

# Early release of benefits



# Important information

We will only process original versions of this form.

Use this form if you are applying for access to your superannuation benefits on financial hardship or medically related grounds.

#### Things you should consider before withdrawing your benefit

Before deciding to withdraw your benefit, we recommend that you carefully consider your current benefits and the effect that any cashing of your benefit may have upon these. Depending on your circumstances, cashing in your benefit may have tax implications. Before making a decision to withdraw your benefit, we recommend you speak to a financial adviser. You should seek advice from your taxation adviser in relation to taxation matters.

1. Personal details	2. Grounds for early release of benefits
(All fields must be completed)  Policy number  Title Date of birth  Given name(s)	<ul> <li>□ Permanent incapacity         You can access your benefits under this condition if two medical practitioners, one of whom is a specialist, certify jointly or separately that due to medical reasons, you are unlikely ever to work again in a job for which you are reasonably qualified by education, training or experience.     </li> <li>□ Severe financial hardship (please go to section 3 Residency details instruction)</li> </ul>
Surname  Residential address	Under preservation age and 39 weeks – You can access your benefits under this condition if you have been receiving Commonwealth Government income support payments for at least 26 weeks continuously at the time of application and you can satisfy us that you are unable to meet reasonable and immediate living expenses. You can receive a maximum of \$10,000 (gross) per 12 month period.
Suburb State Postcode  Country  Postal address	Over preservation age plus 39 weeks — You can access your benefits under this condition if you have been receiving Commonwealth Government income support payments for a cumulative period of at least 39 weeks after having reached your preservation age and are not gainfully employed on a full or part-time basis (more than 10 hours per week) when you apply. You can receive up to your full account balance.
Suburb State Postcode  Country	Terminal illness  You can access your benefits under this condition if two medical practitioners, one of whom is a specialist, certify jointly or separately that you suffer from an illness, or have incurred an injury, that is likely to result in your death within 24 months of the date of certification.
Mobile number Alternate phone number  Email address	Please note: Each of the above conditions will require you to provide us with further information to determine your eligibility. If you do not already have the necessary forms or know what you need to provide, simply call us on the number shown at the beginning of this form for further information.

## 4. Payment details (continued) 3. Residency details instructions If you have at any stage been a temporary resident, you may ☐ Full withdrawal only withdraw your preserved super benefits under limited ☐ Partial withdrawal of conditions of release. Please call our customer contact centre Only complete the below if you have requested a on the number shown at the beginning of this form for more partial withdrawal. information on these conditions of release. ☐ The amount specified above is to be gross of tax a. I am an Australian or New Zealand citizen, a permanent (before tax is deducted) resident of Australia or a holder of a retirement visa sub-class 405 (Investor Retirement) or 410 (Retirement): ☐ The amount specified above is to be net of tax (after tax is deducted) ☐ No ☐ Yes b. I am or was a temporary resident of Australia Please note: If you do not nominate whether the ☐ No ☐ Yes payment is to be gross or net or if the payment is a permanent incapacity benefit, we will process your 4. Payment details payment amount from your account gross of tax. (Please complete all details of your nominated Australian bank, building society or credit union account.) Account name BSB number Account number 5. Nomination of investment options for partial withdrawals If you wish to only receive a partial withdrawal amount from your policy, please see below for further information on how to complete this section. Nominating a percentage (%) amount: Please nominate the percentage amount you would like to withdraw from each investment option(s). If you would like to withdraw your total holding in an investment option, please write 100% or "ALL". If you nominate a percentage amount of less than 100%, we will only withdraw that percentage of the investment option, e.g. if you have \$20,000 in the investment option and specify 50%, we will withdraw \$10,000 from that investment option. Nominating a dollar (\$) amount: Please nominate the exact dollar amount you would like to withdraw from each investment option(s). Please ensure the amounts specified for each investment option(s) equals the total amount requested at section 4. Investment option Withdrawal amount - percentage (%) or dollar (\$) High Growth 2 Growth 2 Balanced 2 Conservative 2 Savings Total \$ / % Where not otherwise indicated, the withdrawal amount will be apportioned across your investment options. 6. Tax File Number (TFN) requirements Please complete this section if you have not previously quoted your TFN to the Trustee. Under the Superannuation Industry (Supervision) Act 1993, your superannuation fund is authorised to collect, use and disclose your TFN. We may disclose your TFN to another superannuation provider when your benefits are being transferred, unless you request in writing that we are not authorised to do so. It is not an offence to choose not to quote your TFN. However, giving your TFN to your superannuation fund will have the following advantages (which may not otherwise apply): - your superannuation fund will be able to accept all the types of contributions that are able to be made to your account(s); - other than the tax that may ordinarily apply, you will not pay more tax than you need to. This affects both contributions to your superannuation and benefit payments 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 not previously provided us with your TFN and wish to do so now, please quote your TFN:

