

## TOWER MASTER FUND CHANGE OF DETAILS FORM

TOWER Australian Superannuation Limited  
ABN 69 003 059 407 AFSL 237851 RSE Lic. L0000642  
TOWER Master Fund RSE Reg. R1000894

Please ensure all applicable sections are completed including sections 1 & 8.

Please select the applicable Product:

Preferred Choice Corporate Super  
  Corporate Super  
  Corporate FIRST

### 1. PERSONAL DETAILS

<b>MEMBER NUMBER</b> (if known)	<input style="width: 100%;" type="text"/>		
<b>NAME</b>	Title	<input style="width: 100%;" type="text"/>	Surname <input style="width: 100%;" type="text"/>
	Given names	<input style="width: 100%;" type="text"/>	
<b>DATE OF BIRTH</b>	<input style="width: 100%; text-align: center;" type="text" value=" / /"/>		
<b>RESIDENTIAL ADDRESS</b>	<input style="width: 100%;" type="text"/>		
	Suburb	<input style="width: 60%;" type="text"/>	State <input style="width: 10%;" type="text"/> Postcode <input style="width: 15%;" type="text"/>
	Country	<input style="width: 100%;" type="text"/>	
<b>MAILING ADDRESS</b> (if different to residential address)	<input style="width: 100%;" type="text"/>		
	Suburb	<input style="width: 60%;" type="text"/>	State <input style="width: 10%;" type="text"/> Postcode <input style="width: 15%;" type="text"/>
	Country	<input style="width: 100%;" type="text"/>	
<b>CONTACT DETAILS</b>	Home phone	<input style="width: 100%; text-align: center;" type="text" value="( )"/>	
	Business phone	<input style="width: 100%; text-align: center;" type="text" value="( )"/>	
	Mobile	<input style="width: 100%;" type="text"/>	
	Email	<input style="width: 100%;" type="text"/>	

### 2. CHANGE OF NAME

To change your name, please complete this section and attach a **certified copy** of your marriage certificate or deed poll certification.

Previous name	<input style="width: 100%;" type="text"/>
Previous Signature	<input style="width: 100%; text-align: center;" type="text" value="X"/>
New name	<input style="width: 100%;" type="text"/>
New Signature	<input style="width: 100%; text-align: center;" type="text" value="X"/>

### 3. TAX FILE NUMBER NOTIFICATION

To provide your Tax File Number (TFN), please complete the following section.

Tax File Number

**Important information you need to know about providing your TFN**

Your TFN is confidential and we are required to tell you the following things before you decide to provide it to us or your employer:

- We or your employer can collect your TFN under the SIS Act 1993.
- Your employer may inform us of your TFN under the SIS Act 1993.
- Your TFN will be used for legal purposes only. This includes finding or identifying your super benefits where other information is insufficient, calculating tax on any employment termination payment you may be entitled to and providing information to the Australian Taxation Office (ATO) or other prescribed governmental authority. These purposes may change in the future.
- Providing your TFN is voluntary. It is not an offence if you choose not to quote your TFN, however, it is important to realise that if you do not tell us or your employer your TFN, either now or later, you may pay more tax on your contributions and benefits than would otherwise be the case (in some circumstances as much as your marginal tax rate). It may also be more difficult to locate or amalgamate your super benefits in the future to pay you any benefits you are entitled to. These consequences may change in the future.
- We may provide your TFN to the trustee of another super fund or to a Retirement Savings Account (RSA) provider where that RSA provider or trustee is to receive your transferred benefits in the future. We won't pass your TFN to such a trustee or RSA provider if you tell us in writing that you don't want us to do that. Otherwise, your TFN will be treated as confidential.

The Trustee requests that you provide your TFN as soon as possible after receiving your Member Benefit Certificate if it has not been previously provided.

Effective 1 July 2007, when an employee makes a TFN declaration to their employer, they are also taken to provide authority for their employer to quote their TFN to the super fund to which the employer makes super contributions. Also, the super fund will no longer be able to accept non-concessional (after tax) contributions, spouse contributions or Government contributions if the super fund does not hold the Member's TFN. The super fund will still be able to accept concessional (before tax) contributions (such as compulsory employer contributions and salary sacrifice) if the Member has not provided their TFN, however, these contributions will be subject to tax at the marginal tax rate plus the Medicare levy.

### 4. INVESTMENT OPTION NOMINATION

**For Members of Preferred Choice Corporate Super and Corporate Super only**

Please complete this section if you would like to select or switch the investment option(s) in which you wish to have your monies invested. Please note this section only applies to Members of Preferred Choice Corporate Super and Corporate Super.

Refer to 'Default investment option' in the current Product Disclosure Statement (PDS) for information on the relevant default option, and to 'The available investment options' table in the current PDS for information on the investment options available for your investment choice.

