

# Binding death benefit nomination

## This form is for members of the LGS Defined Benefit Scheme

Use this form to nominate to whom you want your benefit to be paid in the event of your death. Before completing this form, please ensure you read the relevant Product Disclosure Statement (PDS) available at [lguper.com.au/PDS](http://lguper.com.au/PDS).

Nomination of a beneficiary is optional.

Please print and complete in black pen or type in CAPITAL letter directly on this form and ensure that sections 3, 4 and 5 have been signed and dated by hand.

### I. Your details

Member no.	<input type="text"/>	Date of birth	<input type="text"/>	Title	<input type="text"/>
Given name/s	<input type="text"/>				
Family name	<input type="text"/>				
Phone (home)	<input type="text"/>	Phone (work)	<input type="text"/>		
Phone (mob)	<input type="text"/>	Email address	<input type="text"/>		
<b>Postal address</b>					
No./Street	<input type="text"/>				
Suburb/Town	<input type="text"/>	State/Territory	<input type="text"/>	Postcode	<input type="text"/>
Residential address	<input type="checkbox"/>	select if same as postal address above			
No./Street	<input type="text"/>				
Suburb/Town	<input type="text"/>	State/Territory	<input type="text"/>	Postcode	<input type="text"/>

#### IMPORTANT

If you are a **Defined Benefit Scheme** member and make a valid binding nomination, it only has effect and will be followed in respect of the following benefit types:

1. Deferral of a benefit as a lump sum benefit at or after attaining age 65.
2. Benefits that have been compulsory preserved as a lump sum following termination of employment.
3. The Basic Benefit.

All other benefits payable from the Scheme will be paid in accordance with Scheme rules.

## Notes:

### What is a binding death benefit nomination?

If you make a valid binding death benefit nomination (BDBN) in favour of your dependant(s) and/or legal personal representative(s), the Trustee must distribute the benefit on your death in accordance with the BDBN provided the nomination is still valid at the time of your death.

### Who can I nominate?

Each person you nominate must be one or more of the following at the time of your death:

- Your spouse;
- Your child or children;
- Any other person who is financially dependant on you;
- Any other person with whom you had an 'interdependency relationship'. Two persons have an interdependency relationship if:
  - they have a close personal relationship; and
  - they live together; and
  - one or each of them provides the other with financial support; and
  - one or each of them provides the other with domestic support and personal care.

(Two people have an interdependency relationship if they have a close personal relationship but do not satisfy the other requirements of an interdependency relationship because one or both of them suffers from a disability); or

- Legal personal representative(s). For the purposes of this BDBN, a legal personal representative is taken to be someone who holds grant of probate or letters of administration. If such a person has not lodged an application with LGS within 12 months of your death, this binding nomination will be rendered invalid and the Trustee will decide how the benefit is to be distributed.

### How do I make a valid binding death benefit nomination?

For the Trustee to consider your BDBN:

- you must confirm that each person you have nominated is either your dependant or your legal personal representative; and
- the form must state the proportion of the benefit that you wish to pay each nominated beneficiary, and the total allocation must equal 100% of the benefit; and
- the form must be signed and dated by you in the presence of two witnesses who are at least 18 years old and are not a person nominated on the form. The witnesses must sign and date their declaration on the same date that you sign the form; and

- the form must be provided, and accepted, by the Trustee prior to your death; and
- the BDBN must not have expired.

If you submit a BDBN that we identify to be invalid on its face, we will write to you advising that we are unable to accept it. The legal rules about the eligibility of nominated dependants are complex and eligibility factors can change and vary so we cannot guarantee that each nominee listed above will be eligible to receive payment of your death benefit at the time payment is to be made.

### How long does a binding nomination last?

There are strict legal requirements for a BDBN to be validly made and to remain valid. You can amend or revoke your nomination at any time. To remain valid, a BDBN must be confirmed at least every three years.

### What happens if I do not make a valid binding death benefit nomination?

The Trustee will, at its discretion, pay the benefit to one or more of your dependants or legal personal representative(s). Benefits paid to your legal personal representative(s) will be paid by way of a lump sum which will form part of your estate to be distributed in accordance with your Will (if you have left one) or otherwise in accordance with the law.

Examples of when a BDBN is invalid include:

- Your BDBN had expired; or
- Your BDBN form was incorrectly signed, or witnessed; or
- Your BDBN form has been altered
- The person nominated does not qualify as your dependant at the date of your death.

You may nominate one or more beneficiaries. A beneficiary **MUST** either be a dependant or your Legal Personal Representative.

