

Suncorp Everyday Super™



Application form for Suncorp Everyday Super pension and transition to retirement (for applications via financial adviser use only)

Issued 1 July 2015

Suncorp Portfolio Services Limited (Trustee) | ABN 61 063 427 958, AFSL 237905, RSE L0002059
Suncorp Life & Superannuation Limited (Insurer) | ABN 87 073 979 530, AFSL 229880



Use this form if you're applying to open a Suncorp Everyday Super pension or transition to retirement account through your financial adviser. If you don't have a financial adviser, you can apply for Suncorp Everyday Super by visiting our website, everydaysuper.com.au.

Tips to help you complete this form

- Use a blue or black pen and write in CAPITAL letters
- Use an 'X' to mark answer boxes

Have any questions?

If you'd like help completing this form, or if you have any questions, just call us on 1800 191 517. We'll be happy to help.

About you

Title

Given name(s)

Last name

Gender Male Female

Date of birth

Are you a current Suncorp Banking customer? Yes No

Are you currently registered for Suncorp Bank's Internet Banking Service? Yes No
If you're not currently registered for Suncorp Bank's Internet Banking service, we will arrange for Suncorp Bank to send you a Telephone Access Code (TAC) by SMS to your mobile phone so you can then register for its Internet Banking service. You will need to accept the terms and conditions applying to Internet Banking when registering for the service.

Eligibility to start a pension or transition to retirement account

Please indicate if you would like to start a Suncorp Everyday Super pension or a Suncorp Everyday Super transition to retirement account, and state your eligibility below:

- Transition to retirement
- I've reached my preservation age and would like to transition to retirement. I understand I will have two accounts: one superannuation account to which I can make contributions, and a pension account from which I can draw down an income.
- Pension
- I've reached my preservation age, have retired and never intend to work 10 hours or more in a week.
- I'm aged 60-64 and have retired/resigned from my employment
- I'm 65 years of age or older
- I'm permanently incapacitated
- I've a superannuation lump sum containing only unrestricted non-preserved funds.

Contact details (must be your residential address – sorry, we can't accept PO Boxes)

Please transfer the information from my existing Suncorp Everyday Super account

I'm a new customer or some of my details have changed, I've provided the updated information below

We require your email address and mobile number to open your account.

Email address

Mobile phone number

Home number Work number

Street name and number

Suburb/Town

State Postcode

Postal address (if different from above)

Street name and number or PO Box number

Suburb/Town

State Postcode

Country (if not Australia)

Tax File Number (TFN) notification

It's important we have your TFN. But don't stress, if you don't have it now, you can give it to us online after you've set up your account.

For security reasons we can't transfer your TFN between any existing accounts you might have with Suncorp and your new account.

If you are under age 60, please complete the Suncorp Everyday Super Tax File Number declaration at the end of this form.

For more information, please refer to the current Suncorp Everyday Super Product Disclosure Statement (PDS).

TFN

Initial contribution details

Please let us know the type of contribution(s) you would like to make to open your account.

Please note you can't add any further monies to your pension account once it has been opened.

Please tick all that apply.

Cheque contribution - Please make your cheque payable to 'Suncorp Portfolio Services Limited' and write your full name on the back of the cheque.

My contribution is made up of:

Personal contribution \$

Spouse contribution \$

Total contribution by cheque \$

Transfer from my existing Suncorp Everyday Super account noted earlier on this form

Transfer of other super funds

Total initial contribution \$

Transfer of other super funds

Name of super fund	<input type="text"/>
Approx. amount	\$ <input type="text"/> , <input type="text"/> , <input type="text"/> . <input type="text"/>
Name of super fund	<input type="text"/>
Approx. amount	\$ <input type="text"/> , <input type="text"/> , <input type="text"/> . <input type="text"/>
Name of super fund	<input type="text"/>
Approx. amount	\$ <input type="text"/> , <input type="text"/> , <input type="text"/> . <input type="text"/>
Name of super fund	<input type="text"/>
Approx. amount	\$ <input type="text"/> , <input type="text"/> , <input type="text"/> . <input type="text"/>
Total super funds to be transferred	\$ <input type="text"/>, <input type="text"/>, <input type="text"/>. <input type="text"/>

If you'd like assistance transferring your other super funds to your Everyday Super account, please visit our Super Rollover Wizard at suncorpsuperrollover.com.au. Alternatively, you can complete a separate Super rollover form for each fund, which you can get from our website at everydaysuper.com.au.