### 7. Identification requirements

# What the certifier needs to do to certify your photocopied ID

The certifier can certify the photocopy of your ID by placing a stamp or writing 'This is a true and correct copy of the original' followed by their signature, printed name, qualification and the date. For example:

#### Persons who can certify documents

A person who is currently licensed or registered under a law to practise in Australia in one of the following occupations:

- Architect
- Chiropractor
- Dentist
- · Financial adviser or financial planner
- · Legal practitioner
- · Medical practitioner
- Midwife
- Migration agent registered under Division 3 of Part 3 of the Migration Act 1958, or similar legislation in a foreign country
- Nurse
- · Occupational therapist
- Optometrist
- · Patent attorney
- Pharmacist
- · Physiotherapist
- Psychologist
- · Trademarks attorney
- Veterinary surgeon

A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described);

An 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;

An 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; or a person who is in the following list:

- Accountant who is:
- (a) a fellow of the National Tax Accountants' Association; or
- (b) a member of any of the following:
  - (i) Chartered Accountants Australia and New Zealand;
  - (ii) the Association of Taxation and Management Accountants;
  - (iii) CPA Australia;
  - (iv) the Institute of Public Accountants
- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- APS employee engaged on an ongoing basis with two or more years of continuous service who is not specified in another item in this list
- Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955).



- Bailiff
- · Bank officer with two or more continuous years of service
- Building society officer with two or more years of continuous service
- · Chief executive officer of a Commonwealth court
- · Clerk of a court
- · Commissioner for Affidavits
- Commissioner for Declarations
- Credit union officer with two or more years of continuous service
- Employee of a Commonwealth authority engaged on a permanent basis with two or more years of continuous service who is not specified in another item in this list
- Employee of the Australian Trade and Investments Commission who is:
  - (a) in a country or place outside Australia and
  - (b) authorised under paragraph 3(c) of the Consular Fees Act 1955; and
- (c) exercising the employee's function in that place
- Employee of the Commonwealth who is:
- (a) at a place outside Australia; and
- (b) authorised under paragraph 3 (d) of the **Consular Fees Act 1955**; and
- (c) exercising the employee's function in that place
- Engineer who is:
- (a) a member of Engineers Australia, other than at the grade of student; or
- (b) a Registered Professional Engineer of Professionals Australia; or
- (c) registered as an engineer under a law of the Commonwealth, a State or Territory; or
- (d) registered on the National Engineering Register by Engineers Australia
- Finance company officer with two or more years of continuous service
- Holder of a statutory office not specified in another item in this list
- Judge

## 7. Identification requirement (continued)

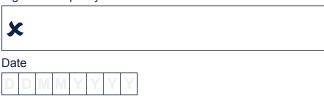
- · Justice of the Peace
- Magistrate
- Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the Marriage Act 1961
- Master of a court
- Member of the Australian Defence Force who is:
- (a) an officer; or
- (b) a non-commissioned officer within the meaning of the Defence Force Discipline Act 1982 with five or more years of continuous service; or
- (c) a warrant officer within the meaning of that Act
- Member of the Australasian Institute of Mining and Metallurgy
- Member of the Governance Institute of Australia Ltd
- · Member of:
- (a) the Parliament of the Commonwealth or
- (b) the Parliament of a State or
- (c) a Territory legislature or
- (d) a local government authority
- Minister of religion registered under Subdivision A of Division 1 of Part IV of the *Marriage Act 1961*
- Notary public, including a notary public (however described) exercising functions at a place outside:
- (a) the Commonwealth; and
- (b) the external Territories of the Commonwealth
- Permanent employee of the Australian Postal Corporation with five or more years of continuous service who is employed in an office providing postal services to the public
- · Permanent employee of:
- (a) a State or Territory or a State or Territory authority; or
- (b) a local government authority; with two or more years of continuous service other than such an employee who is specified in another item in this list
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Police officer
- · Registrar, or Deputy Registrar, of a court
- · Senior Executive employee of a Commonwealth authority
- Senior Executive employee of a State or Territory
- · SES employee of the Commonwealth
- Sheriff
- · Sheriff's officer
- Teacher employed on a permanent full-time or part-time basis at a school or tertiary education institution.

#### 8. Declaration and acknowledgement

By signing this request form I declare as follows:

- I understand that any payment from my policy will be after the deduction of any taxes paid or payable by me in respect of the withdrawn benefits.
- Payment of the benefits requested in accordance with this form will constitute a complete discharge to Resolution Life in respect of the withdrawn benefits.
- I have read and understood the Tax File Number notification requirements section of this form.
- I am applying to be paid under one of the grounds set out in section 2 and I have attached all of the necessary requirements.
- If this form is signed under Power of Attorney, the Attorney hereby certifies that he/she has not received notice of revocation of that Power.

Signature of policy owner



### Where to send this form

This form must be mailed to:

Resolution Life GPO Box 3306 Sydney NSW 2001

## Contact phone number

133 731

between 9 am and 5 pm (AEST/AEDT), Monday to Friday, excluding public holidays.

#### What you need to know