

Application for Disengagement Benefit

Please print clearly in black ink.

Use this form...

If you are a member of the Police Superannuation Scheme (PSS) and:

- are aged at least 45 and less than 55,
- have at least 20 years equivalent full-time service in the Police Service and
- have accepted an offer from the Commissioner of Police to exit from the Police Service with a disengagement benefit from the PSS.

(Note: the PSS disengagement benefit is a gratuity based on the lump sum benefit you could have received on retirement at age 55, discounted for the period between your actual date of exit and age 55).

How to apply

You must fill in sections 1 to 4 of this form.

These sections tell the administrator, Mercer, what you want to do with your superannuation benefit.

Your employer must fill in section 5, the Employer's Declaration. If this is not filled in when you receive the Form, please give it to your employer to complete when you have filled in sections 1 to 4.

Notes for applicants

Options for payment of benefits

PSS benefit

The PSS benefit is your disengagement benefit.

It can be deferred, rolled over or paid directly to you.

For information about the conditions applying to the deferral option please refer to your disengagement offer documents or contact Customer Service.

SANCS benefit

As a member of PSS, you are entitled to receive a SANCS benefit. The SANCS benefit includes the basic benefit and, if eligible, the additional employer contribution (AEC) benefit and any Commonwealth Government contributions.

Because the SANCS Benefit is generally subject to compulsory preservation we normally defer this benefit in PSS until you reach your Commonwealth Preservation Age (your preservation age is shown on your Annual Statement). However, you may be entitled to have the benefit paid earlier.

Further information on the SANCS Benefit can be found in STC Fact Sheet 10: *Basic Benefit*, STC Fact Sheet 20: *SANCS Additional Employer Contributions (AEC) Account* and STC Fact Sheet 13: *Information about the Commonwealth Government's Superannuation co-contribution and the Low Income Superannuation Tax Offset*.

If you need help with this form

Contact Customer Service

Phone: 1300 130 097 (for the cost of a local call, unless calling from a mobile or pay phone)

Email: enquiries@stc.nsw.gov.au

If you need help with this form

Contact Customer Service between 8:30am and 5:30pm AEST from Mon–Fri on **1300 130 097** or email enquiries@stc.nsw.gov.au

1. Your personal details

Member number

Registered number

Mr/Mrs/Ms/Miss/Dr

Male

Female

Birth date (DD-MM-YYYY)

Given name(s)

Family name

Residential address

Suburb

State/Territory

Postcode

Postal address (if different from residential address)

Suburb

State/Territory

Postcode

Work or Home Daytime contact telephone number

Mobile number

Email address

2. What do you want to do?

PSS benefit

Defer it

Roll over the whole amount

Roll over this part of it: \$. and pay the rest directly to me.

Pay it directly to me

SANCS benefit (if applicable)

Defer it

Roll over the whole amount

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Contact Customer Service between 8:30am and 5:30pm AEST from Mon–Fri on **1300 130 097** or email **enquiries@stc.nsw.gov.au**

3. How do you want to be paid?

Direct cash payment details*

Mark one box with a cross.

How do you want us to pay you the money?

Pay direct into this account*:

Account name *(The account must be held solely or jointly in your name)*

BSB number

Account number

Mark one box with a cross.

Name of bank/building society/credit union

Branch

Postal address of bank/building society/credit union

Suburb

State/Territory

Postcode

** 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

Rollover details

Who do you want to roll over your benefit to?

Name of chosen rollover fund

Payee *(if different from fund name)*

Postal address of chosen rollover fund

Suburb

State/Territory

Postcode

Contact name at chosen rollover fund *(if known)*

Unique Superannuation Identifier (USI) *(not applicable for transfers to SMSF's)*

Australian Business Number (ABN)

Electronic Service Address (ESA)* *(only applicable for transfers to SMSF's)*

Your member account number in rollover fund

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Contact Customer Service between 8:30am and 5:30pm AEST from Mon–Fri on **1300 130 097** or email **enquiries@stc.nsw.gov.au**

3. How do you want to be paid? (continued)

If you wish to rollover into more than one fund, please copy this page and complete details for each rollover.

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 by using the ABN lookup service on the www.business.gov.au website.

*An ESA is an alias that represents the uniform resource locator (URL) or internet protocol (IP) address of a messaging provider. It ensures you meet all technical requirements for interacting electronically across the superannuation network. An email address is not an ESA.

You can obtain an ESA from an SMSF messaging provider or through your SMSF intermediary such as SMSF administrator, tax agent, accountant or some banks. Many of these options are no cost or low cost.

If you choose to rollover any part of your benefit – it must be rolled over to a complying superannuation fund.