Investment selection

Choose where you want your super money to be invested by selecting from the following options.

Please note –

- If your investment selection is incomplete or unclear, your funds will be invested into the Suncorp Lifestage Fund based on your date of birth, for example – if you were born in 1952, your super will be invested into the Suncorp Lifestage Fund 1950-1954. Your pension payments will be taken from this fund.
 - There are restrictions on the minimum (\$1,000) and maximum (70% of your account balance) amount you can invest in Everyday Super Term Deposits. For more information on these restrictions, please see the PDS and Product Guide.
- I want Suncorp to manage my super and invest it in the default Suncorp Lifestage Fund based on my date of birth. My pension payments will be taken from this fund.
- I want to choose where my super is invested and where my pension payments are paid from (Please fill in the details below)

Investment option	Investment selection	Pension payment strategy
Suncorp Australian Shares Fund	<input type="text"/> % Percent to be invested	<input type="text"/> % Percent of pension payment
Suncorp International Shares Fund	<input type="text"/> % Percent to be invested	<input type="text"/> % Percent of pension payment
Suncorp Property Fund	<input type="text"/> % Percent to be invested	<input type="text"/> % Percent of pension payment
Suncorp Australian Fixed Interest Fund	<input type="text"/> % Percent to be invested	<input type="text"/> % Percent of pension payment
Suncorp Cash Fund	<input type="text"/> % Percent to be invested	<input type="text"/> % Percent of pension payment
Everyday Super Term Deposit – 6 month term	<input type="text"/> % Percent to be invested	
Everyday Super Term Deposit – 1 year term	<input type="text"/> % Percent to be invested	
Everyday Super Term Deposit – 3 year term	<input type="text"/> % Percent to be invested	
Everyday Super Term Deposit – 5 year term	<input type="text"/> % Percent to be invested	
Total amount (must equal 100% or total amount of initial investment)	100% Percent to be invested	

Pension payment details

Please pay my pension:

Monthly Quarterly Half-yearly Yearly

Sorry, fortnightly payments are currently unavailable

Pension payment – please select one from the following

- The minimum amount I can receive each year*
- The maximum amount I can receive each year (10% - only applicable if you're transitioning to retirement)
- This amount per year (must be more than your minimum amount and less than your maximum if you have a transition to retirement account)*

\$, .

* The pension amount will be pro-rated for the first year

Please pay my first pension payment on / /

Annual increase (not available if minimum or maximum payment selected)

No annual increase

CPI

Other amount %

Bank account details

Please make my pension payments into the following account.

Account name

Name of Australian financial institution

Branch name or Address

Branch BSB Account number

Reversionary beneficiary nomination

If you nominate a reversionary beneficiary you cannot also nominate a non-lapsing death beneficiary

You can nominate only one reversionary beneficiary and this cannot be changed or removed. You can nominate multiple non-lapsing death beneficiaries on the following page, and can change these at any time.

Title

Given name(s)

Last name

Date of birth / / Gender Male Female

Residential address (sorry – we can't accept PO Boxes)

Same as mine

Street name and number

Suburb/Town

State Postcode

Email address

Home number Work number

Mobile phone number

Postal address (if different from above)

Street name and number

Suburb/Town

State Postcode

Non-lapsing death benefit nomination

I don't wish to nominate a beneficiary or In the event of my death, I direct you to pay my benefit to my dependants as listed below.

You can nominate a non-lapsing death beneficiary if you have not already nominated a reversionary beneficiary

If you wish to nominate more than three dependants, please copy this page and attach to this form. The total of all allocated proportions (both your dependants and estate) must equal 100%

Given name(s)

Last name

Date of birth / / Gender Male Female

Relationship to you Spouse Child Financial dependant Interdependant relationship

Allocation %

Given name(s)

Last name

Date of birth / / Gender Male Female

Relationship to you Spouse Child Financial dependant Interdependant relationship

Allocation %

Given name(s)

Last name

Date of birth / / Gender Male Female

Relationship to you Spouse Child Financial dependant Interdependant relationship

Allocation %

And/or

Please pay my benefit to my estate

Allocation %

MEMBER'S DECLARATION

I request that the Trustee accepts my nomination. I understand that:

- On my death, the Trustee must pay my death benefit in accordance with my nomination, provided it's valid, at that time.
- For my nomination to be valid, the beneficiaries I've nominated must be dependants at the time of my death, or my estate.
- My beneficiaries and I agree to be bound by the Fund's Trust Deed (as amended).
- This nomination applies to my superannuation death benefit in this Suncorp Everyday Super account.
- If a nomination is invalid at the time of my death, the Trustee has discretion to determine the beneficiaries, including any payment to my estate.

