

Withdrawal form - Financial Hardship

Please complete the form using CAPITAL letters. Mark X in the boxes where applicable. The form must be completed in full.

Use this form to:

- ▶ apply for the early release of your superannuation benefits under financial hardship.

Please consider:

- Any costs, as well as benefits you may be losing, such as insurance, and
- Eligibility for financial hardship. To assist you, we have provided a *Financial hardship checklist*, refer to Section 9.

To ensure any withdrawal from the fund can be completed in a timely manner, please ensure that all required documentation is attached to this form.

1. Important information

The Superannuation Industry Supervision Act (SIS) defines prescribed criteria for the release of funds prior to retirement for severe financial hardship. The Trustee of the fund must be satisfied based on the written evidence that the person:

- is unable to meet reasonable and immediate family living expenses,
- has received Commonwealth income support payments for a continuous period of 26 weeks, and
- was in receipt of payments of that kind on the date of the written evidence,

OR the person

- has reached his or her preservation age plus 39 weeks and has been receiving Commonwealth income support payments for a cumulative period of 39 weeks after reaching preservation age, and
- was not gainfully employed on a full time, or part time basis on the date of the application for cashing his or her preserved benefits, or restricted non preserved benefits in the superannuation fund.

Notes

- The written evidence of Commonwealth income support must be dated less than 21 days before the date the person's application to the Trustee for the cashing of the preserved benefits or restricted non-preserved benefits.
- Only one payment up to the value of \$10,000 gross can be made in any 12 month period.
- Wish to make a compassionate claim? These are dealt with by the Australian Taxation Office (ATO), and not the superannuation fund. Contact the ATO directly by visiting ato.gov.au, and through your MyGov account.

2. Member details

| | | |
|----------------------|----------------------------|----------------------|
| Member number | Date of birth (DD/MM/YYYY) | |
| <input type="text"/> | <input type="text"/> | |
| Title | Given name(s) | |
| <input type="text"/> | <input type="text"/> | |
| Surname | | |
| <input type="text"/> | | |
| Residential address | | |
| <input type="text"/> | | |
| Suburb | State | Postcode |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Phone (home) Phone (work) Mobile

Email

I authorise the fund to update my address and contact details if the details provided above differ to the details currently held.

3. Dependency status*

| Dependent(s) | Spouse/Partner | Child 1 | Child 2 | Child 3 | Child 4 |
|--------------------------------|----------------|---------|---------|---------|---------|
| List your dependent(s) | | | | | |
| List the age of each dependent | | | | | |

* Understanding dependent relationships assists the Trustee to make a determination on the member’s immediate financial needs.

4. Residency status

Only Australian citizens or permanent residents of Australia can apply for severe financial hardship from superannuation. Certain conditions apply to temporary residents. Further information can be found at ato.gov.au.

I am an Australian citizen, or a permanent resident of Australia.

5. Tax file number (TFN) or exemption†

My TFN is OR Exemption reason

- I have previously provided my TFN to the Fund
- I do not wish to quote a TFN or exemption reason

† We are authorised by law to ask for your TFN, you do not have to provide it but if you don’t you may end up paying more tax than you need to. If your TFN is not quoted, the Trustee is obliged to deduct PAYG Tax from the relevant part of your benefit at the top marginal rate.

6. Financial hardship background

Briefly explain the reason behind your recent severe financial hardship needs, and how monies will be used if released from your superannuation account. If you do not have enough space, attach a separate page.

7. Withdrawal payment option

| | |
|-------------------------|---|
| Partial cash withdrawal | Full cash withdrawal (account closure – less than \$10,000) |
| \$ | \$ |

Note: Your payment will have the appropriate tax deducted before it's paid to you.

8. Current financial information

| Current assets | | Weekly income (please supply evidence e.g. payslips, DHS/DVA letter, statements) | |
|---|-----------|---|-----------|
| Own home | \$ | Combined weekly income (after tax) | |
| Investment property(s) | \$ | You | \$ |
| House contents | \$ | Your partner | \$ |
| Savings (financial institution balances) | \$ | Your dependents (if living with you and applicable) | \$ |
| Vehicle(s) – make/model/year of manufacture | \$ | Income support payments – DHS/DVA | \$ |
| Superannuation balances | \$ | Other income (detail below) | |
| Shares/Investments | \$ | | \$ |
| Other assets (detail below) | \$ | | \$ |
| | \$ | | \$ |
| | \$ | | \$ |
| Total assets | \$ | Total weekly income | \$ |

| Current liabilities* (evidenced by loan/bank/credit card statements no older than 60 days) | | Immediate weekly living expenses* (weekly expenses for you, your partner and dependents) | |
|---|-----------|--|-----------|
| Home loan | \$ | Minimum loan | \$ |
| Investment loan | \$ | Minimum loan | \$ |
| Personal loan | \$ | Minimum loan | \$ |
| Credit card balances | \$ | Minimum credit card | \$ |
| Other debts including outstanding debts to family and friends (detail below) evidence and/or a statutory declaration will be required | | Rent or board | \$ |
| | \$ | Utilities (rates/electricity/gas/phone/water) | \$ |
| | \$ | Insurances (house/health/car) | \$ |
| | \$ | Vehicle costs (petrol/registration/repairs) | \$ |
| | \$ | Groceries | \$ |
| | | Other expenses and arrears/overdue accounts (detail below). Evidence and/or a statutory declaration will be required | \$ |
| Total liabilities | \$ | Total expenses | \$ |

* Please attached copies of any supporting evidence for liabilities noted above. For more information, please refer to Section 9 – *Financial hardship checklist*.

