



AFSL: 238395
ABN: 50 925 523 120
Board ABN: 72 406 779 248

Election for Preservation of DFRDB Rights and Superannuation Productivity Benefit (including application for MSB Scheme Ancillary Benefit)

Before you use this form

Before completing this benefit application form, it is recommended that you read the Product Disclosure Statement (PDS) for the Military Superannuation and Benefits Scheme (MilitarySuper) or the DFRDB Book for the Defence Force Retirement and Death Benefits (DFRDB) Scheme. These documents provide further information about the main features of the schemes and are available on the websites www.militarysuper.gov.au or www.dfrdb.gov.au or by phoning **1300 006 727**

Who should use this form?

Use this form if you are a member of the Defence Force Retirement and Death Benefits Scheme (DFRDB) and you are not entitled to retirement or invalidity pay and wish to preserve your superannuation rights.

When to use this form

To make a valid election, you must NOT sign the Form D6o earlier than 30 days before your discharge from the Australian Defence Force (ADF) and NOT later than 21 days after your discharge AND, except in special circumstances, the form must be received by the DFRDB Authority no later than 21 days after your discharge.

The election you make will have no effect unless you also inform the DFRDB in writing that you are in Public Employment on the ninetieth (90th) day after you were discharged and that you are a member of a superannuation or retirement benefits scheme in relation to that employment. To do this you will need to complete Form D61.

Form D61 must be signed by you and received by the DFRDB within 21 days AFTER the ninetieth (90th) day following your discharge from the ADF. On receipt of your Form D6o the DFRDB will advise you of the relevant dates.

Completing this form

Complete:

- Part A: About yourself
- Part B: Election
- Part C: Exit details
- Part D: Superannuation Productivity
- Part E: Military Superannuation and Benefits (MSB) Scheme Ancillary Benefit
- Part F: ID requirements
- Part G: Tax File Number
- Part H: Member declaration

Then lodge with the DFRDB Authority at the address in Part I.

Options

This form asks you about the options you choose for your:

1. ELECTION FOR PRESERVATION OF RIGHTS

You can only make an election to preserve your benefits if you are not entitled to receive Retirement Pay or Invalidity Pay at the time you leave the ADF. In addition, your election will only be valid if you have taken up recognised full-time public/Government employment within 90 days of leaving the ADF.

Continuity of your accumulated superannuation rights will be maintained when you move from one recognised public/Government employment to another, provided the gap between each employment is less than 90 days.

2. SUPERANNUATION PRODUCTIVITY

The DFRDB Authority will pay your Superannuation Productivity benefit to your nominated rollover fund.

3. MSB SCHEME ANCILLARY BENEFIT

You may also have an Ancillary Benefit in the MSB Scheme, if any of the following Ancillary Benefit amounts have been paid into your MilitarySuper account:

1. Additional Personal Contributions
2. Co-Contributions
3. Salary Sacrifice amounts
4. Spouse Contributions (please note that spouse contributions are those paid by your partner into your MilitarySuper account)
5. Transfer Amounts
6. Super Guarantee amounts

You may roll over your MSB Scheme Ancillary Benefit at any time. The Ancillary Benefit may be cashed out once you have reached your superannuation preservation age (see table below) and:

- if you are less than 60 – you have permanently retired from the workforce; or
- if you are aged 60 or more – you have permanently retired from the workforce or your current employment has ended.

Date of Birth	Preservation Age
Before 1/7/1960	55
1/7/1960 – 30/6/1961	56
1/7/1961 - 30/6/1962	57
1/7/1962 – 30/6/1963	58
1/7/1963 – 30/6/1964	59
After 30/6/1964	60

You can roll over your Ancillary Benefit to:

- a regulated superannuation fund
- a retirement savings account (RSA)
- an approved deposit fund.

Rollover fund nominationst

If you are choosing to rollover part of your benefit, it must be paid to a complying superannuation fund, rollover fund, Retirement Savings Account (RSA). We will not deduct tax from any amount rolled over to another fund however, the receiving fund will deduct 15% tax from any untaxed component of the rollover.

You can nominate two rollover funds or RSA's to receive all or part of your lump sum benefit. Complete one nomination if you are going to roll over your entire benefit to one fund. If you are going to split the amount, complete both nominations with details of the second fund.

We will make all rollover cheques payable to your nominated rollover fund(s) send them directly to your nominated fund(s). Please make sure you have the correct postal address of your fund(s).