Please indicate the percentage (%) of your current super account balance and the percentage (%) of future contributions to be allocated to the investment option(s) you have selected.

Investment Option		Current super account balance (%)	Future contributions (%)
Preferred Choice Corporate Super	Corporate Super	TOWER Cash	
		TOWER Capital Assured	
		TOWER Assured Caution	
		TOWER Security Focus	
		TOWER Conservative Balanced	
		TOWER Balanced Growth	
		TOWER Growth Maximiser	
		TOWER Property Plus	
		TOWER Australian Shares	
		TOWER Ethical Growth	
		TOWER International Growth	
	<b>TOTAL</b>		<b>100%</b>

## 5. INSURANCE ALTERATION REQUEST

Please complete this section if you wish to alter your insurance cover. Refer to the 'Automatic Cover' section in the current PDS for information regarding automatic insurance cover provided by your employer Plan.

### 5a. For Death only and/or Death & TPD

Please select the insurance benefit you would like to cancel, alter or add:

Death only     Total and Permanent Disablement (TPD)     Death & TPD

Please select the required action:

I wish to cancel my insurance benefit(s), as indicated above, effective from the date this Form is signed.

Please note, if you currently hold Death & TPD insurance and you wish to cancel your cover, you may cancel either Death & TPD or TPD only. You cannot cancel only the Death component, as the Fund does not offer standalone TPD cover.

or

I wish to reduce my existing level of Death only, TPD or Death & TPD cover as indicated above and detailed below. I understand that once accepted by the Fund's insurer, the benefits will replace my existing arrangements.

or

I wish to increase my existing level of Death only or Death & TPD cover or add an additional type of cover as indicated above and detailed below.

Please note, by increasing or adding to your insurance cover, you may not be automatically covered under your employer Plan and may be subject to underwriting by the Fund's Insurer. Therefore, please also complete the TOWER Master Fund Personal Statement Form available from our website [www.toweraustralia.com.au](http://www.toweraustralia.com.au) or by calling one of our Customer Service Consultants on **1800 812 922**.

#### Alteration details

##### For Members of Preferred Choice Corporate Super and Corporate Super

Please select either a formula based benefit design or a fixed premium benefit design. (Refer to 'How are your insurance benefits calculated?' – for the Preferred Choice Corporate Super and the Corporate Super Products' in the current PDS for more information).

##### Formula based benefit design

(i) Multiple of salary (specify multiple, eg 3 times)

##### New details

or

(ii) Fixed amount of cover (sum insured)

or

(iii) % of salary per year until age 65

 %

OR

##### Fixed premium benefit design

A fixed dollar per week premium (\$1 per unit) for Death & TPD (not available for Death only cover).

##### New details

\$1     \$2     \$3     \$4     \$5

##### For Members of Corporate FIRST

Your Death only or Death & TPD benefit is based on a fixed premium which **may be cancelled but not altered**. (Refer to 'How are your insurance benefits calculated?' – for the Corporate FIRST Product' in the current PDS for more information).

Note:

- Generally you will not be covered for the additional amount of insurance cover until you receive confirmation from the Fund's insurer.
- Premiums for the additional amount of cover will be deducted from your super account.

### 5b. Group Salary Continuance

#### For Members of Preferred Choice Corporate Super and Corporate Super only

Your Group Salary Continuance cover **may be cancelled but not altered** as this is an Employer Group policy.

I wish to cancel my Group Salary Continuance, effective from the date this Form is signed.

## 6. NOMINATION OF BENEFICIARIES

To nominate or change your beneficiaries, please complete this section. Please note the Trustee of the Fund is only able to pay your death benefit to your Personal Representative (your Estate) and/or one or more of your Dependants. In the event of your death, the Trustee will seek to ascertain all of your Dependants and, considering your nomination, will determine to whom and in what proportions to pay your benefit.

*I request that in the event of my death, the Trustee considers paying any benefit to the Dependant(s) or Personal Representative as nominated below, in the proportions nominated:*

Name of Dependant	Address of Dependant	Date of birth	Dependant relationship <sup>1</sup>	Benefit (%)
		/ /		
		/ /		
		/ /		
		/ /		
		/ /		
<b>Personal Representative (your Estate)</b>				
<b>TOTAL (must add up to 100%)</b>				<b>100%</b>

<sup>1</sup> Refer to the 'What happens to your super if you die?' section in the current PDS for further information regarding the definition of Dependant.

## 7. PRIVACY

### Your privacy is important to us

TOWER's Privacy Policy Statement explains our approach to managing your personal information. In our Privacy Policy Statement, references to 'TOWER', 'we' and 'our' refer to TOWER Australia Limited (ABN 70 050 109 450, AFSL No. 237848) and its related bodies corporate. If you would like a copy of our Privacy Policy Statement, please refer to our website or contact the TOWER Privacy Officer at the address below.