9. Financial hardship checklist

To be eligible to claim severe financial hardship and be entitled for the early release of certain superannuation benefits you must prove that you are unable to meet reasonable and immediate family expenses.

The Trustee requires the following to determine your eligibility:

- Completion of the financial hardship withdrawal form including income and expenditure information, and
- CERTIFIED copies of the following:
 - A valid Q230 letter (less than 21 days old) from Centrelink or the Department of Veteran Affairs (DVA) confirming your Customer Registration Number (CRN) and that you have been receiving income support for 26 consecutive weeks and are still receiving payments,
 - A valid Q251 letter (less than 21 days old) from the Department of Health Services (DHS) or the DVA confirming your CRN and that you have been receiving income support for 39 consecutive weeks after reaching preservation age and are still receiving payments, and
 - Evidence of:
 - Centrelink income statement,
 - member bank statement showing BSB, account number and account name, together with DHS/DVA fortnightly payment,
 - payment request including:
 - bill receipts (only recently dated will be considered),
 - overdue bills, board, rent,
 - demand notices or letters of default, or
 - statutory declaration on debt to family/friends, and
 - proof of identity – also refer to the *Identification requirements factsheet*.

Important information

- Only one lump-sum payment for financial hardship can be made in any 12 month period. The minimum amount that can be paid is \$1,000 (unless your account balance is less than this amount) and the maximum amount payable is \$10,000 gross.
- If you have changed your name and not advised the superannuation fund previously, you will also need to provide a CERTIFIED copy of your marriage certificate, deed poll or change of name certificate.

10. Payment details

I would like payment made into my bank account by electronic funds transfer (EFT)

| | | |
|-------------------------------|----------------------|----------------------|
| Name of financial institution | | Branch |
| <input type="text"/> | | <input type="text"/> |
| BSB | Account number | Account name |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Note: To enable the payment to be made into your nominated member account, please provide a CERTIFIED copy of the top of your bank statement showing the bank account details you have nominated is in your name or in joint names with yourself. Third party bank account payments cannot be paid.

11. Declaration and signature

- I am unable to meet my reasonable and immediate family living expenses and I do not have any assets (apart from my home) which could (reasonably and realistically speaking) be used or sold to cover this gap,
- The amount that I am requesting to be released is necessary to meet my reasonable and immediate family expenses,
- I am aware of and do not require any information on the impact of this payment on my superannuation benefits,
- I am aware of any fees and charges that may apply,
- I declare I am an Australian or permanent resident of Australia,
- I declare that I have read this form completely and the information I have entered is true and correct, and I authorise the fund to process my benefit request in accordance with my instructions,
- I request payment to be made in the manner indicated on this form and accompanying material, and I understand that this withdrawal may cause my insurance cover (if any) to lapse, unless I establish an alternative payment method,
- I understand tax may be deducted from the withdrawal, and I have read and understood the information regarding TFNs in Section 5 of this form,
- I understand that if applicable, it is my responsibility to notify Centrelink of any payments I receive,



Telephone: 1800 640 055
Email: yourchoicesuper@onevue.com.au
Post: PO Box 1282, Albury NSW 2640

- I understand that the personal information that I have provided on this form will be used for the purpose of administering my account. And I consent to my personal information being used in accordance with OneVue Wealth Services Privacy Policy (available for viewing at onesuper.com),
- I understand that the fund may email me to request and provide information on my account and about the fund,
- I have read and understood the information provided in Section 9 *Financial hardship checklist and Important information* together with the *Identification requirements factsheet*,
- I discharge the fund from all further liability in respect of the benefits paid, and
- I consent to the fund contacting DHS/DVA if needed to update my Q230 or Q251 letters (if as a result of ongoing enquiries my Q230 or Q251 letters become more than 21 days old).

Member signature

Print full name

Date (DD/MM/YYYY)

12. Document checklist

- I have signed and dated the declaration below.
- I have completed all of the required sections of this form, and provided all necessary evidence and documents. Also refer to Section 9 - *Financial hardship checklist* for further information.
- I have attached to this form an original copy of CERTIFIED identification and related documents. Refer to *Identification requirements factsheet* on proof of identity available on the Forms/FAQs page of the Secure Online Portal.
- Change of name by marriage/divorce/deed poll documents (if applicable).
- I have elected to have the payment made to my bank account, and I have attached a CERTIFIED copy or part of my bank, building society or credit union account statement showing my full name and account details, as well as a recent DHS/DVA payment.

Please return completed and signed form via email to super@onevue.com.au or via mail to the fund postal address.

Privacy Policy

The collection of your personal information (PI) in this form is governed by the Privacy Act 1988 (Cth). OneVue Wealth Services uses your PI to administer your superannuation account (including insurance, if any), improve our products and services and keep you informed. If we cannot collect this information, we may not be able to do these tasks. We may collect your PI from you, or from third parties such as your employer. We will only share your PI where necessary to perform our activities with our administrator, other service providers, as required by law or court/tribunal order or with your permission. Your PI may be accessed overseas by some of our service providers. For full details of how we use your PI, the countries where your PI may be accessed, how you can access and change your PI, and the privacy complaints process please read our Privacy Policy on the Secure Online Portal, or at onesuper.com.

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