Spouse membership

Use this form to apply for a new spouse member account

Step 1 of this form is to be completed by existing members of ElectricSuper who wish to nominate their spouse for membership of the Accumulation Scheme.

Steps 2 to 10 must be completed by the new spouse members.

If you're unsure of your decisions we recommend that you see a licensed or appropriately authorised financial adviser.

About this form

We need you to fill out this form to let us know:

- your details
- your investment option(s) for your super
- if you'd like to apply for Death and Total and Permanent Disablement (TPD) cover
- information on nominating a beneficiary for your super
- your tax file number (TFN)
- if you would like to roll in money from another super fund

Personal identification

For identification purposes you MUST provide your proof of Identification. See the Identification (ID) requirements at the end of this document.

Failure to provide appropriate proof of identification may result in delays in the processing of your application.

If you need help

For assistance call 1300 307 844 or refer to www.electricsuper.au

1. Existing ElectricSuper member to complete

Member name

ElectricSuper member number

As a member of ElectricSuper, I nominate my Spouse (named under Step 2 of this Application Form) to become a Spouse member of ElectricSuper from the date the trustee receives this Application Form and I agree that contributions will be paid into my Spouse's account as per Step 8 of this form.

Signature

(dd/mm/yyyy)

2. Personal details of the spouse member

Title: ☐ Mr ☐ Ms ☐ Mrs ☐ Other

Date of birth (dd/mm/yyyy)

Given name(s)

Surname

Residential address (required)

Suburb/Town

State

Postcode

Telephone (business hours)

Mobile

Email address

Secondary email address

3. Choose your investment option

I'd like to invest in the following investment option(s)

☐ % in High Growth

☐ % in Balanced Growth

☐ % in Conservative Growth

☐ % in Cash

100 **% Total**

Note: if you do not make a selection your Super will automatically be invested in the Balanced Growth option.

4. Choose your insurance cover

You only need to complete this section if you want to apply for Death and Total and Permanent Disablement (TPD) insurance cover.

I understand that if I don't make a valid choice by selecting one of the options below, I will not be provided with any insurance cover.

☐ I would like to apply for Death and TPD insurance cover of ☐ units.

Please refer to the Accumulation Scheme (Spouse) Insurance Benefits web page for full details of the cover available to you.

Special note: Your insurance cover is subject to the terms and conditions of the insurance policy and acceptance by the insurer. You will require underwriting before your insurance cover commences (that is, you will need to provide health and lifestyle information for assessment). Your selected insurance cover will only commence once the insurer accepts your application and you are advised of this in writing.

5. Your beneficiary nomination

You can nominate who you would like to receive your Death benefit if you die while a member of ElectricSuper. For more information about making a binding death benefit nomination call the Helpline or download a 'Making a binding death benefit nomination' form from www.electricsuper.au

6. Provide your tax file number (TFN)

Don't pay more tax than you have to - let us know your tax file number.

Your tax file number is confidential and you don't have to give it to ElectricSuper. It is not an offence to not provide your tax file number. However, you may pay more tax than you have to if you don't supply it.

My tax file number is:

Special note

The Trustee of ElectricSuper is required by law to ask for your tax file number. The Trustee will only use your tax file number for lawful purposes. These purposes may change in the future if there are changes to legislation.

The Trustee may pass your tax file number to any other super fund or account to which your super is transferred in the future unless you request in writing that this not be done.

By providing your tax file number:

- the Trustee will be able to accept all types of contributions made by or for you (some limits may apply),
- you can avoid paying tax at a higher rate than would otherwise apply on your contributions, and
- you can avoid paying tax at a higher rate than would otherwise apply of your benefit and it will be easier for you to find your super in the future and ensure that you receive all of your super benefits when you retire.

Choosing not to provide your tax file number is not an offence. However, if you don't provide your tax file number now or in the future:

- the Trustee will not be able to accept any after-tax contributions, and
- you may pay more tax on your super benefit than you would otherwise (although you can claim this back when you lodge your tax return).

7. Contributions into my spouse account

Contributions will be paid into my spouse account as follows

☐ **Option 1:** A one-off or regular contribution via payroll deduction either by the existing ElectricSuper member or myself as arranged with our/my payroll office.

