/ /	
Contact phone number(s)		(h)
		(w)
Email address		

SECTION C – Information acknowledgment

(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. I also understand that, by choosing a benefit option in Section D, 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, or would just like to talk about the options you have, please call our Call Centre on telephone 1300 000 277, facsimile (02) 6272 9612, or email members@css.gov.au.

Note: If after your benefit has been paid, you wish to change your mind about the payment arrangements, a fee may be charged by us to re-issue the payment.

SECTION D – Benefit Options

Please ensure that only ONE benefit option is completed

Option 1 Maximum pension and lump sum of productivity component and any supplementary contributions

I,

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elect to take my benefit as a maximum pension plus a refund of my productivity component and any supplementary contributions.

SIGNATURE

DATE

DAY	MONTH	YEAR
/	/	

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

Section D continued over page

Section D continued

Option 4 Lump sum only, less than 15 years' contributory service and benefit reduced on medical grounds

FULL NAME
I,

elect to take my benefit as a lump sum.

SIGNATURE

DATE
DAY MONTH YEAR
 / /

If there is 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 E—Payment Arrangements**, to tell us how you would like your lump sum paid.

SECTION E – Benefit payment arrangements

Please provide the account details for the payment of any cash lump sum and/or pension.

E1. What is the name of your Bank / Building Society / Credit Union?

E2. What is the Branch Address?

STATE POSTCODE

E3. What is your Bank / Building Society / Credit Union State Branch Number (BSB No.)?

E4. 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.

E5. 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 F – Taxation Matters**, to tell us your taxation information.

SECTION F – Taxation Matters

- F1. 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):

- > 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?

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Tax File Number Declaration

- F2. 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;
- signed the Information Acknowledgment at Section C;
- signed an election option in Section D;
- completed the bank account details in Sections E1 to E5;
- provided your TFN in Section F (for pension recipients only);
- attached your completed **Tax File Number Declaration** form (for pension recipients only).

YOU HAVE NOW COMPLETED THIS FORM.

Please return this form direct to us.

END FORM