

# Personal Superannuation Application

Before you sign this Application form, the Trustee or your Pitcher Partners adviser is obliged to give you a PDS, which is a summary of important information relating to the Fund. The PDS will help you to understand the product and decide if it is appropriate to your needs.

Please complete these instructions in **BLACK INK** using **CAPITAL LETTERS** (except for your email address) and  boxes where provided. \*Indicates a mandatory field or section. If you do not complete all of the mandatory fields or sections, there may be a delay in processing your request.

## 1 Personal details

*Title (Dr/Mr/Mrs/Ms/Miss)	<input type="text"/>	*Surname	<input type="text"/>
*Given name(s)	<input type="text"/>		
Tax File Number <sup>1</sup>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Current residential address</b>			
*Unit No	<input type="text"/>	*Street No	<input type="text"/>
*Street name	<input type="text"/>		
*Suburb	<input type="text"/>	*State	<input type="text"/>
		*Postcode	<input type="text"/>
<b>Postal address</b> (if different to above)			
*Unit No	<input type="text"/>	*Street No	<input type="text"/>
*Street name/PO Box	<input type="text"/>		
*Suburb	<input type="text"/>	*State	<input type="text"/>
		*Postcode	<input type="text"/>
Phone (home)	<input type="text"/>	Phone (work)	<input type="text"/>
Mobile	<input type="text"/>		<input type="text"/>
		*Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
*Email address	<input type="text"/>		
*Date of birth	<input type="text"/>	/	<input type="text"/>
		/	<input type="text"/>
Employer name (if employer is contributing)	<input type="text"/>		
*Occupation	<input type="text"/>	(P)ermanent/(C)asual	<input type="checkbox"/>
Employer's phone number	<input type="text"/>	If casual, number of hours worked per week	<input type="text"/>
			<input type="text"/>
If you are retired or not currently working, please provide the date you were last gainfully employed			<input type="text"/>
			<input type="text"/>

### 1 Important information on providing tax file numbers

Please provide your tax file number (TFN) when acquiring this product. Under the *Superannuation Industry (Supervision) Act 1993*, we are authorised to collect your TFN, which will only be used for lawful purposes and in accordance with the *Privacy Act 1988*. It is not an offence if you choose not to provide your TFN, but providing it has its advantages, including:

- we will be able to accept all permitted contributions
- other than the tax that may ordinarily apply, you will not pay more tax than you need to, and
- it will be easier to find different super accounts in your name.

We require your TFN in order to process your Personal Division application.

Please read the information on TFNs in the Product Disclosure Statement (PDS) before providing your TFN.

# Personal Superannuation Application

## Anti-Money Laundering (AML) and Counter-Terrorism Financing (CTF)

In accordance with *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Law), please advise the following:  
(Note: your application cannot be processed unless this section is completed and you may be requested to provide additional information and documentation to facilitate IOOF's compliance with AML/CTF Law.)

### Politically Exposed Person (PEP)

Politically Exposed Persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates.

Are you a Politically Exposed Person?

Yes     No

If Yes, please nominate one of the below:

I hold one of the above mentioned publically exposed roles. Please specify

I am a close associate/family member. Please specify your relationship to the PEP

### Source of wealth (the origin of your financial standing or total net worth ie, how you generated your wealth)

Employment     Investments     Other (please specify, eg inheritance)

### Source of funds (the origin of your contribution to set up your account)

Employment     Investments     Other (please specify, eg inheritance)

## 2 Nomination of beneficiaries

You may complete a Binding Death Benefit Nomination form or a Non-Binding Death Benefit Nomination form available in this forms booklet, from our website or by contacting our Client Services Team. Otherwise, in the event of your death, any benefits will be paid to your Legal Personal Representative on behalf of your estate. Alternatively, log into Pitcher Partners Super Online and submit the signed and dated nomination electronically.

## 3a: Deposit Instruction

**You are required to make an investment choice as part of your application. If you have not made a decision about your Deposit Instruction, you can choose to invest in the Cash Account until you make another investment choice.**

Please advise us of the your Deposit Instruction.

