

# Transfer Authority

Before completing the Transfer Authority, please read the important information below.

This form allows you to transfer your other super directly into the Fund. Complete this form and provide certified identification documents.

## Benefits to consolidating your super

**Avoid duplicate costs:** by moving all of your super to one account, you may save on fees.

**Keep better track of your super:** with one account to manage, you can more easily see how your super is performing.

**Hassle free transfer:** transferring money to your account is easy – we do all the work for you.

## Transfer instructions

When you transfer your super, your entitlements (eg insurance cover) under your previous fund may cease. Check all relevant information before you decide to transfer your super.

**When you transfer, the Transfer Authority CANNOT be used to:**

- transfer benefits if you don't know where your super is
- transfer benefits from multiple funds on this one form – a separate form must be completed for each fund you wish to transfer super from
- change the fund to which your employer pays contributions on your behalf
- open a super account
- transfer benefits under certain conditions or circumstances (for example, if there is a super agreement under the *Family Law Act 1975* in place).

## Proof of identity

You need to provide a certified copy of a document(s) with this transfer request that clearly shows your full name, your signature, date of birth and residential address.

To meet these requirements you must provide either a certified copy of A or B as below:

<b>EITHER</b>	<b>A</b>
	<p><b>ONE of the following documents only:</b></p> <ul style="list-style-type: none"> <li>• current driver's licence issued under State or Territory law</li> <li>• passport</li> </ul>
<b>OR</b>	<b>B</b>
	<p><b>ONE of the following documents:</b></p> <ul style="list-style-type: none"> <li>• birth certificate or birth extract</li> <li>• citizenship certificate issued by the Commonwealth</li> <li>• pension card issued by Centrelink that entitles the person to financial benefits</li> </ul> <p><b>AND</b></p> <p><b>ONE of the following documents:</b></p> <ul style="list-style-type: none"> <li>• letter from Centrelink regarding a government assistance payment</li> <li>• notice issued by Commonwealth, State or Territory government or local council within the past 12 months that contains your name and residential address (eg Tax Office Notice of Assessment or rates notice from local council).</li> </ul>

## Providing certified identification

A correctly certified document is one that is certified as being a true copy of the original document, signed by a person who has seen the original and is authorised to certify a copy of the document.

### List of approved people who can certify your identity

The following people can certify copies of the originals as **true and correct** copies:

- a permanent employee of Australia Post with five or more years of continuous service
- a finance company officer with five 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 five or more years 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 a court
- a magistrate
- a Chief Executive Officer of a Commonwealth court.

## Providing certified identification continued

The person who is authorised to certify documents must:

- sight the original and the copy and make sure both documents are identical
- certify all pages as true copies by **writing or stamping**:
  - ‘certified true copy’
  - signature
  - printed name
  - qualification (eg Justice of the Peace, Australia Post employee, etc)
  - date
  - place of employment or identifying no. (eg JP-XXXX).

Example from member, John Sample:



✓ Member, John Sample has provided a photocopy of his identification that includes **signature, full name, date of birth and residential address.**

✓ A person who is authorised to certify documents has sighted the original identification and confirmed that the copy is a true copy.

✓ Includes **signature, printed name, qualification, place of employment or identifying no. and date.**

## Additional information

### Change of name or signing on behalf of applicant

If you have changed your name or are signing on behalf of the applicant, you will need to provide a certified linking document. A linking document is a document that proves a relationship exists between two (or more) names.

The following table contains information about suitable linking documents.

Purpose	Suitable linking documents
Change of name	Marriage certificate, deed poll or change of name certificate from a Births, Deaths and Marriages Registration Office
Signed on behalf of the applicant	Guardianship papers or Power of Attorney

### What happens to your future employer contributions?

Using this form to transfer your benefits will not change the fund to which your employer pays your contributions. Using this form may close the account from which you are transferring your benefits.

If you wish to change the fund to which your contributions are being paid, you will need to speak to your employer about Choice of Fund. Visit [www.superchoice.gov.au](http://www.superchoice.gov.au) or call the Australian Taxation Office on 13 10 20 for the appropriate forms and information about whether you are eligible to choose the fund to which your employer contributions are made.

### What happens if you do not quote your tax file number?

You are not obligated to provide your tax file number (TFN) to your super fund. However, if you do not provide your TFN, your fund may be taxed at the highest marginal tax rate plus the Medicare levy on contributions made to your account in the year, compared to the concessional tax rate of 15%. Your fund may deduct this additional tax from your account.