Signature Date / /

WITNESS DECLARATION (The date of witness and member signatures must be the same.)

First witness signature

I declare that:

- I'm 18 years of age or older and I'm not a nominated beneficiary and
- This nomination was signed by the member in my presence.

Signature Date / /

Full name

Second witness signature

I declare that:

- I'm 18 years of age or older and I'm not a nominated beneficiary and
- This nomination was signed by the member in my presence.

Signature Date / /

Full name

As we're bound to pay your benefit according to your valid nomination, we recommend you review your nomination if any of your circumstances change.

Adviser details

Adviser ID		
Last name		
Given name(s)		
Company name		
Licensee name		
Street name and number or PO Box number		
Suburb/Town		
State		Postcode
Daytime phone number		Alternative phone number
Email address		

You must complete this section if this customer was referred to you by a Suncorp Bank branch representative.

Referrer ID (U Number)	U	
Referrer Name		
Referrer Branch ID		Branch Name

Advice fee (Personal advice)

Suncorp Lifestage Fund

Upfront dollar amount Percentage
\$, . OR . % of account balance

Other investment options

Upfront dollar amount Percentage
\$, . OR . % of account balance

The personal advice fee for all other investment options will only be charged as a one-off payment.

GST on the personal advice fee is included in the amounts stated above. Any personal advice fee will be deducted from your Suncorp Lifestage Fund or proportionately across all your investment options, excluding Suncorp Everyday Super Term Deposits.

The member has the right to request the trustee to cease deducting all or part of an advice fee from the Suncorp Lifestage Fund. The trustee may at its absolute discretion refuse to deduct and/or pay an adviser service fee, personal advice fee or any other fee.

Personal advice fees will appear as an advice fee on transaction statements and annual statements

^Effective 1 January 2014 personal advice fee replaces Adviser Service fee on Suncorp Everyday Pension accounts.

Insurance cover (transition to retirement customers only)

We offer you Life and Total & Permanent Disability (TPD) insurance cover as part of your Everyday Super account. We call this Suncorp Lifestages insurance cover.

Please note –

- Not everyone is eligible for insurance cover – if you're in a hazardous occupation, under 15 or over age 69, you're not eligible for insurance cover with Everyday Super (If you're aged 64 or over, you're only eligible to receive Life cover).
- If you're eligible, you'll automatically receive Suncorp Lifestages cover when you open your Everyday Super account. If you choose to change your insured amount or cancel your cover, we'll process this immediately and you won't be debited any insurance premiums for the Suncorp Lifestages cover.
- Your Suncorp Lifestages cover won't commence until we receive your first contribution.
- Your Suncorp Lifestages cover is subject to a 'pre-existing condition' exclusion and a 'self-inflicted act' exclusion.

In summary, under your Suncorp Lifestages cover, we won't pay any claims related to an injury, sickness, illness or symptom experienced in the last two years or a self-inflicted act (including suicide) within the first 13 months of your cover commencing, being increased or if it was reinstated after being cancelled. Please refer to the PDS and Product Guide for full details on the exclusions that apply to your insurance cover.

Don't want insurance?

That's fine – you can cancel it below. If you decide you want insurance at a later date, just log into your online account to reapply for cover and answer a simple questionnaire – no signatures or medical tests required.

Please confirm what you'd like to do with your Everyday Super insurance cover

- I want Suncorp to manage my Life and TPD insurance cover and keep the automatic, age-based Suncorp Lifestages cover
- I want to choose my own insurance cover amount (please fill in the details below)
- I don't want insurance cover

If you would like insurance cover, please provide us with your occupation

Occupation

Choose your own cover**Total amount of cover (maximum \$850,000)**Life only cover \$, Life and TPD cover \$, Life cover\$, TPD cover (this can't be higher than your Life cover)**Questionnaire for increasing insurance cover***Must be completed if you are choosing a level of cover higher than the default provided by Suncorp Lifestages cover.*

Please answer the following questions to help our Insurer determine whether you're eligible to increase your insurance cover.

