

## CLASSIC INVESTMENTS TOWER SUPERANNUATION TRANSFER AUTHORITY FORM

TOWER Australian Superannuation Limited  
RSE Lic. L0000642 ABN 69 003 059 407 AFSL 237851

### Keep control of your investment

Consolidating your super into a single account may make it easier for you to keep track of your super, cut down on paperwork and potentially save you fees.

To consolidate your other super benefits into your TOWER super account, just follow the simple steps below. We will contact your other super funds and manage the rollover process for you, right to the end. We will confirm to you in writing when the money is received in to your TOWER super account.

Please read the *Important Notes* at the back of this form before completing this form.

### Step 1

#### Gather the following information:

- full name of other fund(s)
- full address of other fund(s)
- your member/policy number of other fund(s)
- Australian Business Number (ABN) or Superannuation Fund Number (SFN) and Superannuation Product Identification Number (SPIN) or RSE Registration number of other fund(s).

This information can be located on paperwork from the other fund, such as your member statement. If you cannot locate a recent statement, contact your other super fund(s) or employer(s) (if relevant) to find out this information.

### Step 2

#### Complete this Transfer Authority Form (one form per account)

If you have more than one super account to consolidate, simply photocopy this form, download more copies from our website or contact a TOWER Customer Service Consultant for a copy.

Make sure you complete your other super fund details in full and sign each form you submit, otherwise the process may be delayed. Also ensure you keep a copy of each form submitted, for your records.

### Step 3

#### Proof of Identification

In order for your other fund to release your benefit, you are required to provide certified proof of your identification. If you have more than one super account to consolidate, you will need to provide a set of certified copies for each fund. Please note that your rollover request cannot be processed without proof of identification.

Please refer to section 3 of this form for more information.

### Step 4

#### Return the completed form(s) and identification requirements to the address shown below

### Step 5

#### We will arrange the rollover of your other super accounts to your TOWER super account (it's that easy!)

#### Need more information?

If you have any questions about rolling over your super to TOWER, please contact your Financial Adviser or a TOWER Customer Service Consultant.

#### Contact us

##### Customer Service

1800 226 364

Monday to Friday 8:30am-6:00pm (EST)

[www.toweraustralia.com.au](http://www.toweraustralia.com.au)

Please return your completed form and any supporting paperwork to:

TOWER Australia Limited

PO Box 142

Milsons Point NSW 1565

Please complete this Transfer Authority Form if you wish to consolidate your super benefits from your other funds to your TOWER super account.  
Please read the *Important Notes* at the back of this form before completing this form.

## 1. PERSONAL DETAILS

TOWER Member / Policy Number	<input type="text"/>		
TOWER Product Name	<input type="text"/>		
Name	Title <input type="text"/>	Surname <input type="text"/>	
Given name(s)	<input type="text"/>		
Previous surname (if applicable)	<input type="text"/>		
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Contact phone number	( <input type="text"/> ) <input type="text"/>	Email	<input type="text"/>
Tax file number*	<input type="text"/>	<input type="text"/>	<input type="text"/>

\*Under the Superannuation Industry (Supervision Act) 1993, you are not obliged to disclose your tax file number, but there may be tax consequences. Please refer to *What happens if I do not quote my tax file number?* in the *Important Notes* section of this form.

Current address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>

If you know that the address held by your other fund is different from your current address, please give details below.

Previous address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>

## 2. DETAILS OF OTHER SUPER FUND

Please provide below details of the fund you would like to rollover in to your TOWER super account.

Name of other fund	<input type="text"/>		
Member number	<input type="text"/>	SPIN	<input type="text"/>
ABN	<input type="text"/>	RSE Reg.	<input type="text"/>
Fund postal address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>
Fund contact number	( <input type="text"/> ) <input type="text"/>		
Full Transfer <input type="checkbox"/>	Approximate value with other fund	<input type="text"/> \$	
<b>OR</b>			
Partial Transfer <input type="checkbox"/>	Value you wish to transfer from other fund	<input type="text"/> \$	

Was/is a former or current employer contributing to your other fund? Yes  No

If yes, please complete the information below.

Name of contributing employer	<input type="text"/>		
Contact name	<input type="text"/>		
Phone number	( <input type="text"/> ) <input type="text"/>		
Address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>

Under Choice legislation, you may be able to nominate your TOWER super fund as your choice of fund to receive all your future employer contributions. Refer to *What happens to my future contributions?* in the *Important Notes* section of this form.

### 3. PROOF OF IDENTITY

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In order for your other fund to release your benefit, you are required to provide the following identification. Please note that your rollover request cannot be processed without proof of identification.

Please refer to *Certification of Personal Documents* in the *Important Notes* section of this form.

I have attached a certified copy of my driver's licence or passport

**OR**

I have attached certified copies of both:  
Birth/Citizenship Certificate or Centrelink Pension card

**AND**

Centrelink payment letter or Government or local council notice (less than 1 year old) with name and address  
(eg ATO assessment or rates notice from council)

### 4. AUTHORISATION

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By signing this Transfer Authority Form, I am making the following statements:

- I have fully read this form and the information completed is true and correct.
- I request and consent to the rollover of my benefit from my other fund, nominated in section 2, to TOWER Australian Superannuation Limited ABN 69 003 059 407 RSE Lic. L0000642 (Trustee) as Trustee of the receiving Fund. I authorise the Trustee to act on my behalf in arranging the transfer.
- I authorise TOWER Australia Limited (the administrator of the Fund) to contact my other fund, nominated in section 2, to obtain details relevant to transferring my benefit.
- I authorise the transfer of any contributions still to be made by my former employer (if applicable) which may be received after benefits have been transferred to the Fund.
- I understand that the trustee of my other fund, nominated in section 2, is discharged from any further liability in respect of any amount rolled over to TOWER.
- I understand that in certain circumstances, the Trustee may be required to deduct tax from the untaxed portion (if any) of the amount rolled over.
- I understand that transfer fees (if any) and/or exit fees or penalties may be deducted from the benefit rolled over (subject to legislative restrictions) and I am aware that I may ask for information about these fees or any other information about the effect this rollover may have on my benefits and do not require any further information.