### Collection, use and disclosure of personal information

As a financial services company, TOWER collects personal information about you to provide you with the products and services you request. In most instances, we collect your personal information from you when you complete an application form or a personal statement, but we may also collect information from you which you provide in writing or over the telephone or internet.

In some situations, we may also collect your personal information from a third party, such as your employer, your or your employer's Financial Adviser, health professional, accountant or another organisation with whom we have an arrangement for the promotion and sale of products offered or distributed by us. Where we are unable to obtain all of your personal information we require, we may decline your application.

TOWER discloses your personal information to a number of its related entities which assist us in providing you with products or services.

TOWER may disclose some of your personal information (excluding health information) to external organisations who assist us in administering the products and services we provide to you. This may include, for example, your employer, mailing houses, your or your employer's Financial Adviser, health professional or accountant.

We may also disclose your personal information (including health information) to other bodies such as the insurer, reinsurers, health professionals, investigators, the fund administrator, lawyers, and external complaints resolution bodies.

Like other financial services companies, there are situations where TOWER may also disclose your personal information in circumstances where it is:

- required by law, such as to the Australian Taxation Office
- authorised by law, such as where we are obliged to disclose information in the public interest.

We may also use personal information held about you to keep you informed of new products, services or special arrangements, or to conduct marketing activities. We may disclose some information about you to our service providers for this purpose.

### Accuracy of your personal information

TOWER relies on the accuracy of the information you provide. If you think that we hold information about you that is incorrect, please contact one of our Customer Service Consultants. If for any reason we decline a request to update your information, we will provide you with details of those reasons.

### Access to your personal information

Under the National Privacy Principles, you are generally entitled to access the personal information we hold about you. If you wish to access that information, you will need to complete our Request for Access to Information Form – this enables us to confirm your identity for security reasons, and to protect your personal information from being sought by a person other than yourself.

A copy of the Request for Access to Information Form can be obtained at [www.toweraustralia.com.au](http://www.toweraustralia.com.au) or by calling one of our Customer Service Consultants. If you would like to obtain further information about how we manage a request for access to personal information or how we manage your information, please contact the TOWER Privacy Officer at the address shown below.

TOWER Privacy Officer Telephone: 1800 226 364  
Tower Australia Limited Fax: 1800 654 946  
PO Box 142 Email: [customerservice@toweraustralia.com.au](mailto:customerservice@toweraustralia.com.au)  
Milsons Point NSW 1565 Website: [www.toweraustralia.com.au](http://www.toweraustralia.com.au)

## 8. MEMBER DECLARATION

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Please read the following acknowledgements and declarations carefully and sign at the bottom of this section.

*If I am applying for insurance protection benefits or to change my current benefits:*

- I understand that cover will not become effective until the Fund's insurer accepts in writing my application for insurance or increase in insurance on standard terms or I accept in writing non-standard terms offered to me and TOWER Australian Superannuation Limited (the Trustee) receives sufficient contributions to meet the required premium.
- I understand that the TOWER Master Fund Personal Statement Form and any other Forms submitted to TOWER which are relevant to the insurance protection benefit application need to be completed in full and confirm that the answers are true, correct and complete whether or not they are in my writing.
- I have made no statements to my Financial Adviser or Planner or my employer's Financial Adviser or Planner or any other person connected with the Financial Adviser or Planner which in any way alters, qualifies or modifies the answers given in the Personal Statement Form or other Forms submitted to the Trustee which are relevant to the insurance protection benefit application.
- I have read and understood the Privacy information section of this Form which sets out important details of how TOWER may use my personal information.

*If I have made or updated my nomination of beneficiaries, I understand that:*

- This nomination will replace any existing nomination made in respect of my TOWER Master Fund super account.
- The Trustee is not bound by this nomination but will take it into account in deciding how and to whom any death benefit will be distributed.
- The Trustee can only pay a death benefit from the Fund to my Personal Representative or a Dependant. Dependant means my legal or de facto spouse or other person with whom I am in a relationship where we are living together on a genuine domestic basis as a couple, my child (including adopted child, step-child, ex-nuptial child and child of member spouse), any person financially dependent on me at the date of my death or any person with whom I have an interdependency relationship at the date of my death. The Trustee is only able to pay another individual if no Dependents and no Personal Representative can be identified.

Member signature

X

Date

/ /

## 9. CONTACT US

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### TOWER Customer Service Consultants:

Preferred Choice Corporate Super  
Corporate Super  
Corporate First

Call 1800 812 922  
Monday to Friday 8:30am – 5:30pm (EST)

Please return your completed form and any supporting paperwork to:

TOWER Australia Limited  
PO Box 142  
Milsons Point NSW 1565