When completing this section you must include the name and Australian Business Number (ABN) for the nominated rollover fund or RSA. Providing the Superannuation fund number (SFN) is optional. If you have a membership number for the rollover fund or RSA, please include this number. If you do not have a membership number, please list a Superannuation Product Identification Number (SPIN). You can get these details from the rollover fund or RSA. If you don't include these details, it will result in payment delays of your benefit. Please ensure your nominated rollover account(s) is active and can receive deposits from other superannuation funds. Failure to do so will result in the payment being returned to our office

Surcharge debt

If you have a superannuation contributions surcharge debt, it will be deducted from your benefit before payment. Interest will also be applied to the surcharge debt until the debt is fully paid

In deducting the debt from your benefit, default provisions apply if you do not make an election. The default provisions are:

- if the Employer Benefit is converted to pension in part or full, any surcharge debt will be taken from the Employer Benefit after conversion to pension
- if the Employer Benefit is taken as a total lump sum, the debt will be taken from that benefit.

If you choose to make an election, the default provisions will not apply. You may elect for the surcharge debt to be deducted from:

- the Employer Benefit before it is paid as a lump sum or converted to a pension
- the Member Benefit before it is paid as a lump sum
- any Ancillary Benefit before it is paid as a rollover.

Payment

Lump sum payments and rollover cheques are normally paid within 15 working days after your discharge is confirmed or the date we receive your application, whichever is the later.

Tax File Number

In accordance with the *Taxation Laws Amendment (Tax File Numbers) Act 1988*, the DFRDB Authority and the MSB Board are required to deduct PAYG tax at the highest Marginal Tax Rate plus Medicare levy from benefits if a person does not provide a Tax File Number (TFN).

If you have not been issued a TFN you should lodge an Australian Taxation Office (ATO) Application/Enquiry form with the ATO. Forms are available at all Taxation Offices. You must provide proof of identity at the time you lodge the form.

Further information

If you wish, you can seek further information from the DFRDB on **1300 001 677** on your options and completion of this form.

You can also read:

- The DFRDB Book
- About to Leave the ADF? leaflet
- Superannuation Contributions Surcharge leaflet
- Taxation of Benefits leaflet.

All these publications are available on the DFRDB website at www.dfrdb.gov.au

A Financial Advisor may also be able to assist.

Re-entry to the Defence Force

If you **re-enter** the Defence Force within 90 days contact ComSuper on **1300 001 677** as there is **action you may take to protect your superannuation rights**.

Privacy

The DFRDB Authority, the MSB Board and their administrator, ComSuper, are collecting the information on this form for the following reasons:

- to confirm your identity
- to assess your eligibility for payment/rollover of the benefit
- to record up to date details relating to your spouse (if applicable) for future benefit eligibility
- to pay your benefit or to roll it over
- to contact you.

The DFRDB Authority, the MSB Board and ComSuper are committed to protecting any personal information we hold about you. Your information will not be used for any other purpose or disclosed to another party unless:

- you authorise us to do so
- the disclosure is authorised by law. This may include disclosing your personal information to other Government agencies that have specific legislative authority to collect this information (for example the Australian Taxation Office, Centrelink or the Department of Veterans' Affairs). We will not disclose your personal information to these agencies unless it is lawful to do so
- it is to Orima Research who may, on our behalf, invite you to participate in a survey about our service (they are required to protect this information from disclosure to another party). If you do not want your contact details passed to Orima Research, please put a cross in the box at Question 24A on page 8 of the benefit application form.

Contact

We must provide you with any information you need to understand your benefit entitlements.

If you have any further questions about your benefit entitlements or investment options you can contact us in the following ways:

Visit Unit 4 Cameron Offices Chandler Street Belconnen ACT 2617	Mail PO Box 22 Belconnen ACT 2616	Email members@dfrdb.gov.au members@enq.militarysuper.gov.au
Phone <i>for the cost of a local call</i> DFRDB: 1300 001 677 MSBS: 1300 006 727	Fax (02) 6272 9616	Internet www.dfrdb.gov.au www.militarysuper.gov.au

Disclaimer

IT IS IMPORTANT YOU KNOW - THIS DOCUMENT CONTAINS GENERAL ADVICE OR INFORMATION ONLY

Any financial product advice in this document is general advice only and has been prepared without taking account of your personal objectives, financial situation or needs. Therefore, before acting on any such general advice, you should consider the appropriateness of the advice, having regard to your own objectives, financial situation or needs. You may wish to do so with or without the assistance of a licensed financial advisor.



