

Form > Super SA > Income Stream WITHDRAWAL

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**SUPER SA**
contributing to your future

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

Mr Ms Miss Mrs Dr Prof

Surname

Given name(s)

Residential address

Postcode

Postal address (if different from above)

Postcode

Date of birth / /

Email*

Telephone* (M)

(W)

(H)

*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, announcement, 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
(Enter from Pulteney Street)

Postal: GPO Box 48, Adelaide, SA 5001

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

Email: supersa@sa.gov.au

Website: www.supersa.sa.gov.au

If you've purchased a Super SA Income Stream as part of a transition to retirement arrangement, the non-commutable rules/terms and conditions apply. If you have an Unrestricted Non-Preserved (UNP) amount, you may only withdraw the UNP amount of your entitlement as a lump sum, where the amount withdrawn is \$1,000 or more. To obtain access to your Restricted Non-Preserved and Preserved money, you must first meet a condition of release. Conditions also apply to rolling your benefit to an external fund. To find out the components of your entitlements or whether you have UNP amounts, please contact Super SA on 08 8207 2094 or 1300 369 315.

Checklist

Please remember that before Super SA is able to process your entitlement you need to complete all sections on this form. If you do not provide the requested information there will be a delay in processing your entitlement.

- I have completed my Personal Details (section 1).
- I have supplied Super SA with my tax file number (TFN) (section 2).
- I have indicated my entitlement type (section 3).
- I have provided my payment details if I am electing to roll over (section 4).
(Please ignore this section if you are not rolling over to another fund.)
- I have provided my cash payment details (section 5) and:
 - Super SA already has my proof of identity documents.**OR**
 - I have provided the required proof of identity documents with this form. (Refer to the *Proof of Identity* fact sheet for further details.)
(Please ignore this section if you are not requesting a cash payment.)
- I have completed the Retirement Declaration if I am electing to cash any preserved entitlements (section 6).
(Please ignore this section if you are not cashing any preserved entitlements.)
- I have advised if I commenced an Income Stream under an Early Access to Super arrangement and I have provided information about this arrangement (section 6).
- I have signed the Member Declaration (section 7).

Things to consider

Before leaving the Super SA Income Stream we ask you to consider the following points:

- Super SA has competitive administration fees.
- If you are considering withdrawing your entitlement we strongly suggest you seek financial advice.



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2. Tax File Number

Tax file number

□	□	□	□	□	□	□	□	□
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Providing your TFN will ensure that your entitlement is taxed concessionaly. However, 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.

3. Payment Information

Full payment

I would like to withdraw the total balance of my account. (Please provide the required proof of identity documents.)

Partial payment

The minimum withdrawal amount is \$1,000*. The amount remaining in the fund must be greater than \$1,500. (Please provide the required proof of identity documents.)

I would like to withdraw the amount of \$ _____

If you are under age 60, there may be some tax payable on your withdrawal (see *Tax fact sheet*).
If tax is payable, please specify whether you would like the above payment:

After tax (any applicable tax will be deducted from your account in addition to the amount requested)

OR

Before tax (any applicable tax will be deducted from the specified amount before you receive your payment)

* Your payment will be drawn proportionally from your tax free and taxable components.

If you have more than one investment option please indicate which option(s) you wish to make your withdrawal from in the table below. If you do not specify a choice or there are insufficient funds in the option(s) you have nominated to withdraw from, your withdrawal will automatically be taken in order of the investment options shown below.

Order	Option	%
1	Cash	
2	Capital Defensive	
3	Conservative	
4	Moderate	
5	Balanced	
6	Growth	
7	Socially Responsible	
8	High Growth	
	Total	=100%

A full description of investment options can be found in the Super SA Income Stream PDS.



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4. Request to roll over an entitlement into another complying super fund

Please complete this section if you want to roll over any part of your entitlement into another complying super fund. All roll over payments will be forwarded direct to the fund you nominate below.

All SMSF (Self Managed Super Fund) payments will be sent c/- the fund details, as registered with the Taxation Office. Please ensure that this information is up to date.

Name of super fund _____

New policy/member number _____

New super fund ABN number _____

Postal address of new super fund _____

Postcode _____

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

Note: If we are unable to verify that the super fund is a complying fund, we will require you to provide a letter of compliance from the fund.

5. Request for cash payment

Please note:

- Payments cannot be made to third party accounts, credit cards or overseas accounts.
- Super SA does not accept responsibility for rejection of transfer due to incorrect account details being provided by you.

Please provide proof of identity documents if Super SA does not already have them. (Refer to *Proof of Identity* fact sheet for further details.)

- I wish to have the total of the withdrawal amount paid to me (amount stated in section 3) via electronic funds transfer.
- I wish to receive a cash payment of \$ _____ via electronic funds transfer. and roll over the remainder of the withdrawal amount to the fund detailed in section 4.

Electronic transfer of funds

- I wish to use the bank/credit union account details I have already provided to Super SA for my regular income payments.
- I wish to use another bank/credit union account and provide the details below. (Please see adjacent info box for details.)

Name of financial institution _____

Branch _____

Account name (account holder name) _____

BSB number (compulsory) -

Account number

When completing your account details, please use numbers only. Characters and symbols will not be recognised. For more information, contact your financial institution.

Important

If you wish to nominate a bank account for your benefit to be paid to, we require you to provide a bank statement (eg printed statement or online statement from a bank or credit union) for the account. These statements need to be current (ie less than 12 months old) and must show your BSB, account number and your full name on the account.



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6. Retirement Declaration

Complete this section if you commenced a Transition to Retirement account and have now retired. Please tick the statement(s) that apply to you:

I advise that:

- I have reached Commonwealth Government preservation age and I have permanently retired from the workforce.
- I have ceased an employment arrangement after the age of 60.
- I am aged 65 or over.
- I am under Commonwealth Government preservation age and have ceased employment on the grounds of invalidity.
- I wish to access my unrestricted non-preserved entitlement.

7. 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.

Signature: **X**

Date: / /