If your super fund does not have your TFN, you will not be able to make personal contributions to your super account. Choosing to quote your TFN will also make it easier to keep track of your super in the future.

Under the *Superannuation Industry (Supervision) Act 1993*, your super 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 TFN may be disclosed to another super provider when your benefits are being transferred, unless you request in writing that your TFN not be disclosed to any other trustee.

### Lost track of your other super?

Not sure if you have other super? Many people forget to roll their accounts over when they change jobs. The Australian Tax Office's free Superseeker service can help you uncover lost accounts (you'll need to supply your name, date of birth and tax file number).

- **Online:** visit the Superseeker homepage at [www.ato.gov.au/superseeker](http://www.ato.gov.au/superseeker)
- **By phone:** call 13 28 65.
- **By paper:** download the 'Searching for lost super' form from the Superseeker homepage.

Please complete these instructions in **BLACK INK** using **CAPITAL LETTERS** (except for your email address) and ✓ boxes where provided.  
 \* Indicates a mandatory field or section. If you do not complete all of the mandatory fields or sections, there may be a delay in processing your request.

## 1 Member details

Member number (if existing member)	E R F																				
Title				*Surname																	
*Given name(s)																					
<b>Current residential address</b>																					
*Unit No				*Street No																	
*Street name																					
*Suburb														*State			*Postcode				
<b>Postal address</b> (if different to above)																					
*Unit No				*Street No																	
*Street name/PO Box																					
*Suburb														*State			*Postcode				
<b>Previous address</b> (if the address held by your previous fund is different to the above)																					
Unit No				Street No																	
Street name/PO Box																					
Suburb														State			Postcode				
*Contact phone number									Mobile												
*Email address																					
*Date of birth			/			/					Gender	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>						
Tax File Number <sup>1</sup>																					

<sup>1</sup> Under the *Superannuation Industry (Supervision) Act 1993*, you are not obliged to disclose your Tax File Number (TFN), but if you do not, there may be tax consequences. Refer to 'What happens if you do not quote your tax file number?' on the previous page of this form for more information. Please read the information on collection of TFNs in the Product Disclosure Statement before providing your TFN.

## 2 Fund details

<b>FROM</b>																			
*Fund name																			
Fund administrator																			
*Address																			
*Suburb														*State			*Postcode		
Phone							*Member/account number												
*ABN																			
Unique Superannuation Identifier (USI)																			
Previous name (if different to name in section 1)																			
Title				Surname															
Given name(s)																			

## 2 Fund details continued

**TO**

Fund name

Phone  Member/account number

ABN

Unique Superannuation Identifier (USI)

## \*3 Proof of identity

Refer to the 'Proof of identity' instructions for more information. I have attached a certified copy of:

**EITHER**

- A ONE of the following documents only:**
- current driver's licence issued under State or Territory law
  - passport

**OR**

- B ONE of the following documents:**
- birth certificate or birth extract
  - citizenship certificate issued by the Commonwealth
  - pension card issued by Centrelink that entitles the person to financial benefits

**AND**

- ONE of the following documents:**
- letter from Centrelink regarding a government assistance payment
  - notice issued by Commonwealth, State or Territory government or local council within the past 12 months that contains your name and residential address (eg Tax Office Notice of Assessment or rates notice from local council).

## 4 Member declaration

By signing this Transfer Authority I am making the following statements:

- I declare I have fully read this form and the information completed is true and correct
- I am aware I may ask my super provider for information about any fees or charges that may apply or any other information about the effect this transfer may have on my benefits, and do not require any further information
- I discharge the super provider of my previous fund of all further liability with respect to the benefits paid and transferred.

I request and consent to the transfer of super, as described above, and authorise the super provider of each fund to give effect to this transfer.

\*Member signature

\*Date  /  /

## 5 Checklist

Once you have completed the form, please review the checklist below:

- Have you considered where your future employer contributions will be paid?
- Have you completed all of the mandatory fields on the form?
- Have you signed and dated the form?
- Have you attached the certified documentation including any linking documents, if applicable?

**Please sign and return this form to:**

**Post:** SMF Eligible Rollover Fund, GPO Box 529, Hobart Tas 7001  
**Email:** email@ioof.com.au  
**Facsimile:** 03 6215 5933  
**Client services team:** 1800 677 306  
**Website:** www.ioof.com.au  
**Trustee:** IOOF Investment Management Limited, ABN 53 006 695 021, AFS Licence No. 230524

**IMPORTANT**

**Do not fax or email this Transfer Authority or your certified documents. All certified documents must be posted so we can view an original signature.**