

Death claim notification

! Please note:

- Please read the Superannuation death benefit claim guide in conjunction with completing this form.
- Please attach a separate sheet if you require more room for a particular answer in this form.

Step 1. Details of the deceased member

Account or client numbers¹

Given name(s)

Surname

Postal address

Suburb State Postcode

Country

Date of birth Date of death

D	D	M	M	Y	Y	Y	Y	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	Y	Y	Y	Y
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Cause of death

1 Depending on the type of product the deceased member had, this may be referred to as a policy, member, account, contract or client number.

Step 2. Details of the person completing this form

Title

Given name(s)

Surname

Postal address

Suburb State Postcode

Country

Step 2. Details of the person completing this form (continued)

Relationship to deceased

Contact number

Email address

Step 3. State of affairs at the time of the member's death

Please answer the following questions regarding the state of the member's affairs at the time of their death:

1. Did the deceased pass away leaving a Last Will and Testament?
 No Yes
2. If you answered **yes** to question 1, will a Grant of Probate be sought?
 No Yes
3. If you answered **no** to question 1, will Letters of Administration be sought?
 No Yes
4. Is the estate solvent? (Do the assets excluding super exceed the liabilities of the estate?)
 No Yes

Step 4. Marital status at the time of the member's death

Please select the option(s) that best describe the member's marital status at the time of their death:

Married

Divorced

In a de facto relationship

Widowed

Permanently separated from spouse or de facto partner

Never married and never in a de facto relationship

Step 4. Marital status at the time of the member's death (continued)

Relationship history

Please provide full details of **all** of the member's spouses and partners throughout their life (including ex-spouses), in addition to their partner at the time of death:

Name of the deceased's partners	Nature of relationship	Address	Date of marriage or cohabitation	Date of divorce or separation
			/ /	/ /
			/ /	/ /
			/ /	/ /
			/ /	/ /

Step 5. Dependants at the time of death



Please note:

A dependant includes the member's spouse (including de facto spouse), all children (including step, adopted, ex-nuptial and posthumous natural children) regardless of a child's age and financial situation, and any person who was wholly or partially interdependent on the member. If there are no dependants, then please write 'Nil' across this section.

Please list **all** of the deceased's dependants who were alive at the time of the member's death:

Dependant name	Financial Age dependant	Relationship to deceased	Address	Email address	Certified ID provided

Step 6. Privacy disclosure

In this section, 'we', 'our' and 'us' means Resolution Life Australasia Limited ABN 84 079 300 379, AFSL No. 233671 (Resolution Life).

This section summarises key information about how we, and the Resolution Life Group, handle personal information. More information can be found in the full version of the Resolution Life Group Privacy Policy which can be found at resolutionlife.com.au/privacy.

Equity Trustees Superannuation Limited (ETSL) (ABN 50 055 641 757 AFSL No. 229757 RSE Licence No. L0001458) is Trustee for the following superannuation funds (Funds) and all products within them:

- Super Retirement Fund
- SuperTrace Superannuation Fund. It is important to highlight that your privacy remains a priority, with the Funds covered by ETSL's Privacy Policy, which you can find at eqt.com.au/global/privacystatement.

Protecting your personal information and being transparent about what ETSL and Resolution Life do with it is a vital part of 'our' relationship with you. Your personal information includes your identity, name, contact details, date of birth, gender, product details, financial information, employment status and foreign tax compliance. 'We' will not be able to administer this product for you without this information.

ETSL and Resolution Life will share your personal information with each other to perform their respective roles relating to your products and to continue to offer you a seamless customer experience. This can include providing you with customer service, to service your product, the management of claims, complaint handling and to update you on products and offers. While you are a customer of Resolution Life and ETSL you agree to the sharing of your information you are next dealing with 'us'.

To protect your privacy, ETSL or Resolution Life may also ask for your further consent to access certain personal information when you are next dealing with 'us'.

We may exchange your information with third parties where this is permitted by law or for any of the purposes 'we' use your information.

Step 6. Privacy disclosure (continued)

Third parties include:

- those who refer your business to 'us'
- any person acting on your behalf, including your financial adviser, solicitor, accountant, executor, administrator, trustee, guardian or attorney
- external product providers into which you might direct some of your investment or other product providers to which your investment might be transferred
- where 'we' are required to under domestic or foreign law
- medical practitioners (to verify or clarify, if necessary, any health information you may provide)
- reinsurers and auditors
- claims-related providers such as assessors and investigators (so that any claim you make can be assessed and managed), insurance reference agencies (where we're considering whether to accept a proposal of insurance from you and, if so, on what terms)
- organisations to whom 'we' may outsource certain functions
- government and law enforcement agencies or regulators
- entities established to help identify illegal activities and prevent fraud, and
- the life insured, policy owner or beneficiaries of a policy issued by 'us'.

In all circumstances where 'our' contractors, agents and outsourced service providers become aware of customer information, confidentiality arrangements apply. Customer information may only be used by 'our' agents, contractors and outsourced service providers for 'our' purposes.