If you choose to rollover to a self-managed superannuation fund (SMSF), payment will be made by electronic funds transfer (EFT) to the SMSF's operating bank account. You will need to provide a copy of a bank statement for the SMSF, and the bank account name will need to match the name of the SMSF. Your membership in the SMSF will also be confirmed using the ATO's SMSF verification service prior to processing any rollover.

4. Applicant: please sign here

I declare that the information I have given is correct.

I have reviewed Section 8 - Proof of Identity and Section 9 - Electronic verification, and confirm the following (please select one or more):

I am not required to provide proof of identification as I am not receiving any part of my benefit in cash and am not rolling over any part of my benefit to a self-managed superannuation fund (SMSF)

I have provided certified proof of identity documents

If my proof of identity documents are not certified correctly, I consent to State Super or Mercer Administration Services (the fund administrator) verifying my identification electronically.

I have provided electronic verification information in Section 9. I consent to State Super or Mercer Administration Services (the fund administrator) verifying my identification electronically.

Note - if you provide authorisation to have your identity verified electronically but the documents are not compatible, you will need to provide certified copies of the required documents. We will contact you if this is the case.

Name (Print in BLOCK LETTERS)

Signature

Date (DD-MM-YYYY)

If you need help with this form

Contact Customer Service between 8:30am and 5:30pm AEST from Mon–Fri on **1300 130 097** or email enquiries@stc.nsw.gov.au

5. 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 8:30am and 5:30pm from Monday to Friday on 1300 130 097 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 (PSS)
GPO Box 2181
Melbourne VIC 3001

6. Employer's declaration

Employee's member number

Mr/Mrs/Ms/Miss/Dr

Male

Female

Birth date (DD-MM-YYYY)

Employee's given name/s

Employee's family name

Date of exit (DD-MM-YYYY)

Attributed full-time salary

Full-time

Part-time

\$

The member has accepted an offer from the Commissioner of Police to exit from the Police Service and receive a disengagement benefit from the PSS.

I declare that the information I have given is correct.

Name (Print in BLOCK LETTERS)

Signature

Date (DD-MM-YYYY)

7. What to do next

Has the member completed sections 1 to 4 of the Form?

If **no**, give this Form to the member to complete sections 1 to 4.

If **yes** (unless the member asked you to return this Form to them), send this Form to:

State Super (PSS)
GPO Box 2181
Melbourne VIC 3001

If you need help with this form

Contact Customer Service between 8:30am and 5:30pm AEST from Mon–Fri on **1300 130 097** or email **enquiries@stc.nsw.gov.au**

Your privacy

The information you provide in this Form is collected on behalf of and held for State Super by the scheme administrator, Mercer Administration Services (Australia) Pty Ltd, in accordance with STC's Privacy Statement, the *Privacy and Personal Information Protection Act 1998 (NSW)* and the *Health Records and Information Privacy Act 2002 (NSW)*, under which you have rights of access and correction. Information you provide may be disclosed to lawfully authorised government agencies and third parties.

For further information about privacy, contact Mercer by writing to:

GPO Box 2181
Melbourne VIC 3001

or visit

www.statesuper.nsw.gov.au

ABN 29 239 066 746
SPIN SAS0101AU

8. Proof of identity

You must provide proof of identity, unless you are deferring all of your benefit, or rolling over all of your benefit to a complying superannuation fund that is not a self-managed superannuation fund (SMSF).

If you wish to rollover your benefit to a SMSF or be paid all or part of your benefit, you will need to provide certified[†] documentation or electronic verification information with your application form to prove that you are the person to whom the superannuation entitlements belong.

The following certified documents can be accepted:

Either

One of the following certified documents:

- Current Australian State or Territory drivers licence containing a photograph of the person, or
- Australian Passport, or
- Current card issued under a State or Territory law for the purpose of providing a person's age containing a photograph of the person, or
- Current foreign passport or similar travel document containing a photograph and the signature of the person*

OR

One certified document from each of the following groups:

Group 1

- An Australian birth certificate or birth extract issued by a State or Territory
- Citizenship certificate issued by the Commonwealth
- Current pension card issued by Centrelink that entitles the person to financial benefits

Group 2

- Notice issued by the Commonwealth or a State or Territory government within the preceding 12 months that records the provision of financial benefits to you, i.e., a letter from Centrelink.
- Notice issued by the Australian Taxation Office within the past twelve months that contains your name and residential address and records an amount payable to or by you, i.e., your last tax assessment.

- Notice issued by a local government body or utilities provider within the past three months that shows your name, residential address and the provision of services to you, i.e. water, gas or electricity bill, rates notice.