☐ **Option 2:** An after-tax lump sum contribution* of $ paid using BPAY®.
BPAY® payments can be made by phone or online via your own bank, credit union or building society at any time.
To make a payment using BPAY®, log in or register at electricsuper.au

If you can't access your ElectricSuper online account, call us for the BPAY® biller code and your spouse's contribution reference number.

® Registered to BPAY Pty Ltd ABN 69 079 137 518

*Legislative limits apply to the amount of non-concessional (after-tax) contributions that can be made to ElectricSuper

8. Rollover spouse's other super money into ElectricSuper

If you have super money with another provider, you can rollover this money into ElectricSuper Spouse Account - simply complete the details below and we will arrange the transfer for you.

Fund (or policy) name

Fund Australian business number ABN

Fund Unique Superannuation Identifier (USI) number
(or Electronic Service Address (ESA) for SMSFs only)

Approximate account balance: $

Fund postal address

Suburb/Town

State

Postcode

Fund phone number

Member number

Name of the last employer who contributed to this Fund

Date ceased employment with that employer (dd/mm/yyyy)

8. Rollover spouse's other super money into ElectricSuper (continued)

☐ This fund is a Self Managed Super Fund (SMSF)

Name of financial institution

BSB

Account number

Account name

I request that you transfer the total value held in respect of me for the above super fund or policy to the Electricity Industry Superannuation Scheme (ElectricSuper).

- I understand that on payment by my previous super fund, I discharge that super fund from any further liability in respect of the amount transferred.
- I approve the deduction of any appropriate exit fees from the amount transferred subject to legislative restrictions.
- I request that any further contributions received by my previous super fund after my payment, be redirected to my membership with the Electricity Industry Superannuation Scheme (ElectricSuper).
- I understand that the information contained in this form will be handled by the Trustee of Electricity Industry Superannuation Scheme to process my rollover.
- I understand and consent to my information being collected, disclosed and used in the manner set out in this form.
- I understand that I will receive confirmation once my money has been received in Electricity Industry Superannuation Scheme (ElectricSuper).
- I understand that I have the right to ask my previous super fund for information that I reasonably require for the purpose of understanding any super entitlements I may have in that fund, including information about any fees and charges that may apply to the transfer and information about the effect of the transfer on any entitlements I have in my previous super fund. I confirm that I do not require such information from my previous fund.

Signature

(dd/mm/yyyy)

9. Providing your identity

Choose how you'll provide proof of your identity:

☐ Electronic ID (this is the easiest way) – Write down the details of your ID below, then go to **Step 10**

☐ By post (certified ID) – Go to **Step 10** and provide certified copies of your documents. Refer to the Identification (ID) requirements flyer at the end of this form.

☐ By email (Selfie ID) – Go to **Step 10** and email us your documents. Refer to the Identification (ID) requirements flyer at the end of this form.

Electronic ID

Important: Please complete all fields below so we can complete an electronic ID check. If your personal details in **Step 1** don't match your ID details, we won't be able to verify your identity. This will delay your request as we may ask for additional certified identification. Please give us a call if you need help with this.

Part 1: Medicare details

Full name (including initials – as shown on your Medicare card)

Medicare number

Valid to (mm/yyyy)

Your reference number on this card

9. Providing your identity (continued)

Part 2: Either Australian driver's licence or Australian passport – you don't need to supply both

1 Driver's licence number

Full name (including middle name as shown on licence)

State

Expiry date (dd/mm/yyyy)

Driver's licence card number

2 Passport number

Full name (including middle name as shown on passport)

Place of birth (as shown on your passport)

Country of birth (as shown on your passport)

Family name at birth (this isn't shown on your passport)

10. Spouse declaration

By signing this form, I acknowledge that, in addition to the above information, I have read, understood and agree with the following statements:

- I apply to become a member of ElectricSuper on the terms and conditions contained in the Trust Deed and Rules of ElectricSuper. I understand that the Trust Deed and Rules can be inspected on request.
- I have received and read the information provided to me about the Scheme, including the Member Booklet, latest Annual Report and ElectricSuper's Privacy Policy

Signature

(dd/mm/yyyy)

Lodge your form

electricsuper.admin@rs.mpms.mufg.com

or

Post to: ElectricSuper
PO Box 126 Parramatta NSW 2124

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 the Electricity Industry Superannuation Board ABN 42 457 486 237 as trustee of the Electricity Industry Superannuation Scheme ABN 57 923 283 236

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.

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