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PART A *About yourself*

1. Service: Navy Army RAAF

2. Service Number/Employee ID

3. Service Number from a previous period of service (if applicable)

4. Title

Surname

Given names

5. Former surname (if applicable)

6. Date of birth
day month year

7. Phone number before retirement ()

8. Email address before retirement

9. Postal address after retirement

Postcode

Residential address after retirement

Postcode

PART D
Superannuation
Productivity

17. You may roll over to a maximum of two rollover funds.

Cheques will be made payable to the nominated rollover fund(s) and forwarded to the address provided below. A copy of the Rollover Benefits Statement will also be included with your benefit payment letter and sent to your nominated address.

Write the amount for each institution, except write 'BALANCE' for the last (or only) fund.

IMPORTANT: Please ensure your nominated rollover account(s) is active and able to receive deposits from other superannuation funds. Failure to do so will result in the payment being returned to our office.

FIRST FUND

Name of fund _____

Fund Identification No. _____

Australian Business No. (ABN)
of rollover fund **OR** _____

Superannuation Fund No. (SFN) _____

Rollover Identification No. _____

Superannuation Product
Identification No. (SPIN) **OR** _____

Membership No.
for fund _____

Amount \$ _____

SECOND FUND

Name of fund _____

Fund Identification No. _____

Australian Business No. (ABN)
of rollover fund **OR** _____

Superannuation Fund No. (SFN) _____

Rollover Identification No. _____

Superannuation Product
Identification No. (SPIN) **OR** _____

Membership No.
for fund _____

Amount \$ _____

PART E
MSB Scheme
Ancillary Benefit
options

18. Choose your options for your MSB Scheme Ancillary Benefit.

- Claim now - Please go to Question 19
 Do not claim now - Please go to Part F
 Not applicable (You do not have an Ancillary Benefit) - Please go to Part F

Note: You are not entitled to a cash payment of your Ancillary Benefit before preservation age and satisfying a Condition of Release. Until that occurs, if you claim your Ancillary Benefit, it must be rolled over.

19. Which types of Ancillary Benefit are you claiming?

(Please tick one or more boxes)

All Types OR	<input type="checkbox"/>	100% only
i) Additional Personal Contributions	<input type="checkbox"/>	100% only
ii) Salary Sacrifice	<input type="checkbox"/>	100% only
iii) Transfer Amounts	<input type="checkbox"/>	100% only
iv) Spouse Contributions	<input type="checkbox"/>	100% only
v) Co-Contributions	<input type="checkbox"/>	100% only
vi) Super Guarantee	<input type="checkbox"/>	100% only

Note: You must claim 100% of each type of Ancillary Benefit you are claiming.

20. Do you want your Ancillary Benefit paid to the same rollover fund (one only) where your Superannuation Productivity is being paid under Question 17 above?

- Yes - Please go to Part F
 No - Please complete Question 21 below

21. If you are rolling over any of your Ancillary Benefit, please give details of the fund/s you want your Ancillary Benefit paid to. This form allows you to provide details for up to two rollover funds.

Write the Ancillary Benefit type/s for each fund (see example below). If you want all of your Ancillary Benefit paid to one rollover fund, write 'ALL' beside the 'Ancillary Benefit type' below. Please use block letters.

Cheques will be made payable to the rollover funds. The cheques and Rollover Benefit Statements will be sent to you to send to the rollover funds when you lodge your rollover documents.

FIRST FUND

Name of fund _____

Fund Identification No. _____

Australian Business No. (ABN)
of rollover fund **OR** _____

Superannuation Fund No. (SFN) _____

PART E
(continued)

Rollover Identification No. _____

Superannuation Product
Identification No. (SPIN) **OR** _____

Membership No.
for fund _____

Ancillary Benefit type 1) _____

2) _____

3) _____

4) _____

SECOND FUND

Name of fund _____

Fund Identification No. _____

Australian Business No. (ABN)
of rollover fund **OR** _____

Superannuation Fund No. (SFN) _____

Rollover Identification No. _____

Superannuation Product
Identification No. (SPIN) **OR** _____

Membership No.
for fund _____

Ancillary Benefit type 1) _____

2) _____

3) _____

4) _____

Example:

First Fund: (1) Salary Sacrifice
(2) Co-Contributions

Second Fund: (1) Additional Personal Contributions
(2) Transfer Amounts

PART F

Identification requirements

22. To protect against fraud, safeguard your benefit and comply with the Government's recently introduced Anti-Money Laundering and Counter Terrorism Financing Legislation, we need you to provide documentation to prove your identity. Please be aware that under some circumstances we may request further information from you. If you are unable to provide documentation of the type set out below you should speak to an information officer on **1300 006 727**.

