

# **Binding Death Benefit Nomination**

Use this form to nominate who will receive your super benefit in the event of your death or to cancel your existing nomination

1. Your details			
Title: Mr Ms Mrs Other	Date of b	irth:	_//
Surname:			
Residential address (required):			
Suburb:		State:	Postcode:
Postal address (if different):			
Suburb:		State:	Postcode:
Daytime phone number:	Mobile number (if	different to	daytime number):
Email address:			
Secondary email address:			
Membership number:			



# 2. Your nomination

I direct the Electricity Industry Superannuation Board to distribute my death benefit to the following people in the proportions shown in the event of my death.

1.	1st nominee: Name		
	Relationship to you: choose 1 only		
	spouse child financial dependant	interdependency legal personal relationship	
	Date of birth/	Proportion of payout	_ %
2.	2nd nominee:		
	Name		
	Relationship to you: choose 1 only		
	spouse child financial dependant	interdependency legal personal relationship	
	Date of birth/	Proportion of payout	_ %
3.	3rd nominee:		
	Name		
	Relationship to you: choose 1 only		
	spouse child financial dependant	interdependency legal personal relationship	
	Date of birth/	Proportion of payout	_ %
4.	4th nominee:		
	Name		
	Relationship to you: choose 1 only		
	spouse child financial dependant	interdependency legal personal relationship	
	Date of birth/	Proportion of payout	_ %
5.	5th nominee:		
	Name		
	Relationship to you: choose 1 only		
	spouse child financial dependant	interdependency legal personal relationship	
	Date of birth/	Proportion of payout	_ %
6.	6th nominee:		
	Name		
	Relationship to you: choose 1 only		
	spouse child financial dependant	interdependency legal personal relationship	
	Date of birth/	Proportion of payout	_ %
7.	Legal Personal Representative	Proportion of payout	_ %
		Total: 100	) %

If you wish to nominate more beneficiaries, please attach an additional page.



## 3. Cancel my existing nomination

Complete this section if you wish to cancel your existing nomination and NOT replace it with any new nomination.
I would like to cancel my binding death benefit nomination for my ElectricSuper account.  I understand that by ticking this box, I will have <u>no</u> nominated beneficiary(ies) and my death benefit will instead be paid out at the discretion of the ElectricSuper Trustee Board.
I understand that this cancellation of my existing binding nomination will only be valid if it is signed be me in the presence of 2 witnesses who are 18 years of age or older and are not currently nominated as my death benefit beneficiaries.

### 4. Sign this form

By signing this form, I declare that I have read this form and understand that:

- if this binding death benefit nomination remains valid and is in effect at the time of my death, the Board must pay the benefit according to the nomination, regardless of how circumstances have changed for me and my beneficiaries
- this nomination will be invalid if it has not been completed correctly, if the people nominated are not my dependants and/or legal personal representative at the time of my death or they are no longer alive, if the Board is legally restrained or prohibited from paying my benefit to one or more people on this form, or if I was legally incapable of making this nomination
- this nomination is valid only once received and acknowledged by the Board
- if this nomination is not valid at the time of my death, the Board will pay my benefits at their discretion in accordance with the ElectricSuper Rules and superannuation laws
- this nomination lasts for 3 years unless I re-confirm, revoke or amend it before that time
- this nomination expires if and for so long as the Board is prevented from making a payment due to Family Law
- this nomination expires if I am subject to a Court Order which prohibits me from making a binding death benefit nomination or requiring me to amend or revoke a binding death benefit nomination
- this nomination replaces and revokes any previous binding death benefit nomination
- my information will be collected and used in line with ElectricSuper's privacy policy, which I can find at www.electricsuper.au/privacypolicy/

I have also read and understand the Important Information section at the end of this form

Signature:	Date:	
	//	
Witness 1	Witness 2	
l,, full name	l,, full name	
confirm that I am at least 18 years of age, am not a person nominated as a beneficiary on this form and that the member named above has signed this form in my presence.	confirm that I am at least 18 years of age, am not a person nominated as a beneficiary on this form and that the member named above has signed this form in my presence.	
If I am an employee of ElectricSuper, I declare that I have no conflicts of interest in witnessing this form.	If I am an employee of ElectricSuper, I declare that I have no conflicts of interest in witnessing this form.	
Signature:	Signature:	
Date:	Date:	
//	//	



### 5. Important information

#### What is a binding death benefit nomination?

A binding death benefit nomination allows you to instruct ElectricSuper who you want your death benefit to be paid to (and in what proportions) if you die. As long as your nomination is made by completing this form, and it is valid at the time of your death, your nomination is legally binding and we must follow it.

This is true even if your circumstances or the circumstances of your beneficiaries change. If your circumstances do change, you should consider updating your binding nomination so that your benefit will be paid in line with your current wishes.

If you die without a valid nomination in place, we may consider your wishes (for example, the terms of your Will) but the Board will pay your death benefit at their discretion in line with the ElectricSuper Rules and superannuation laws. This may or may not be according to your wishes.

#### Who can complete a binding death benefit nomination?

Any ElectricSuper member. If you are in the defined benefit Pension Scheme (Division 3) the nomination will only apply to additional lump sum benefits, not lifetime pension benefits.

Income Stream Retirement members also have the option to nominate a Reversionary Beneficiary instead. See the website or the Reversionary Beneficiary form for more details.

#### How long does a binding death benefit nomination last?

A valid nomination will last 3 years from the date you sign the form. You can see the expiry date on your annual statement and in the secure area of the member website.

You can re-confirm, cancel or change your nomination before the 3 years by completing a new nomination form.

#### How do I change or cancel a binding death benefit nomination?

You can change your nomination at any time. Complete and submit a new binding death benefit nomination form. The new nomination will override the previous nomination.

To cancel your nomination, complete the form but leave the section 2 for beneficiary details blank.

#### Who can I nominate?

Your beneficiary(ies) must be your 'dependant' at the date of your death and/or your legal personal representative (that is, the executor or administrator of your estate). A dependant is:

- your spouse (including legal, de facto, same sex partner)
- your children (including step-children, adopted children)
- any other person who is wholly or partially financially dependent on you
- any person with whom you have an interdependency relationship. Two people, whether or not related, have an interdependency relationship if:
  - o they have a close personal relationship, and
  - o they live together, or are temporarily living apart, and
  - one or each of them provides the other with financial support, and
  - one or each of them provides the other with domestic support and personal care of a level that is normally provided in the close personal relationship, rather than by mere friends or flatmates.

Or

• if 2 people have a close personal relationship but do not meet the other criteria listed above because one or both of them suffer from a physical, intellectual or psychiatric disability.

Note: a dependant for tax purposes may be different and this may affect the tax deducted from a death benefit payment.

#### Lodge your form

ElectricSuper GPO Box 4303 Melbourne Vic 3001

#### Your privacy

Refer to www.electricsuper.au/privacypolicy for information on how your provided information is used and how we treat your privacy.

#### **Queries**

1300 307 844 www.electricsuper.au

Issued by Electricity Industry Superannuation Board ABN 57 923 283 236 as Trustee of the Electricity Industry Superannuation Scheme.

Disclaimer: The information relating to ElectricSuper is subject to change from time to time. The ElectricSuper Rules (the 'Rules') are the final authority when any discrepancy arises between the Rules and any other information about the scheme. The Electricity Industry Superannuation Board recommends that you consult a licensed or appropriately authorised financial consultant before taking action regarding your superannuation.

