

Deloitte Superannuation Fund – Member Superannuation application form

Your details

Surname: _____ Title: Mr/Mrs/Miss/Ms
Given names: _____ Date of birth: ____/____/____
Residential address: _____
_____ State: _____ Postcode: _____

Life insurance – variation request to standard benefit

Only complete if you wish to purchase additional insurance cover above the standard cover. Standard cover is not optional for Deloitte employees who are members of the Fund. Partners do not receive any insurance cover in this Fund. Spouse members do not receive any insurance cover in the Fund. Details of your standard cover and costs are in Part A – Member Booklet and Part C – Fees, changes, tax and other additional information of your PDS, respectively.

I wish to increase my level of insurance cover to: \$_____

An application to increase your cover will necessitate the lodgement of a Personal Statement which will be forwarded to you upon processing of this request by the Fund administrator, Aon Consulting Pty Limited.

I acknowledge that all insurance offered is subject to acceptance by the underwriter and that I may in certain circumstances be required to supply further information or medical reports to the underwriter at their request.

Voluntary contributions

I wish to make additional voluntary contributions to the fund in addition to SG Contributions. I wish my contributions to be deducted:

Before tax or After tax (Please tick either box)

Contributions before tax (Salary sacrificed contributions) are deducted from your salary, and then SG Contributions are calculated and paid.

The salary component of the package should represent at least 50% of the total remuneration package or \$50,000, whichever is the lesser.

I wish for the following to be deducted each pay period: \$_____ (a flat dollar amount)

This notice authorises Deloitte to commence deductions from my salary and remit those contributions to the fund in the first available pay and each pay thereafter until further notice.

Tax File Number notification

Please read the information below before providing your Tax File Number (TFN)

Tax File Number / /

I understand that I have the right to instruct the trustee as follows:

- please pass my TFN on to any new fund to which I may later transfer
- please do not pass my TFN on to any new fund to which I may later transfer.

I understand that I do not have to provide my TFN. I am choosing to provide my TFN to the trustee for the following superannuation purposes:

- any benefits subsequently paid may be taxed at a concessional rate of tax, rather than the highest marginal rate
- to facilitate the administration of the government surcharge
- any other actual or proposed uses authorised by superannuation or taxation legislation.

If you require further information, please contact the Australian Taxation Office Superannuation Helpline on 131 020

Personal information

The personal information that the Deloitte Superannuation Fund collects is used to:

- process your application and requests
- administer your account and provide you with benefits and options
- conduct research about how to improve the Fund's services and products.

If you choose not to give us your personal information we may not be able to process your application or provide you with all the benefits of the Deloitte Superannuation Fund.

Unless required or authorised by law, we will only provide your personal information to authorised service providers who use the information to administer your account and provide services to you with insurance cover. You are usually able to gain access to your personal information by asking for it. A copy of the Fund's privacy policy is available on request from the Privacy Officer.

Contact details for the Privacy Officer can be found in Part A – Member booklet of the Fund's PDS.

Application to join

On joining the Fund I acknowledge that I will be bound by the Trust Deed and Rules of the Fund and:

- I authorise my employer to deduct member contributions from my salary/wage at the amount specified
- I understand that the tax deductibility of contributions made by my employer on my behalf are subject to limits set by legislation
- I declare that the information I have given on the form is correct
- I understand that upon my cessation of employment, if I do not provide instructions regarding the payment of my benefit within 90 days, the Trustee will transfer my benefit over to ERF or such other superannuation fund, or roll-over fund selected by the Trustee from time to time
- I understand that I will be insured against total and permanent disablement under the Fund's insurance policies, subject to any policy conditions or exclusions
- I have received a Product Disclosure Statement explaining the Fund, its benefits and the conditions relating to the benefits and the method of determining my entitlement and benefits, together with the latest Annual Report
- I acknowledge that I have read the extract of the Privacy Statement in the Product Disclosure Statement and understand all information provided on this form is to fulfill a primary purpose or secondary related purpose under the Fund's Privacy Policy and Management Plan and the Privacy Amendment (Private Sector) Act 2000 and may be disclosed to third parties to complete this purpose.

Deloitte to complete

Employee no: _____ Date joined: ____/____/____ TPV: \$ _____
At work on joining Y/N explain _____ Completed by: _____

Trustee to complete

Received: ____/____/____ Super no: _____ M/ship group no: _____ Category: _____

Signature

____/____/____
Dated

Member investment choice nomination

Your decision is important and it may significantly affect the amount of benefit you receive. We recommend you obtain advice from a financial adviser before making your decision. General information about the investment options is contained in the Guide to Investment Choice (Part B of the Product Disclosure Statement) which is available from the ebenefits website.

Available investment options (where 100% of your contributions and assets may be invested)

I request all future contributions and rollovers to be invested in the following option (select one only):

Shares Growth Balanced Capital stable

Acknowledgement

- I acknowledge that I have read and understood the information as provided by the trustee on the investment options available to me, including the investment strategies of each option in the Guide to Investment Choice (Part B of the Product Disclosure statement)
- I acknowledge and understand that all information provided on this form is to fulfil a primary purpose or related secondary purpose under the Fund's Privacy Policy and Management Plan summarised in the Privacy Statement and so may be disclosed to third parties to complete these purposes
- I agree to be bound by the trust deed & rules of the Fund and note that I may examine the trust deed at any time
- I acknowledge that I have received information setting out the benefit design of the Fund.

Member's name

Signature

____/____/____
Dated

Deloitte Superannuation Fund

Transfer superannuation benefits from another super fund

Complete this section if you wish to transfer monies from your old superannuation fund to the Deloitte Superannuation Fund.

New fund details

Name of new fund: **Deloitte Superannuation Fund**

Address of new fund: **Aon Consulting Pty Limited, GPO Box 9819, Sydney, NSW 2001**

Personal details

Surname: _____ Title: Mr/Mrs/Miss/Ms

Given names: _____ Date of birth: ____/____/____

Residential address: _____

State: _____ Postcode: _____

Telephone Number – Home: () _____ Work: () _____

Old fund details

Name of old fund: _____ Membership no.: _____

Address of old fund: _____

The approximate value of my benefit with old fund is \$ _____ Date of birth: ____/____/____

Name of Administrator Company (if known): _____ Phone no.: _____

Name of employer contributing to the old fund: _____

Approximate date I left that employer: _____

I authorise the transfer of my benefits from the above superannuation fund to the Deloitte Superannuation Fund. I also authorise the transfer of any contributions still to be made by my previous employer, which may be received after benefits have been transferred.

I understand that:

- I discharge the trustee of my current fund from all liability in respect of my membership in that fund once the total of my account has been transferred
- my current fund is a complying fund under the Superannuation Industry (Supervision) Act 1993
- the Deloitte Superannuation Fund may be required by law to deduct tax from the untaxed portion (if any) of the amount transferred.