* Documents not written in English must be accompanied by an English translation prepared by an accredited translator.

Change of name

Make sure that proof of change of name is also provided if your current name is not the same as the name on these documents, e.g. Change of name certificate, or deed poll document.

If your name has changed on marriage, a marriage certificate issued by the Registry of Births, Deaths and Marriages is required; ceremonial marriage certificates are not acceptable.

[†] 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.

If you are in Australia

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

- Australia Post Permanent Employee or Agent (who is currently employed with the post office and has at least two continuous years of service or is in charge of supplying postal services to the public)
- Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955)
- Bailiff
- Bank Officer, Building Society Officer or Credit Union Officer (with two or more years of continuous service)
- Chiropractor

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8. Proof of identity *continued*

- Commissioner for Affidavits or Declarations
- Court Officer: Registrar or Deputy Registrar of a Court, Judge, Clerk, Magistrate, Master of a Court, Chief Executive Officer of a Commonwealth Court
- Dentist
- Fellow of the National Tax Accountants' Association
- Finance Company Officer (with two or more years of continuous service with one or more finance companies)
- Justice of the Peace
- Legal practitioner
- Marriage celebrant (registered under Subdivision C of Division 1 of Part IV of the Marriage Act 1961)
- Medical practitioner
- Member of Chartered Secretaries Australia
- Member of Commonwealth Parliament, State Parliament, Territory Legislature or a Local Government Authority (State or Territory)
- Member of Engineers Australia (other than at the grade of student)
- Member of the Association of Taxation and Management Accountants
- Member of the Australasian Institute of Mining and Metallurgy
- Member of the Australian Defence Force (who is an officer; or a non-commissioned officer within the meaning of the Defence Force Discipline Act 1982 with two or more years of continuous service or a warrant officer within the meaning of that Act)
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- Minister of Religion (registered under Subdivision A of Division 1 of Part IV of the Marriage Act 1961)
- Notary Public
- Nurse
- Optometrist
- Officer with, or a credit representative of, a holder of an Australian credit licence, having two or more years of continuous service with one or more licensees
- Officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more years of continuous service with one or more licensees
- Patent attorney
- Permanent employee of the Commonwealth (or Commonwealth Authority) or a State or Territory (or State or Territory Authority) or a Local Government Authority with two or more years of continuous service
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Pharmacist
- Physiotherapist
- Police Officer, Sheriff's Officer or Sheriff
- Psychologist
- Senior Executive Service Employee of the Commonwealth (or Commonwealth Authority) or a State or Territory (or State or Territory Authority)
- Teacher employed on a full-time basis at a school or tertiary education institution
- Trade marks attorney
- Veterinary surgeon

If you are outside Australia

The following people are eligible to certify copies of original documents outside of Australia:

- consular staff at an Australian Embassy, High Commission or Consulate
- a public notary or other person authorised to administer an oath or affirmation or to authenticate documents in the country you are visiting or living in.

The professions listed under **If you are in Australia** can only certify documents outside Australia if they work or are registered in Australia. Where your documents are certified outside Australia, the certifier must quote their registration number or the relevant law that qualifies them to authenticate your documents.

If you need help with this form

Contact Customer Service between 8:30am and 5:30pm AEST from Mon–Fri on **1300 130 097** or email **enquiries@stc.nsw.gov.au**

9. Electronic verification

Please complete this section if you would prefer to allow us to verify your identity information electronically, instead of providing certified proof of identity documents.

We use a platform called 'greenID' to complete this verification. GreenID assists entities in meeting their Anti-Money Laundering and Counter-Terrorism Funding obligations by providing a secure and complete identity verification system.

You must provide complete details for any TWO of the following (note, only Australian documents can be verified electronically)

1. Medicare Card

Full name exactly as shown on my Medicare Card

Medicare number

Reference number

Valid to (MM/YYYY)

Medicare card colour

 Green Blue Yellow

2. Drivers Licence

Full name exactly as shown on my Drivers Licence

Licence number

Driver licence card number

State of issue

Expiry (DD-MM-YYYY)

3. Australian Passport

Passport Number

Place of birth (as shown on passport)

Country of birth (not shown on passport)

Expiry date (DD-MM-YYYY)

Notes: If your name differs between documents and/or your account details, you will need to provide a certified linking document (eg: Marriage Certificate from the Registry of Births, Deaths & Marriages).

If you complete the details for electronic identity identification, we will take this as consent to validate your details electronically.

If you provide authorisation to have your identity verified electronically but the documents are not compatible, you will need to provide certified copies of the required documents and post these to us. We will contact you if this is the case.

If you need help with this form

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