Please note -

If you've applied to increase your cover and are accepted for the higher amount, we'll update your insurance cover to your selected amount and we'll call it 'customised cover'. Your cover amount will no longer change with your age and the 'pre-existing conditions' exclusion will no longer apply. The 'self-inflicted act' exclusion will still apply and participation in selected 'hazardous pursuits' won't be covered by your insurance. For more information on how customised cover works and how we apply exclusions to your cover, check out the PDS and Product Guide.

What is your current height and weight?

If your Body Mass Index (BMI) is below 17 or 35 and above, you are not eligible to increase your insurance under Everyday Super.

Weight (kg) Height (cm) **Have you been paid (or are you eligible to be paid) or lodged (or intend to lodge) a claim for a Total & Permanent Disability, Income, Trauma Insurance or Terminal Illness benefit?**

If your answer to the above question is 'yes', you are not eligible to increase your insurance under Everyday Super.

 Yes No**Do you smoke more than 40 cigarettes per day?**

If your answer to the above question is 'yes', you are not eligible to increase your insurance under Everyday Super.

 Yes No**Have you ever had, received treatment for, had symptoms of or contemplating any advice or treatment for:**

- Heart or cardiovascular complaint or chest pains, stroke, high blood pressure or cholesterol
- Diabetes or abnormal blood sugar
- Mental health/nervous disorder (including stress, anxiety or depression)
- Epilepsy or fits of any kind, multiple sclerosis, paralysis or other neurological disorder
- Cancer/leukaemia or tumour of any type
- Hearing or sight impairment (excluding long or short sightedness)
- Disorders of the kidney, bladder, bowel, stomach, prostate or liver (including hepatitis B or C) or gynaecological conditions
- Muscular skeletal disorders (eg back, joint), arthritis, loss of limb or chronic fatigue syndrome
- Lung complaint (eg asthma, sleep apnoea, emphysema)
- Blood disorders (eg haemochromatosis, haemophilia, iron deficiency anaemia, thalassemia, immune disorders)

If your answer to the above question is 'yes', you are not eligible to increase your insurance under Everyday Super.

 Yes No**Other than already disclosed in this application, do you presently suffer from any conditions, injury or illness which you suspect may require medical investigation or treatment in the future?**

If your answer to the above question is 'yes', you are not eligible to increase your insurance under Everyday Super.

 Yes No**Have you ever suffered from Acquired Immune Syndrome (AIDS) or been infected with, or ever tested positive for AIDS or Human Immunodeficiency Virus (HIV) or any other AIDS related condition?**

If your answer to the above question is 'yes', you are not eligible to increase your insurance under Everyday Super.

 Yes No**Does your alcohol consumption exceed more than 30 standard drinks per week?**

If your answer to the above question is 'yes', you are not eligible to increase your insurance under Everyday Super.

 Yes No

Duty of disclosure

Before you enter into a contract of life insurance with an insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose to the insurer every matter that you know, or could reasonably be expected to know, that is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

This duty, however, doesn't require disclosure of a matter:

- That diminishes the risk to be undertaken by the insurer
- That's of common knowledge
- That the insurer knows, or in the ordinary course of their business, ought to know, and
- As to which compliance with your duty is waived by the insurer.

It's a condition of your membership (ie by holding an Everyday Super account) in Suncorp Everyday Super that you discharge the same duty of disclosure to us. This duty continues to apply until the Insurer notifies you that the risk has been accepted.

If you don't disclose something to us when you apply to:

- Increase your insurance cover, or
- Fix your cover after your Suncorp Lifestages age-based insurance scale falls below your insured amount, or
- Reinstate your cancelled insurance cover,

an adjustment will be made to your cover.

Your insurance cover will revert to the terms and conditions of Suncorp Lifestages cover. This means the amount of your insurance cover and TPD definition will be the one relevant to your age band and premiums.

The 'pre-existing condition' exclusion would apply and your claim would be assessed against this and all other exclusions. For more information about the 'pre-existing condition' and other exclusions, please refer to Are there times when we won't pay in the Everyday Super Product Guide.

Non-disclosure

If you fail to comply with your duty of disclosure and the insurer would not have entered into the contract if the failure had not occurred, the insurer may avoid the contract within 3 years of entering into it.

If your non-disclosure is fraudulent, the insurer may avoid the contract at any time.