Name	<input type="text"/>
Signature	<input type="text" value="X"/>
Date	<input type="text" value=" / /"/>

### 5. NOTES FOR OTHER SUPER FUND

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#### Certificate of Compliance

The Trustee of the Fund, TOWER Australian Superannuation Limited, confirms that:

1. The Fund is a 'complying superannuation fund' within the meaning of the term in the Superannuation Industry (Supervision) Act 1993 (SIS Act) and is not subject to a direction by the regulator under Section 63 of the SIS Act.
2. The Fund will accept the transfer or rollover of benefits from other complying Australian superannuation funds.
3. The Fund will accept, in respect of an existing member, contributions from any employer of the member. All existing members are required to quote their Member Number.

#### Fund details:

TOWER Superannuation Fund  
ABN 51 924 094 985 SFN 130 683  
RSE Reg. R1000900

TOWER Master Fund  
ABN 20 891 605 180 SFN 149 156  
RSE Reg. R1000894

The BMA Personal Superannuation Fund  
ABN 36 628 750 779 SFN 138 674  
RSE Reg. R1000870

TOWER Superannuation Fund for the General Public  
ABN 76 727 806 658 SFN 138 597  
RSE Reg. R1000917

TOWER Employer Sponsored Superannuation Fund  
ABN 26 376 828 806 SFN 160 586  
RSE Reg. R1000887

All cheques should be made payable to TOWER Australia Limited (Member name) and sent to TOWER Australia Limited at:  
TOWER Customer Service  
PO Box 142  
Milsons Point NSW 1565

## 6. IMPORTANT NOTES

Please read this information before you complete the Transfer Authority Form.

### Things you need to consider when rolling over your superannuation

When you rollover your super benefits, your entitlements under the other fund may cease. You should consider all relevant information before you make a decision to transfer your super. Some of the points you may consider are:

- **Fees** – your other fund must give you information about any fees that apply when rolling over or withdrawing your super. The fees could include administration fees as well as exit or withdrawal fees. If you are not aware of the fees that may apply, please contact your other fund for further information before completing this form. TOWER may charge entry fees, please refer to your disclosure documents for further information.
- **Death and disability benefits** – through your other super fund, you may currently be insured against death, illness or an accident which leaves you unable to return to work. If you choose to withdraw your super benefits from your other fund, you may lose any insurance entitlements you have.

### What happens to my future contributions?

Using this form to rollover your super benefits will not change the fund to which your employer pays your contributions and may close your account with your other fund.

If you wish to nominate TOWER as the fund into which your contributions are paid, and haven't already done so, please speak to your employer or Financial Adviser, or contact a TOWER Customer Service Consultant about Choice of fund.

For further information about whether you are eligible to choose the fund to which your employer contributions are made, visit [www.superchoice.gov.au](http://www.superchoice.gov.au) or call the Australian Taxation Office on 13 10 20.

### What happens if i do not quote my tax file number?

You are not obligated to provide your Tax File Number (TFN) to your super fund. However, if you don't, your contributions may be taxed at the highest marginal rate plus Medicare levy, compared to the concessional tax rate of 15%. Your super fund may deduct this additional tax from your account. Your cash benefit may also be taxed at the highest marginal rate plus Medicare levy.

If TOWER does not have your TFN, you will not be able to make personal contributions to your super account. Choosing to quote your TFN will also make it easier to keep track of your super in the future.

Under the Superannuation Industry (Supervision) Act 1993, your super fund is authorised to collect your TFN, which will only be used for lawful purposes. These purposes may change in the future as a result of legislative change. The TFN may be disclosed to another superannuation provider, when your benefits are being transferred, unless you request in writing that your TFN is not to be disclosed to any other trustee.

### Have you changed your name or are you signing on behalf of another person?

If you have changed your name or are signing on behalf of the Member, you will need to provide a certified linking document. A linking document is a document that proves a relationship exists between two (or more) names.

The following table contains information about suitable linking documents.

Purpose	Suitable linking documents
Change of name	Marriage certificate, deed poll or change of name certificate from the Births, Deaths and Marriages Registration Office.
Signed on behalf of the Member	Guardianship papers or Power of Attorney.

### Certification of personal documents

All submitted copies of identification documents (including any linking documents) need to be certified as true copies by an individual approved to do so.

The person who is authorised to certify documents must sight the original and the copy and make sure all pages have been certified as true copies by writing or stamping 'certified true copy' followed by their signature, printed name, qualification and date.

The following people are authorised to certify copies of the originals as true and correct copies:

- a Justice of the Peace
- a permanent employee of Australia Post with five or more years of continuous service
- a finance company officer with five or more years of continuous service (with one or more finance companies)
- an officer with, or authorised representative of, a holder of an Australian Financial Services License (AFSL), having five or more years continuous service with one or more licensees
- a notary public officer
- a police officer
- a registrar or deputy registrar of a court
- a person enrolled on the roll of a State or Territory Supreme Court of the High Court of Australia, as a legal practitioner
- an Australian consular officer or an Australian diplomatic officer
- a judge of a court
- a magistrate, or
- a Chief Executive Officer of a Commonwealth Court.