### Please note:

- Please ensure that the Deposit Instruction includes at least the default minimum allocation of 1% against the Cash Account. The percentages allocated to the Cash Account and your selected investment option(s) must be add up to 100%.
- For a full list of investment options available for selection within Pitcher Partners Superannuation Fund go to our website and select from the **investment guide (PPS.01)** and list your selections in the space provided.
- To ensure the investment option selections are listed correctly please add the APIR code along with the name of the investment option.
- Term deposits and listed investments cannot form part of your Deposit Instruction. Please refer to Step 3b and 3c to provide these details.

100% Cash Account

OR

Deposit Instruction



# Personal Superannuation Application

## Step 3c: Fixed rate/fixed term investments (minimum \$20,000)

Months	<input type="text"/>	Amount	\$	<input type="text"/>
Months	<input type="text"/>	Amount	\$	<input type="text"/>
Months	<input type="text"/>	Amount	\$	<input type="text"/>
Months	<input type="text"/>	Amount	\$	<input type="text"/>

Please select your provider (if no selection is made, Adelaide Bank will be used)

Adelaide Bank  
 NAB  
 ANZ

### Please note:

- 3, 6 and 12 month terms are offered.
- The maximum overall investment is 95% of your account balance.

## 4 Cash Account preferences

### Cash Account limits

You must maintain a minimum percentage allocation to the Cash Account.

Please specify one of the following options:

**Cash Account default minimum of 1%**

OR

**Cash Account percentage nominated in your Deposit Instruction**

You may also nominate a dollar based cap on the amount held in your Cash Account, subject to a \$5,000 minimum.

To set a Cash Account cap, please specify the amount here \$

### Cash Account top-up

If the balance in your Cash Account is zero or below, the Trustee will top up the balance to the lower of:

- the Cash Account default minimum of 1% or the Cash Account percentage nominated in your Deposit Instruction; or
- the Cash Account cap

We will top up your Cash Account balance by redeeming the necessary amount from your managed investments (without prior notice to you) in accordance with the method you have selected below:

**Pro-rata (default option)** – Redeem funds across all managed investments according to the proportion of the portfolio that they represent.

OR

**Redemption instruction – percentage** – Redeem funds from specified managed investments according to the percentage allocation nominated below.

### Please note:

- The percentages allocated your selected investment option(s) must add up to 100% not including the Cash Account.
- To ensure the investment option selections are listed correctly please add the APIR code along with the name of the investment option.
- Restricted investments, annuity funds, term deposits and listed investments cannot form part of redemption instruction – percentage.

# Personal Superannuation Application

APIR Code	Investment option	Allocation (%)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total (must = 100%)</b>		<input type="text"/>

## 5 Income preferences

I direct the Trustee to manage income distributions that I receive from managed investments as follows:

**Re-invest (default option)** – Re-invest 100% of the income distributions back into the same managed investment that made the income distribution.

OR

**Retain in Cash Account** – Leave all income distributions to accumulate in my Cash Account.

**If you don't indicate your income preference, the default option of re-invest will be applied.**

## 6 Contribution eligibility requirement

I am under 65 years of age

OR

I am over 65 and under 75 years of age. I have worked at least 40 hours over 30 consecutive days during this financial year

OR

Only mandated contributions (SG or award) will be made to this account

OR

I am over 65 and I am making a downsizer contribution. (You must provide us with a completed ATO downsizer contribution form before or at the time of making your downsizer contribution. This form is available from the ATO website.)

# Personal Superannuation Application

## 7 Contribution details

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Details of the contribution included with this application

Rollovers/transfers	\$	<input type="text"/>
Personal contribution	\$	<input type="text"/>
Salary sacrifice contribution	\$	<input type="text"/>
Superannuation guarantee contribution	\$	<input type="text"/>
Spouse contribution	\$	<input type="text"/>
Downsizer contribution	\$	<input type="text"/>
<b>Total contribution amount</b>	\$	<input type="text"/>

## 8 Insurance cover

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This fund offers death, death and total & permanent disablement and income protection insurance. You may apply for insurance cover by completing the Application for Insurance form available in this forms booklet, from our website or our Client Services Team.