The insurer may elect not to avoid your contract but to vary it by:

- reducing the sum insured in accordance with a formula that takes into account the premium that would have been payable if you had complied with your duty of disclosure; or
- placing the insurer in the position in which the insurer would have been in if you had complied with your duty of disclosure.

The options to vary the contract are available to the insurer while the contract remains in force.

Where your contract provides death cover, the insurer may only apply (i) above and must do so within 3 years of you entering into the contract with them.

Your duty of disclosure continues to apply until the contract is entered into. It also applies when you extend, vary or reinstate a contract of life insurance.

Proof of identity

If proof of identity hasn't been previously completed, you'll need to prove your identity by selecting an item from **Part A** below, or if you can't provide any of these items, select two items from **Part B**.

We require proof of identity **BEFORE** we can proceed with your instructions.

Documents written in a language other than English must be accompanied by an English translation prepared by a NAATI accredited translator (see naati.com.au). We're not responsible for the content of external websites.

Part A – Acceptable photographic identification documents – ONE item required

Select ONE item from this section, which **MUST** contain your name, photo and either date of birth or residential address

- A current driver's licence
- A current Australian passport (or one which has expired within the last two years)
- A current Australian Proof of Age Card (including 18+ and Birth Cards)
- A current foreign passport or similar travel document also containing your signature issued by a government, the UN or agency of the UN
- A National Identity Card issued by a foreign government also containing your signature

Part B – Other alternative identification documents – TWO items required (this section is only required if a Part A item couldn't be provided)

Select ONE item from this section

- An Australian birth certificate/extract
- A citizenship certificate
- A foreign birth certificate issued by a government, the UN, or agency of the UN
- A current pension card issued by the Department of Human Services

AND – Select ONE item from this section which **MUST** contain your name and residential address

- A notice issued by the Commonwealth, State or Territory within the last twelve months recording the provision of financial benefits to you
- A notice issued by the Australian Taxation Office within the last twelve months recording a debt payable by you to the Commonwealth (or by the Commonwealth to you)
- A notice issued by a local government body or utilities provider (eg gas, electricity, phone) within the last three months recording the provision of services to your address or to you
- If you're under 18, a letter written less than three months ago, from your school principal recording how long you've attended that school

Part C – For use where your residential address is not in Australia or New Zealand – One additional item required

In addition to the **Part A** or **Part B** requirements above, please select:

- ONE additional item from Part A

OR

- ONE additional item from any section in **Part B**

Verification procedure (the adviser must complete this section)

Verify the client's full name and either their date of birth or residential address from the original copies of identification documents provided on the previous page and:

- Ensure your client has completed **Part A** or **Part B** if your client doesn't own a document from **Part A**, and **Part C** if residing overseas (other than New Zealand)
- Complete this section to indicate the details of the verification procedure conducted
- Ensure original documentation is sighted when meeting your client face to face (certified copies are only acceptable if you don't meet face to face and they must meet the requirements detailed in the section above)
- Verify that the documents haven't expired (except for an Australian passport which has expired in the last two years)

Advisers, please **do not** attach copies of the identification documents when forwarding this form.

ID document details	Document 1	Document 2 (if using Part B or Part C)
Verified from	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy [†]	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy [†]
Document type / issuer		
Issue date		
Expiry date (if applicable)		
Document number (if any)		
Accredited English translation	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted [‡]	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted [‡]
Verified date		

Adviser's details

Adviser's name

Adviser's organisation

Adviser number

Daytime phone number

Notes:

[†] Certified copies of documentation are only permitted where an adviser hasn't assisted the client face to face

[‡] If you're able to translate your client's non-English proof of identification documents you can do so, otherwise a NAATI accredited translator must provide the translation before verification can occur

Where to send this form

Please send the completed form and any required attachments to

Suncorp Everyday Super
GPO Box 2585
Brisbane QLD 4001

Declaration and signature

By completing and signing this form, I'm agreeing that I have read, understood and agreed to the Terms and Conditions in relation to my application for a Suncorp Everyday Super account:

General

- I've read the Suncorp Everyday Super Product Disclosure Statement (PDS), the Suncorp Everyday Super Product Guide and the Understanding Investment Risk flyer (including any materials incorporated by reference) and have received and accepted this offer in Australia and I agree to be bound by Suncorp Everyday Super's Trust Deed (this is a legal document that sets out the rules within which you have to operate and our rights as a Suncorp Everyday Super account holder), as amended from time to time.
- I agree to the fees shown in the PDS and Product Guide and I understand the Trustee reserves the right to refuse or reject an application.
- If my application is incomplete or unclear, you may hold my money for up to 30 days. If you don't receive additional information or a completed application form within that time, you'll return the money (without adding any interest) to whoever paid it to you.
- I understand this product is not a bank deposit or other liability of Suncorp Bank (Suncorp-Metway Limited ABN 66 010 831 722 AFSL 229882) (SML) and is subject to investment risk including possible delays in repayment and loss of the interest and principal invested. I also understand SML is not liable or responsible for, and does not guarantee or otherwise support, Suncorp Everyday Super pension accounts.
- I understand Suncorp Bank is not liable or responsible for, and does not guarantee or otherwise support, Suncorp Everyday Super pension accounts. Internet Banking is provided by Suncorp Bank. I also understand Suncorp Bank does not guarantee the availability of the Internet Banking Service and can terminate access to that service at any time without reason or notice and I that I must agree to Suncorp Bank's Internet Banking Terms and Conditions before I can access Internet Banking.
- I declare that I am eligible to apply for a Suncorp Everyday Super pension or transition to retirement account.
- I acknowledge that my Suncorp Everyday Super pension account will not be eligible for insurance (although the superannuation account opened as part of a transition to retirement account may be).
- I acknowledge that a Suncorp Everyday Super superannuation account will be opened prior to transferring my benefits into a Suncorp Everyday Super pension account, and that any income or capital gains made in my superannuation account may be subject to earnings tax before that transfer takes place. During this period my account will be treated as a superannuation account (except for insurance in the case of customers opening a pension account).
- I acknowledge that a reversionary beneficiary can only be nominated at the time of application, and this nomination cannot be removed or altered.

Contributions and withdrawals

- I understand that I can't access my super money until I've reached retirement age or I've met what's called a 'condition of release'
- If I'm applying for a super or transition to retirement account I declare that I've read the eligibility criteria to make a contribution into superannuation and I'm eligible to make or have contributions made on my behalf.

Investments

- I acknowledge that the performance of any investment option offered by Suncorp Everyday Super isn't guaranteed by the Trustee or any other person.
- My investment choices have been made after reading the current PDS and Product Guide (including any materials incorporated by reference).
- I acknowledge, when I make any investment decisions or transact on my account, I may have not been notified about material changes or significant events that adversely affect a matter that should be in the PDS for those investment options.
- I consent to getting notification and an explanation of any material change or significant event that adversely affects a matter in the most recent PDS by downloading the information from your website at everydaysuper.com.au.

Information, authorisation of other persons and privacy

- I authorise my adviser, and any other person who I inform you in writing, to receive and obtain my personal information for the purposes of managing my account and I'll notify you if there is a change to this arrangement.
- Before or at the time I provided any personal information, I have read and understood your privacy statement in the current Everyday Super Product Guide, which is also available at suncorp.com.au/privacy
- I consent to you collecting, using and disclosing my personal information including sensitive information, in accordance with the privacy statement, including for the purposes of opening and administering my Suncorp Everyday Super account.
- I agree to receive communications from Suncorp electronically (where allowed under legislation), including my annual statement, transaction confirmations, annual report and any significant product updates.
- I agree to be contacted by phone by a Suncorp representative if there is a need to get more information from me.
- The information I've provided on the application form is true and correct.

Meanings

- In this section, all references to 'you' are to the Trustee.

Marketing

- Every now and then, we and any related companies that use the Suncorp brand might let you know about news, special offers, products and services that you might be interested in. We will engage in marketing unless you tell us otherwise. You can contact us to update your marketing preferences at any time

Meanings

All references to 'we' are to the Trustee

Your signature Date

Full name

Adviser signature

Adviser's full name

Thank you for applying for a Suncorp Everyday Super account!

Once we've processed your application, you'll receive a welcome email with details on how you can access your online account through Suncorp Bank's Internet Banking Service.

Once you're online, you can customise your Everyday Super account by:

- Customising your pension payment strategy.
- Reviewing your beneficiaries (ie the person or people you've chosen to receive your super benefit should the worst come to pass).
- Nominating an authorised representative (someone with legal authority to view, make changes or transact on your Suncorp Everyday Super account).
- Learning more about super and investing by accessing a range of online advice and education tools at no additional cost.