All documents provided to confirm your identity must be certified.

You will need to provide certified copies of

- one document from column A in the table below, OR
- one document from column B AND one document from column C

For example, you could provide a certified copy of your driver's licence (from column A) OR a certified copy of your birth certificate AND a certified copy of your tax return with your current residential address.

A	B	C
Driver's licence or permit issued by State or Territory or foreign government	Birth Certificate or Birth Extract, issued by an Australian or foreign Government (either in English or accompanied by English translation prepared by an accredited translator)	Copy of a rates bill with the same address and name as on the application
Passport (current or expired by less than two years)	Australian Citizenship certificate	Copy of an electricity or gas bill with the same address and name as on the application
An identification or proof of age card issued by a State or Territory, containing a photograph	Citizenship certificate issued by a foreign country (either in English or accompanied by an English translation prepared by an accredited translator)	Copy of a tax return letter from the ATO with the same address and name as on the application
A national identity card, containing a photograph, issued by a foreign government (either in English or accompanied by an English translation prepared by an accredited translator)	Pension or other social security/DVA benefit card	A letter from Centrelink or DVA with the same address and name as on the application
	ADF Discharge papers or ADF ID card	

PART F **(continued)**

All copies of documents provided to MilitarySuper must be certified as true and correct copies of the original by one of the following:

- a legal practitioner enrolled on the roll of a supreme court or the high court of Australia
- a judge or magistrate of a court
- a chief executive officer of a Commonwealth court
- a registrar or deputy registrar of a court
- a Justice of the Peace (JP)
- a notary public
- a police officer
- an agent or permanent employee of the Australian Postal Corporation in an office supplying postal services to the public
- an Australian consular officer or an Australian diplomatic officer
- a finance company officer with two or more years of continuous service with one or more Finance Companies
- a person employed by or an authorised representative of the holder of a financial services licence with two or more continuous years of service
- a member of the Institute of Chartered Accountants (ICA), Certified Practising Accountants (CPA Australia) or National Institute of Chartered Accountants (NIA) with two or more years of continuous membership

The person certifying your documentation must confirm in writing that you are the valid holder of the ID that you are presenting and that any copies are true copies of the original.

The certification must include the name, address, occupation, telephone number and registration number (if applicable) of the certifying authority.

If you are providing copies of bills or statements, you should black out any personal financial information or details of transactions in order to protect your privacy. Copies of identification provided will be stored electronically in a secure environment. The paper copies will be securely destroyed. All copies will only be used for the purpose of confirming your identity.

List the documents you have attached to prove your identity

PART G **Tax File Number**

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

It is not an offence not to quote your TFN. However, giving us your TFN will have the following advantages (which may not otherwise apply):

- We will be able to accept all types of contributions (subject to scheme rules);
- The tax on contributions to your superannuation account/s will not increase;
- Other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits; and
- It will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

If you have already provided your TFN to ComSuper, you are under no obligation to provide it again in this application.

Your Tax File Number

Your Tax File Number remains confidential

23A. Can the DFRDB Authority and/or the MSB Board give your TFN to the Rollover Fund(s)/RSA(s) nominated above?

- Yes
 No
 Not applicable

PART H **Declaration**

24. I declare that:

- I have been advised to read the Product Disclosure Statement (PDS) [DFRDB Book] for the Military Superannuation and Benefits Scheme (MilitarySuper) [Defence Force Retirement and Death Benefits (DFRDB) Scheme] before completing this application form
- I understand the options available for my benefit entitlement;
- the information I have supplied is complete and correct;

I also declare in relation to my Tax File Number (TFN) that:

- I have read and understood the information set out in Part G – I understand that supplying my TFN is optional and that if I have not provided my TFN, tax will be deducted at the top Marginal Rate of Tax;
- the TFN I have provided is the same number advised to me by the Australian Tax Office
- the Tax File Number will be provided to a rollover fund unless I advise the MSB Board or its administrator, ComSuper, not to.

I understand that if I have not provided all the required information, this application may be returned to me for completion and payment may be delayed.

Your signature _____

Date

_____|_____|_____|_____|_____|_____|
 day month year

24A. I do not want my contact details passed to Orima Research for the purpose of participating in research on the service provided by ComSuper.

PART I **Lodgement**

25. Send your completed application and attachments to:

DFRDB
 PO Box 22
 BELCONNEN ACT 2616