

## Election to commute SSS pension to lump sum

### 1 Personal details

Title (eg Mr Mrs Ms Miss Dr)

Birth date

DD	MM	YY
/	/	

Family name

Given name/s

Postal Address



Suburb, Town, City

Postcode

Daytime contact telephone number

Email address

Member number

### 2 Spouse/de facto partner details (where applicable)

Please complete this section only if you are married or have a de facto partner (which may include a partner of the same sex).

Title (eg Mr Mrs Ms Miss Dr)

Gender (M or F)

Family name

Given name/s

Date of birth

DD	MM	YY
/	/	

Date of marriage

DD	MM	YY
/	/	

If you are not married but are living together in a de facto relationship:

Date of commencement

DD	MM	YY
/	/	

### 3 I understand the legislation

It is important you read and understand SSS Fact Sheet 14, Exchanging your pension for a lump sum, which is provided with this form. Please contact Customer Service if you need any help.

Please cross the box below to certify:

- I have read and understood SSS Fact Sheet 14, which explains the legislation affecting my election.

### 4 Election to commute (exchange)

▼ Please cross one box only

- a**  I wish to give up the whole of my pension and take a lump sum instead.  
I will also take as a lump sum any pension arising from salary increases paid in the future.

OR

- b**  I wish to give up some of my pension as a lump sum and keep the balance as a pension. Please indicate either i) **or** ii) as you prefer to express it:

- i)  I wish to keep a fortnightly pension of

\$

and take the balance as a lump sum.

I will also take as a lump sum any pension arising from salary increases paid in the future. **OR**

- ii)  I wish to take a lump sum of

\$

and keep the balance as a pension.

OR

- c**  I wish to give up some/all of my fortnightly pension in **two stages**\*:

**First** payment to be a lump sum of:

\$

**Second** payment to be a lump sum of:

\$

(\*The legislation allows you to choose to commute (exchange) your pension in two stages if you prefer, with each lump sum being payable on a different date, **provided that** both dates occur within 13 months of the date when your right to commute arose. Please also complete Section 5.)

please turn over ►

## 5 When do you want your lump sum election to take effect?

Please note that payment will be made as soon as practicable after the effective date. Interest will be paid for the time between the effective date and the actual payment date.

Please indicate one of a, b or c in part 1 only. Please also complete part 2 if you wish to commute your pension in two stages.

1

- a) If your election is being made in the six months **before** your 55th or 60th birthday as appropriate.

I wish for my election to take effect on:

- My 55th birthday, **or**  
 My 60th birthday.

OR

- b)  The day this form is received by Pillar Administration.

(Note: Only applicable if this date is after your 55th or 60th birthday as appropriate. Please see SSS Fact Sheet 14, *Exchanging your pension for a lump sum* for more information).

OR

- c) From the following date:

DD	MM	YY
/	/	

(within 13 months of the date your right to commute arose).

2

Please complete only if you have crossed box c in section 4 of this form.

I wish the second payment to be effective from the following date:

DD	MM	YY
/	/	

(not before the first payment and within 13 months of the date your right to commute arose).

## 6 How do you want to be paid?

▼ Please cross one box only

### Directly to you

Please cross one box

- Post a cheque to my home address.  
 Pay direct into this account:

Name of Account Holder

Account number

BSB number

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Name of bank/building society/credit union

Branch

Direct crediting is not available on a full range of accounts, or for all building society and credit union accounts. To confirm whether this facility is available, please check with your financial institution.

OR

### As a rollover

to a complying superannuation arrangement.

Name of chosen rollover fund

Cheque payee (if different from fund name)

Postal address of chosen rollover fund

Suburb, Town, City	Postcode
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Note: A reversionary pensioner may only rollover a commuted pension six months after the date of the contributors/pensioners death, subject to the SSS commutation election rules.

Section 6 continued ►

## 6 How do you want to be paid? (continued)

Please provide the following details about your chosen rollover fund.

Superannuation Product Identification Number (SPIN)

Your Member Account Number in your rollover fund  
(if known)

Australian Business Number (ABN) of chosen rollover fund

*To avoid delay in the payment of your benefit, please complete all rollover details above. This information is required under Commonwealth tax provisions. It can be obtained directly from your chosen rollover fund. The ABN may also be obtained from the Australian Prudential Regulation Authority (APRA) website [www.apra.gov.au](http://www.apra.gov.au)*

## 7 Please sign here

Your signature

Date

DD	MM	YY
/	/	

## 8 Proof of Identity

If you wish to rollover or be paid all or part of your benefit, you will need to provide certified<sup>†</sup> documentation with your application form to prove your entitlement to the superannuation benefits.

The following certified documents must be provided with your application form:

### Either

One of the following certified documents:

- Drivers licence issued under State or Territory law, or
- Passport

### OR

One certified document from each of the following groups:

#### Group 1

- Birth certificate or birth extract
- Citizenship certificate issued by the Commonwealth Government
- Pension card issued by Centrelink that entitles the person to financial benefits

#### Group 2

- Letter from Centrelink regarding a Government assistance payment
- Notice issued by Commonwealth, State or Territory Government or local council within the past twelve months that contains your name and residential address ie, Tax Office Notice of Assessment or Rates Notice from local council.

#### Change of name

Make sure that proof of change of name, eg. marriage certificate, is also provided if your current name is not the same as the name on these documents.

<sup>†</sup> Certified means that all copied pages of original proof of identity documents or change of name documents have been certified as true copies by an individual approved to do so. Persons who are authorised to certify documents must sight the original and the copies and make sure both documents are identical, then make sure that all copies are certified as true copies by writing or stamping 'certified true copy' followed by the individual's signature, printed name, qualification and date.

The following persons are eligible to certify copies of original documents:

- An agent or permanent employee of Australia Post with two or more years of continuous service
- A finance company officer with two 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 Licence (AFSL) having two or more years of continuous service with one or more licensees
- A notary public officer
- A police officer
- A registrar or deputy registrar of a court
- A Justice of the Peace
- A person enrolled on the roll of a State or Territory Supreme Court or the High Court of Australia, as a legal practitioner
- An Australian consular officer or an Australian diplomatic officer
- A judge of the court
- A magistrate
- A Chief Executive Officer of a Commonwealth Court
- A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership

## Privacy notice

The information you provide in this form is collected by and held for State Super by the fund administrator, Pillar Administration, in accordance with the *Privacy and Personal Information Protection Act 1998*, under which you have rights of access and correction. Information you provide may be disclosed to lawfully authorised government agencies. For further information about privacy, contact Pillar Administration by writing to PO Box 1229, Wollongong NSW 2500 or visit [www.statesuper.nsw.gov.au](http://www.statesuper.nsw.gov.au)

## What to do next

- Call us if you have any enquiries.  
Customer Service will help you if you have any enquiries. You can telephone them between 8.30 am and 5.30 pm from Monday to Friday on 1300 130 096 for the cost of a local call (higher charges may apply if you are calling from a mobile or pay phone).
- Mail the completed form and supporting documents to:  
**State Super (SSS)**  
**PO Box 1229**  
**Wollongong NSW 2500**