Section B – to be completed by PAYER

1 ABN

2 Registered business name or trading name
(or individual name if not in business)

S U N C O R P P O R T F O L I O
S E R V I C E S L I M I T E D

3 Trading name - if applicable

4 Business Address

G P O B O X 2 5 8 5
B R I S B A N E
Q L D Postcode 4 0 0 1

5 Contact person C U S T O M E R S E R -
V I C E C E N T R E

Business phone number STD 1 8 0 0 1 9 1 5 1 7

Declaration by payer: I declare that the information I have given is true and correct.

Signature of payer

X

Day Month Year

/ /

Date

Please note There are penalties for deliberately making a false or misleading statement.

Please provide an estimate of the time taken to complete Section B.

mins

Tax file number declaration

The information you provide in this declaration will enable your payer to work out how much tax to withhold from payments made to you.

Terms we use

- payer** – we are referring to the business or individual making payments under the pay as you go (PAYG) withholding system.
- payee** – we are referring to the individual being paid.

When should you use this form?

You should complete this form before you start to receive payments from a new payer, or your circumstances change. For example, when you receive:

- payments for work and services as an employee, company director or office holder
- payments under return-to-work schemes
- payments under labour hire arrangements or other specified payments
- benefit and compensation payments
- superannuation benefits.

The information you provide on this form is used to determine the amount of tax to be withheld from payments made to you. For example, whether you:

- claim the tax free threshold
- are an Australian resident for tax purposes
- have a Higher Education Loan Program (HELP) debt
- have a Financial Supplement debt.

Individuals who reach age 60 and commence a superannuation benefit that does not include an untaxed element, do not need to complete this form for that superannuation benefit.

Question 1

What is your tax file number (TFN)?

This question asks you to supply your TFN.

Your payer and the Tax Office are authorised by the *Taxation Administration Act 1953* to collect your TFN on this form. It is not an offence not to quote your TFN. However, your payer is required to withhold 46.5% from all payments made to you if you do not:

- provide a *Tax file number declaration* (NAT 3092) to your payer
- quote your TFN, or
- claim an exemption from quoting your TFN.

You may claim an exemption from supplying your TFN.

Print in the appropriate box if you:

- have lodged a TFN application or enquiry form for individuals or made a phone or shop front enquiry to obtain your TFN.

You now have 28 days to provide your TFN to your payer who must withhold at the standard rate during this time. After 28 days if you haven't given your TFN to your payer they will withhold the top rate of tax plus the Medicare levy from future payments.

- are claiming an exemption from quoting a TFN. You are exempt from quoting your TFN if you are:
 - under 18 years of age and do not earn enough to pay tax, or
 - an applicant or recipient of certain pensions, benefits or allowances from:
 - Centrelink – however you will need to quote your TFN if you receive Austudy, Newstart, sickness or parenting allowance
 - Department of Veterans' Affairs – a service pension under the *Veterans' Entitlement Act 1986*, or
 - the Military Rehabilitation and Compensation Commission.

For more information about privacy, see 'Privacy of information' on page 14.

Provision of your TFN to your superannuation fund

Your payer must pass your TFN to the superannuation fund to which contributions are being made on your behalf. If your superannuation fund does not have your TFN, we can provide it to them. This enables:

- your superannuation fund to accept all types of contributions to your account(s)
- no increase to the tax on contributions to your superannuation account(s)
- no additional tax to be deducted when you start drawing down your superannuation benefits, other than the tax that may ordinarily apply
- ease in tracing different superannuation accounts in your name so that you receive all your superannuation when you retire.

Under the *Superannuation Industry (Supervision) Act 1993*, your superannuation 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 trustee of your superannuation fund may disclose your TFN to another superannuation provider, when your benefits are being transferred. You may request to the trustee of your superannuation fund, in writing, not to disclose your TFN to any other trustee.

Questions 2, 3, 4 and 5

Fill in your personal information.

Question 6

On what basis are you paid?

Check with your payer if you are not sure.

Question 7

Are you an Australian resident for tax purposes?

Generally, we consider you to be an Australian resident for tax purposes if you:

- have always lived in Australia or you have come to Australia and now live here permanently
- are an overseas student doing a course that takes more than six months to complete
- have been in Australia continuously for six months or more and for most of that time you worked in the one job and lived in the same place
- will be or have been in Australia for more than half of the financial year (unless your usual home is overseas and you do not intend to live in Australia).