'We' may be required to disclose customer information by law, e.g. under Court Orders or Statutory Notices pursuant to taxation or social security laws or under laws relating to sanctions, anti-money laundering or counter-terrorism financing.

The law allows you (subject to permitted exceptions) to access your information. 'We' may charge you for providing this access.

You can do this by contacting:

Email au.service@resolutionlife.com.au
Post Resolution Life Customer Resolutions
PO Box 234
Parramatta NSW 2124

Step 7. Declaration and acknowledgement

I, (your name)

of (your address)

hereby declare that I am over 18 years of age and that I may be legally entitled to claim the proceeds of the said policy/ies, being the

(please enter your relationship to the deceased)

of the deceased, and hereby undertake to indemnify the Trustee of the deceased, and hereby undertake to indemnify the Trustee against any loss it may incur in paying the proceeds to me, should I be called upon to do so, and that the particulars which are given above are true and correct in every particular.

I acknowledge that I have read, understood and agree to the **Privacy disclosure** contained in this form. I consent to the collection, use, storage and disclosure of my personal information (including health and other sensitive information) as described in the Resolution Life Privacy Policy which is available at resolutionlife.com.au/privacy. I understand that Resolution Life Australasia Limited will not be able to process my claim without this information.

*Here state in what capacity you claim, whether as a father, mother, widow, widower, or other relation, or as a Proponent, Assignee, Trustee, Beneficiary, Executor, or Administrator of the Estate, etc.

Signature of claimant

Date

Step 8. Payment details

Lump sum

A lump sum paid to the following Australian bank account (the account must be in your name, the name of the Estate, or it can also be your solicitor's client account).

Account type

- Personal account
 Estate account
 Solicitor's client account

Australian financial institution

Branch name

Account name

BSB number

Account number



Please note:

That the death claim payment may be paid to another person, or the Estate based on the assessment of your claim. If a decision is made to pay the benefit to multiple recipients, we may request for additional information.

If you choose to direct the benefits as a rollover to an **Income Stream** or as a **Death Benefit Rollover**, we will provide an additional form to obtain the details.

- Rollover to an Income Stream** – You intend to rollover the benefits to an income stream
- Rollover as a death benefit** – You intend to rollover the benefits to a compliant superannuation account

Payment details, declaration and acknowledgement

I declare and acknowledge that:

- I understand that payment from the Fund will be net of any taxes paid or payable in respect of the withdrawn benefits.
- Payment of the benefit in accordance with this form will constitute a complete discharge for the Trustee in respect of the benefit.
- If this form is signed under a Power of Attorney, the Attorney confirms that he/she has not received a Notice of Revocation of that Power.
- I agree to indemnify the Trustee, Resolution Life Australasia Limited, and their related parties against all actions, loss, proceedings, claims, damages, costs, expenses, liability for tax, including tax payable, if any, in relation to or arising from this payment request or instructions.
- I confirm that I have taken my own independent legal, taxation and other relevant professional advice relating to the effect of all aspects and consequences of the request or instructions and understand and accept the effect and consequences of this payment request or instructions and this indemnity.

Full name¹ (Print in CAPITAL LETTERS)

Signature¹

Date

¹ If signed under a Power of Attorney, please provide a certified copy of the Power of Attorney (with each page certified), and certified identification of the attorney(s).

Step 9. Document checklist

Please complete the following checklist and attach certified copies of all required documents:

Document	Why is this required?	Attached
1. Deceased's Death Certificate	Required in all cases as a proof of deceased's death.	<input type="checkbox"/>
2. Deceased's certified ID	Required in all cases as a proof of deceased's age.	<input type="checkbox"/>
3. Evidence of name change	Required where the deceased had a name change.	<input type="checkbox"/>
4. Last Will and Testament	Required if the deceased left a Last Will and Testament.	<input type="checkbox"/>
5. Grant of Probate or Letters of Administration	Required where either of these items has already been obtained.	<input type="checkbox"/>
6. Your certified ID	Required to identify the person(s) completing this form.	<input type="checkbox"/>
7. Marriage and birth certificates of dependants	Required if spouse or children were alive at the time of the member's death.	<input type="checkbox"/>
8. Death Certificate of dependants	Required if spouse or children were deceased at the time of the member's death.	<input type="checkbox"/>

Where to send this form

Please send the completed form and supporting certified documents to:

Resolution Life
Locked Bag 5075
Parramatta NSW 2124

What you need to know

Equity Trustees Superannuation Limited ABN 50 055 641 757, AFSL No. 229757, RSE Licence No. L0001458 (Trustee) as trustee of the Super Retirement Fund ABN 40 328 908 469 (Fund) is the issuer of this product.

Resolution Life Australasia Limited ABN 84 079 300 379, AFSL No. 233671 (Resolution Life) is the administrator of the Fund on behalf of the Trustee.

The information contained in this document is factual information only. It does not contain any financial product advice or make any recommendations about a financial product or service being right for you.

Resolution Life is part of the Resolution Life Group and can be contacted via resolutionlife.com.au/contact-us or by calling 133 731.