Post: PO Box 1282, Albury NSW 2640



# Withdrawal form - Payment or Rollover Out Request

Please complete this form in CAPITAL letters.

### Use this form to:

- Request a payment from your account, or
- ▶ Rollover your account to another superannuation fund including SMSF.

Please use a separate form (available on the Secure Online Portal) to request a payment from your superannuation account for the following reasons:

- Severe financial hardship,
- Approved compassionate grounds (via the ATO),
- Approved Departing Australia superannuation payment (via the ATO),
- Temporary or permanent incapacity or a terminal medical condition, or
- a transfer to a Kiwi Saver account.

### Before requesting payment, please check:

- that all of your contributions from your employer have come into your account,
- where you are claiming a personal deduction for any personal contributions made to your account, you have sent
  us an ATO Notice of intent to claim a tax deduction, available on the Secure Online Portal or via the ato.gov.au
  website,
- your insurance. Closing your account will cause your insurance to cease; a lower account balance may affect the ability for premiums to continue to be paid, and
- the Identification requirements factsheet for what is appropriate certified identification and how to provide it.

Arrangements for sending us your payment or rollover request (allow time for postage or transfers):

- post your original completed and signed *Withdrawal form* and clear and legible CERTIFIED copies of original documents to the fund postal address, or
- email your scanned *Withdrawal form* and scanned certified copies of original identification and any other related documents directly to the fund at <a href="mailto:super@onevue.com.au">super@onevue.com.au</a>.



# Payment or rollover request



rollover request.

Completing this form in BLOCK letters ensures we have a clear instruction.

To be valid, your application for a payment or rollover must be signed and dated.

Read the Privacy Policy on the last page to see how the fund uses your information.

Member number			Date of birth (DD/MM/YYYY)
Title	Given na	me(s)	
Surname			
Residential address			
Preferred phone no		Phone (work)	Mobile (If available)
Email			
•	By providing my e	mail address and current details	I authorise the fund to update my address and contact
			letails currently held. By providing my email address, I
			unications and information in an electronic format, via uding information required by law.
our tax file number (T	FN)		
			☐ I have already provided my TFN
<b>A</b>	We are authorise	d to ask for your TFN. You do not	t have to provide your TFN but if you don't, you may en
4	up paying more to	ex than you need to. Further info	ormation can be found via ato.gov.au.
dentification requirem	ents		
☐ I have previou	usly provided CER	ΓΙFIED photocopies of my origina	al identification documents for my account.
☐ I have attache	ed scanned or orig	inal CERTIFIED photocopies of m	ny original identification documents to this payment or





Refer to the *Identification requirements factsheet* on the Secure Online Portal for help on suitable identification documents and how to provide your certified identification. Please do not provide original documents.

## Step 2 Confirming you are eligible to receive a payment



I understand that if I hold more than \$200 in superannuation my monies may need to be preserved, and the fund is required to confirm my eligibility to access my superannuation benefits.

From th	e six options below select the option which applies to you				
	I want to make a rollover to another superannuation fund.				
	I have unrestricted non-preserved superannuation in my member account available to me.				
	I have less than \$200 in my superannuation account and have ceased gainful employment.				
	I am aged at least 65.				
	I am aged between age 60 and 64, and have ceased a gainful employment arrangement since turning age 60.				
My prev	vious employer was				
I stoppe	ed working there on date (DD/MM/YYYY)				
□Iam	between my preservation age and the age of 64, have ceased gainful employment and don't plan to work more than 10				
hours a	week again. (Refer to ato.gov.au for your preservation age)				
My prev	vious employer or circumstance was				
My date	e of retirement was (DD/MM/YYYY)				



I understand to be eligible to receive a payment from my superannuation, I must meet the definition of retirement, have reached preservation age, and never intend again to be gainfully employed for more than 10 hours per week. Gainful employment can mean either being employed or self-employed to earn an income or reward in any employment, occupation or business.