If you go overseas temporarily and do not set up a permanent home in another country, you may continue to be treated as an Australian resident for tax purposes.

Answer 'NO' to this question if you are not an Australian resident for tax purposes. You must also answer 'NO' at questions 8, 9 and 10 (unless you are a non-resident claiming a senior Australians, zone or overseas forces tax offset).

Question 8

Do you want to claim the tax-free threshold from this payer?

The tax-free threshold is the amount of income you can earn each year that is not taxed. It is available only to people who are Australian residents for tax purposes (that is, people who answered 'YES' at question 7).

Answer 'YES' if you:

- are an Australian resident for tax purposes
- are not currently claiming the tax-free threshold from another payer
- want to claim the tax-free threshold.

Answer 'NO' if you either:

- answered 'NO' to question 7
- have claimed the tax-free threshold from another payer
- do not wish to claim the tax-free threshold.

Question 9

Do you want to claim the senior Australians tax offset by reducing the amount withheld from payments made to you?

You are not entitled to reduce your withholding amounts, or claim the senior Australians tax offset with more than one payer at the same time.

If you receive income from more than one source, contact us on **1300 360 221** between 8.00am and 6.00pm, Monday to Friday.

Answer 'YES' if you are eligible and choose to receive the senior Australians tax offset. You can reduce the amount withheld from payments made to you during the year by completing a *withholding declaration* (NAT 3093).

Question 10

Do you want to claim a zone, overseas forces, dependent spouse or special tax offset by reducing the amount withheld from payments made to you?

You are not entitled to claim tax offsets from more than one payer at the same time.

You may be eligible for:

- a zone tax offset if you live or work in certain remote or isolated areas of Australia
- an overseas forces tax offset if you serve overseas as a member of Australia's Defence Force or a United Nations armed force
- special tax offset for a dependent invalid relative, dependent parent, housekeeper caring for an invalid spouse or a dependent child-housekeeper.

Answer 'YES' to this question if you are eligible and choose to receive tax offsets by reducing the amount withheld from payments made to you. You also need to complete a *Withholding declaration* (NAT 3093).

Answer 'NO' to this question if you are not eligible or choose to receive any of these tax offsets as an end-of-year lump sum through the tax system.

Non-resident

If you are not a resident of Australia for tax purposes, you are not entitled to claim a dependent spouse tax offset or a special tax offset. You may be entitled to claim the zone or overseas forces tax offset.

Question 11

(a) Do you have an accumulated Higher Education Loan Program (HELP) debt?

Answer 'YES' if you have an accumulated HELP debt.

Answer 'NO' if you do not have an accumulated HELP debt, or you have repaid all your HELP debt.

You have a HELP debt if either:

- the Australian Government lends you money under HECS-HELP, FEE-HELP, OS-HELP, VET FEE-HELP
- you have a debt from the previous Higher Education Contribution Scheme (HECS).

(b) Do you have an accumulated Financial Supplement debt?

Answer 'YES' if you have an accumulated Financial Supplement debt.

Answer 'NO' if you do not have an accumulated Financial Supplement debt, or you have repaid all your Financial Supplement debt.

Have you repaid this debt?

When you have repaid your accumulated HELP or Financial Supplement debt, you must complete a new *Withholding declaration* (NAT 3093).

Sign and date the declaration

Make sure you have answered all the questions in Section A and have signed and dated the declaration. Give your completed declaration to your payer.

Privacy of information

We are authorised by tax laws, including the *Income Tax Assessment Act 1936*, to ask for information on this declaration. We need this information to help us administer those laws.

Where we are authorised by law to do so, we may give this information to other government agencies. These agencies could include Centrelink, Australian Federal Police, Child Support Agency, Departments of Families, Housing, Community Services and Indigenous Affairs, Veterans' Affairs, and Education, Employment and Workplace Relations.

Only certain people and organisations can ask for your TFN. These include employers, some Australian Government agencies, including Child Support Agency, trustees for superannuation funds, payers under the PAYG system, higher education providers and investment bodies such as banks. We are authorised by the *Taxation Administration Act 1953* to collect your TFN. You are not required by law to provide your TFN. However, quoting your TFN reduces the risk of administrative errors and having extra tax withheld.