**IMPORTANT**

'Dependant' and 'Interdependency relationship' are defined under super law. Please see Notes on page 2 for more information about these terms.

**2. Your nomination**

Please check this box if you wish the binding nomination to apply to all accounts you hold with LGS (excluding any LGS Income for Life) as at the date of your death.

Benefit allocation percentage:

**Beneficiary 1**    .   %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone

**Dependant type**

Spouse  Child  Interdependency relationship  Financial dependant

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**Beneficiary 2**    .   %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone

**Dependant type**

Spouse  Child  Interdependency relationship  Financial dependant

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**Beneficiary 3**    .   %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone

**Dependant type**

Spouse  Child  Interdependency relationship  Financial dependant

Benefit allocation percentage:

**Beneficiary 4**

.  %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode  Country

Phone

**Dependant type**

Spouse  Child  Interdependency relationship  Financial dependant

**Beneficiary 5**

.  %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode  Country

Phone

**Dependant type**

Spouse  Child  Interdependency relationship  Financial dependant

**And/or your Legal Personal Representative(s)**

.  %

I'd like to nominate my Legal Personal Representative(s)

**Total**

%

If you want all or part of your benefit paid to your estate and wish for your funds to be distributed according to your Will, select your Legal Personal Representative as your beneficiary.

**IMPORTANT**

Your nomination MUST add up to 100%.

**3. Contact details (optional)**

In the event of my death, please contact the following person/s for further information that may assist the Trustee in distributing my benefit. (Provide name/s and contact details)

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode  Country

Phone

### IMPORTANT

To be valid, this form must be signed by you, dated and witnessed by two witnesses ON THE SAME DATE.

You must sign by hand in front of two (2) witnesses.

### IMPORTANT

Witnesses must be over the age of 18 and not a person mentioned in this form (i.e. a beneficiary).

This section must be completed by hand.

## 4. Your declaration

You must complete this section if you wish to make a binding nomination

- I direct LGSS Pty Limited (ABN 68 078 003 497) (AFSL 383558) as Trustee for Local Government Super (ABN 28 901 371 321) to distribute my benefits payable from LGS upon my death in accordance with my binding nomination.
- I understand that:
  - this nomination is only valid for three (3) years from the date of signing, or until I replace or revoke the nomination (by delivering to LGS a new signed and dated form),
  - this nomination will only be valid if the beneficiaries listed are my spouse, child, financial dependant, a person with whom I have an interdependency relationship or legal personal representative when I die; and Signed
  - if this nomination is invalid or has not been received by the Trustee when I die, my death benefit will be paid at the Trustee's discretion to one or more of my dependants or legal personal representative.
- I have read the information with this form and understand the terms on which this nomination is made.
- I declare the information provided is true and correct.

Full name

Signed  Date

## 5. Witness declaration

I, as witness, solemnly and sincerely declare that I am over eighteen (18) years of age and that the nomination was signed in my presence.

### Witness 1

Full name

Signed  Date

### Witness 2

Full name

Signed  Date

## Please return your completed form to:

Mail: Local Government Super  
PO Box N835  
Grosvenor Place NSW 1220

You can email your signed and witnessed form to us at [admin@lgsuper.com.au](mailto:admin@lgsuper.com.au). However, you also need to post the original form as it is required for proof of identity.

### Privacy Collection Statement

The information provided on this form is collected by LGSS Pty Limited (ABN 68 078 003 497) as Trustee for Local Government Super (ABN 28 901 371 321) for the purposes of administering accounts and providing services to you associated with fund membership. If you do not provide the requested information, LGS may not be able to perform these services. Your personal information may be shared with our administrator, other superannuation trustees and other services providers, in order to be able to provide our services to you. We may provide information to government, regulatory or other bodies if required by law. For further information about how we manage and protect personal information, please refer to our privacy policy available at [lgsuper.com.au/privacy-policy](http://lgsuper.com.au/privacy-policy) or by calling us on 1300 LGSUPER (1300 547 873). It sets out how we use the information we hold about you, how you can access and correct the information, how you may complain about a breach of privacy and our process for resolving privacy related enquiries and complaints.

Issued by LGSS Pty Limited (ABN 68 078 003 497) (AFSL 383558), as Trustee for Local Government Super (ABN 28 901 371 321).

Enquiries: Phone: 1300 LGSUPER (1300 547 873), 8.30am–5.00pm, Monday to Friday Web: [lgsuper.com.au](http://lgsuper.com.au)