

Form > Super SA > Income Stream RETIREMENT DECLARATION FORM

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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

Email: supersa@sa.gov.au

Website: www.supersa.sa.gov.au

Important information

This form is used to inform Super SA that you have met a condition of release. Once Super SA processes this form, you will be considered in the retirement phase for taxation purposes and your investment will be tax exempt.

2. Retirement declaration

I declare that:

- I have reached my Commonwealth preservation age and I am permanently retired from the workforce, or
- I have ceased employment after age 60

3. Member Declaration

I certify that the details above are true and correct.

I understand my selected investments will be moved to the tax exempt options and the balance will be reported to the Australian Taxation Office and will count towards my Transfer Balance Account. If the total of my retirement accounts is more than \$1.6 million penalties may apply and I will be required to remove the excess.

I understand that all the current terms and conditions will continue to apply to my income stream arrangements (ie. payment amounts, payment frequency and investment option) unless I request a change by completing the relevant form.

Signature: **X**

Date: / /

The information in this form is of a general nature only and has been prepared without taking into account your objectives, financial situation or needs. Super SA recommends that before making any decisions about this product, you consider the appropriateness of this information in the context of your own objectives, financial situation and needs, read the Product Disclosure Statement (PDS) and seek financial advice from a licensed financial adviser in relation to your financial position and requirements. Please refer to the PDS for information on the cooling off rights associated with this product.



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