## 9 Transfer of existing super

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Do you have any previous super funds that you would like to transfer into the Fund? Yes  No

If Yes, please complete a Request to Transfer form available in this forms booklet, from our website or by contacting our Client Services Team.

## 10 Request for SuperMatch search and consolidation

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SuperMatch makes consolidating your super easy by using the ATO's automatic electronic search facility.

When you complete this section, you will be authorising the Trustee to conduct a search for your super monies with other superannuation funds including lost member accounts or any ATO-held super (such as super guarantee payments, superannuation holding accounts, Government super contributions or unclaimed superannuation monies).

**Alternatively, log into Pitcher Partners Super Online and consolidate your super with a few clicks of a mouse.**

### Important note:

- To use this feature, please ensure you provide your TFN and email address in Step 1.
- Any ATO-held super monies located will be automatically transferred to your account without any further instructions from you.
- You will be notified of any super accounts located from the SuperMatch search in an email. Note that super accounts located cannot be automatically transferred without your authorisation. Please note that any insurance attached to your accounts may be cancelled as a result of consolidating your super accounts.
- Please read the SuperMatch declaration on page 20 for important information.

- a. Do you wish the Trustee to conduct a SuperMatch search?  Yes  No  
(Note: If you only want to be notified of the search results, select No to question b below).
- b. Do you wish to consolidate your super accounts using SuperMatch?  Yes  No

**Your request for us to conduct a SuperMatch search and consolidation will not be accepted if your TFN and email address are not provided.**

# Personal Superannuation Application

## 11 Member advice fees

Choose your fee option. Fees should be provided including GST. All boxes for the relevant fee option must be completed. Blank boxes will default to nil.

**Member Advice Fee – Upfront**  
Up to a maximum of 5.50% of each contribution:

<input type="checkbox"/> Contributions	<input type="text"/>	%
<input type="checkbox"/> Transfers/rollovers (not applicable to transfers from existing accounts)	<input type="text"/>	%

**Member Advice Fee – Ongoing**

. % pa (up to a maximum of 2.20% pa of account balance)

**AND/OR**

\$  (up to a maximum of \$18,000 pa)

**Member Advice Fee – Insurance**  
Up to a maximum of 50% of each insurance premium:

Primary: Death or Death & TPD cover	<input type="text"/>	% pa
Additional: Death or Death & TPD cover	<input type="text"/>	% pa
Income protection cover	<input type="text"/>	% pa

**OR**

Up to a maximum of \$18,000 pa      \$

**Notes:**

- Maximum fees above include GST.
- For further information on adviser remuneration and advice fees, please refer to the PDS.

**Member advice fees (if applicable)**

- I authorise the Trustee to charge the member advice fee(s) selected in section 11 against my account.
- The amount of any member advice fee(s) that are paid to my financial adviser, as agreed by me, will be an additional cost to me and charged against my super account. A member advice fee will not be charged unless I tell the Trustee to do so.
- Any agreed member advice fee(s) will be charged to my account and paid in full to the financial adviser, until I instruct the Trustee to cease payment.

Member signature  Date  /  /

Adviser name

Licensee name

AFSL No  Adviser code  Dealer code

Adviser signature  Date  /  /

# Personal Superannuation Application

## 12 Member declaration

**Important note:** Information (including your personal information) provided to the Trustee is used for the purpose of opening a superannuation account and for other related purposes detailed in the PDS and privacy policy, for example: assisting your financial adviser in providing you with advice, facilitating requested insurance and to provide you with account statements. The Trustee may disclose your personal information, such as, your name and contact details, along with your account information to its related bodies corporate, your employer, your financial adviser, insurers, professional advisers, businesses that may have referred you to the Trustee, medical professionals where you have applied for insurance cover, banks and other financial institutions, or to provide you with information about other products or services that may be of interest to you.

