

Please complete all the details on this form in **BLOCK LETTERS** using a **BLACK PEN** and return the signed original to Super SA.

## 1. PERSONAL DETAILS

### Account ID

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Mr  Ms  Miss  Mrs  Dr  Prof

Surname \_\_\_\_\_

Given name(s) \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

Postal address (if different from above) \_\_\_\_\_

Postcode \_\_\_\_\_

Date of birth        /        /

Email\* \_\_\_\_\_

Telephone\* (M) \_\_\_\_\_

(W) \_\_\_\_\_

(H) \_\_\_\_\_

Employee Number \_\_\_\_\_

\*By providing your email address and/or telephone number(s) you are agreeing to receive, from Super SA, or an organisation on behalf of Super SA, marketing communications including newsletters, announcements, invitations or surveys. You may opt out of these marketing communications at any time by updating your communication preferences in our online member portal or by contacting Super SA. If you opt out of marketing communications, you will still receive any important account information from us.

### Contact us

#### In person

Ground floor, 151 Pirie Street  
Adelaide SA 5000

#### Postal

GPO Box 48, Adelaide, SA 5001

#### Call

(08) 8207 2094 or 1300 369 315 (for regional callers)

#### Website

www.supersa.sa.gov.au

### IMPORTANT

- If you have ceased employment with the public sector and wish to apply for the release of your entitlements, do not complete this form. Instead, please complete the *Application for Payment* form.
- When considering Early Access to your super we strongly suggest you seek financial advice.
- Payment will be made to your nominated, complying, non-commutable income stream fund.

### CHECKLIST

Before Super SA can process your payment you need to complete all sections on this form and provide all requested information.

- I have completed my personal details (section 1).
- I have confirmed that I am eligible for Early Access to Super (section 2).
- I have supplied Super SA with my tax file number (TFN) (section 3).
- I have provided my payment details (section 4).
- I have signed the Member Declaration (section 5).

## 2. EARLY ACCESS TO SUPER ELIGIBILITY

Early Access to Super benefits cannot be paid unless you meet the following conditions (please confirm):

- I have reached my Preservation Age
- I have a Super SA Select account balance of \$36,500 or above
- I will retain a balance of at least \$6,500
- I have not received an Early Access to Super benefit this financial year
- I am continuing to work
- I will be rolling over to a non-commutable income stream product

## 3. TAX FILE NUMBER

### Tax file number (TFN)

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Providing your TFN will ensure that your entitlement is taxed concessionally. If you choose not to provide your TFN, part of your entitlement will be taxed at the highest marginal rate. Declining to provide your TFN is not an offence.



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## 4. PAYMENT DETAILS

**I wish to have the following amount withdrawn from my Super SA Select account under Early Access to Super:**

\$ \_\_\_\_\_ from my Super SA Select balance. (Please note: the amount requested must be a minimum of \$30,000 and the amount remaining in your Super SA Select account must be at least \$6,500.)

**Please note** if you wish to roll over your entitlement to more than one fund, please attach the relevant documentation to this application.

**Early Access to Super payments must be forwarded directly to the complying non-commutable income stream product you nominate below.**

Super SA Income Stream  
(Please also complete an *Application to Purchase* form available in the Super SA Income Stream PDS.)

The non-commutable income stream product named below:

Name of rollover fund \_\_\_\_\_

New policy/member number \_\_\_\_\_

Rollover fund ABN \_\_\_\_\_

Rollover fund USI \_\_\_\_\_

If your fund has no USI then please provide the following information:

Cheques to be made payable to \_\_\_\_\_

Postal address of the fund \_\_\_\_\_

**Note:** If we are unable to verify that the fund is a complying non-commutable income stream product, we will require you to provide a letter of compliance from the fund.

## 5. MEMBER DECLARATION

- I certify that the details above are true and correct.
- I understand that once my payment has been made I will not be able to change my instructions.
- I understand that by receiving an Early Access to Super benefit I may have a reduced amount of superannuation when I fully retire.

Signature: **X** \_\_\_\_\_

Date:        /        /