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# Step 3 Providing lump sum payment details



A full lump sum payment or rollover will close my superannuation account and any insurance cover will cease. Investment earnings (positive or negative) tax, insurance and administration fees will change the final lump sum amount paid. Refer to the fund Product Disclosure Statement and the Additional Information Guide for terms and conditions for any disposal of investments necessary to make up your withdrawal

Request	a lump sum payment							
	Partial lump sum payment \$	(pre tax)						
	Full lump sum payment (account closure)							
Paying to	Paying to your bank account							
Payment	will be made into your bank account by electronic funds trai	nsfer (EFT).						
Lump su	Lump sum payment bank account details							
	Pay my bank account details already provided							
My perso	onal bank account details (held in my name or joint names wi	ith myself) are noted below						
Name of financial institution		Branch						
BSB	Account number	Account name						
Chair A	Providence allowers and details							
Step 4	Providing rollover out details							
Request	to rollover (partially or fully) to another superannuation func							
	Partial rollover out of the fund to another superannuation f							
	Full rollover out of the fund (account closure) to another su							
	Partial rollover out of the fund to a self-managed superannuation fund (SMSF) \$							
	Full rollover out of the fund to a SMSF							
Provide	details of the superannuation fund or SMSF receiving your t	ransferred funds						
Fund n	ame	Fund address						
Fund ABN		USI						
Other fund member number								



# SMSF bank account details (provide certified copy of bank statement)

Date (DD/MM/YYYY)

My SMSF bank accoun	t details are noted below			
Name of financial institution		Branch	Branch	
BSB	Account number		Account name	
A			d have attached a certified copy of the top of the SMSF further important details on rolling out to a SMSF.	
Step 5 Please read	I these declarations and sign	this form		
with my request,     I declare that I am     I have supplied ce  I understand:     There are costs as	n an Australian citizen, a New Zea ertified proof of my identity whic ssociated with my account, as we	aland citizen or a pe h shows my correct ell as benefits I may	ermanent resident of Australia, and date of birth and any name change(s) if required.  be losing such as insurance cover (if any) and that any	
<ul> <li>insurance held in my account will cease once my account is closed,</li> <li>If I have not already indicated an intention to claim a tax deduction, I won't be able to claim a tax deduction for my withdrawn contributions in the future once my account is closed,</li> <li>Where direct investment assets are held, there may be delays while your investments are sold down. I have referred to the Product Disclosure Statement, and Additional Information Guide Terms and Conditions for details on the order of redemption of investment options, and the minimum balance required to be held in the Cash Hub prior to submitting this withdrawal request,</li> <li>I consent to my personal information being used in accordance with OneVue Wealth Services Privacy Policy (available for viewing at onesuper.com), and</li> <li>I have the right to ask the fund for information on how withdrawing my superannuation will affect my entitlements and have already done so, or have chosen not to exercise this right, and I discharge the fund from all further liability in respect of the benefits paid.</li> </ul>				
Full name				
Sign here				

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#### Checklist

We will process your lump sum payment or rollover request as soon as we can. Our ability to process your lump sum payment or rollover out request is dependent on:

- the application for lump sum payment or rollover out being fully completed, and all of the necessary documents being provided, and
- where you hold investments in your account, there may be delays while your investments are sold down. Please ensure there are sufficient funds, including retaining the minimum balance, in your Cash Hub prior to submitting this form.



Please refer to the Product Disclosure Statement, and Additional Information Guide Terms and Conditions for details on the order of redemption of investment options.

### Have you

Completed all of the form, and signed and dated the form,
Attached a scanned clear & legible CERTIFIED copy of original identification documents, OR
Where you intend to mail in the form and identification, attached CERTIFIED copies of original identification documents, and
Consulted the identification requirements factsheet on providing proof of identity. The identification requirements factsheet can be found on the FAQ/Forms page of the Secure Online Portal.

## If rolling out to a SMSF

Provided a certified copy of the SMSF bank statement? If you are completing a full or partial rollover of funds to your SMSF, you will also need to ensure you are registered as a member and trustee on the Australian Taxation Office's (ATO) SMSF Trustee/Member Register.

### Sending your payment or rollover request form and documents to us.

You can either:

- email your scanned form and clear & legible CERTIFIED copies of identification documents to super@onevue.com.au, OR
- post your original form and clear & legible CERTIFIED copies of identification documents 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.

The fund is a superannuation product within OneSuper ABN 43 905 581 638 RSE R1001341 (OneSuper). Diversa Trustees Limited ABN 49 006 421 638, AFSL 235153 RSE Licence L0000635 (referred to as the Trustee, we, our, us) is the Trustee of OneSuper and the product issuer. The information in this document has been prepared by OneVue Wealth Services Pty Ltd ABN 70 120 380 627, AFSL 308868 as the Promoter. It is intended to provide you with general information only and does not take into account your personal objectives, financial situation or needs. Before making any financial decisions about the fund, it is important that you read the current product disclosure statement (PDS) and Target Market Determinations (TMDs), consider your particular circumstances and whether the particular financial product is right for you. The current PDS and TMDs for the fund are available at onesuper.com. Each TMD sets out who an investment in the fund might be appropriate for and the circumstances that trigger a review of the TMD. You should consult a financial adviser if you require personal advice.