The Trustee is authorised to collect your personal information under *the Superannuation Industry (Supervision) Act 1993* and *the Anti-Money Laundering and Counter-Terrorism Financing Act 2006*. If you do not provide all of the requested information, the Trustee may not be able to action your request. The Trustee is not likely to disclose your personal information to overseas recipients, however, any overseas disclosure does not affect the Trustee's commitment to safeguarding your personal information and the Trustee will take reasonable steps to ensure any overseas recipient of personal information complies with the *Privacy Act 1988*. Your personal information will be used in accordance with the Trustee's privacy policy. The privacy policy contains information about how you may access or correct your personal information held by the Trustee and how you may complain about a breach of the Australian Privacy Principles. You may request a copy of the privacy policy by contacting our Client Services Team on (07) 3222 8444 or through the IOOF website at [www.ioof.com.au/privacy](http://www.ioof.com.au/privacy).

- I have received and read the PDS, including the section outlining my Duty of Disclosure. I agree to be bound by the provisions of the Trust Deed constituting the IOOF Portfolio Service Superannuation Fund, as amended from time to time, and agree to IOOF Investment Management Limited acting as Trustee under the Trust Deed.
- I consent to the collection, use and disclosure of the above information by the Trustee for the purposes specified in the PDS and privacy policy.
- I confirm that all details supplied in this form are true and correct.
- I understand that by electing the MySuper default investment strategy I will only be invested in the IOOF Balanced Investor Trust and MySuper fees will apply to my account.
- I understand that by electing a Choice investment strategy I have access to the full investment menu and Choice fees will apply to my account.
- I understand that the insurer will not be able to process my application, administer my insurance or process a claim if my Application for Insurance is not provided.
- I confirm that I have read and understood the instructions on how to complete the application form.

### SuperMatch

By completing Step 10 – Request for SuperMatch search and consolidation:

- I authorise the Trustee to store, use and disclose my TFN and any other information held by the Trustee, as authorised by law, to contact the ATO or use SuperMatch (or such other ATO authorised search facilities), contact other super funds identified by the search result, to find out if they have other super monies and to meet any requirements set by the relevant super laws, the ATO or other regulatory authorities in relation to consolidating my super accounts
- I understand that my consent provided in relation to the use, storage and disclosure of my TFN when I provide the Trustee with my TFN details continues to apply unaffected.
- I authorise the Trustee to receive any ATO held super monies identified through the SuperMatch search and to transfer the ATO held super monies to my account.
- By ticking Yes in Step 10b, I instruct the Trustee to transfer to my Pitcher Partners Superannuation account the balance of any accounts held by other super funds found as a result of any searches authorised to be conducted.
- I authorise the deduction of the transfer fees, if applicable, by my previous super fund from the super monies rolled over to my Pitcher Partners Superannuation account.
- I am aware that I may ask the Trustee for information about any fees or charges that may apply to a rollover, or any other information about the effect that the rollover may have on my super monies.
- I acknowledge that the Trustee cannot guarantee that all of my super accounts will be found and/or transferred to my Pitcher Partners Superannuation account despite all reasonable efforts being made.
- I am aware that any insurance attached to my accounts may be cancelled as a result of transferring my super monies to my Pitcher Partners Superannuation account.

Member signature<sup>3</sup>  Date  /  /

<sup>3</sup> We require an original Personal Superannuation Application form.

### If you are under 18 we require a parent/guardian to co-sign this application here:

Parent/guardian signature  Date  /  /

Parent/guardian full name



# Personal Superannuation Application

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Please forward all correspondence and enquiries to

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## Applications & forms

**Post** Pitcher Partners Superannuation Fund  
GPO Box 1144, Brisbane QLD 4001

**Email** [info@pitcherpartners.com.au](mailto:info@pitcherpartners.com.au)

**Fax** (07) 3221 7779

## Enquiries

**Telephone enquiries** (07) 3222 8444