

# Death benefit nomination

Please select which scheme(s) you are a member of and enter your membership number(s):

LGS Lifetime Guaranteed Income

LGS Fixed Term Guaranteed Income



Use this form to nominate to whom you wish your benefit to be paid in the event of your death. Nomination of a beneficiary is optional.

Please type in CAPITAL letters directly into this form, print it, and then have sections 3 and 4 signed and dated by hand. Alternatively, you can print the form and complete it using a black pen and CAPITAL letters. Use (✖) to mark boxes.

Before completing this form, please ensure you read the relevant Product Disclosure Statement (PDS) available at [lgsuper.com.au/PDS](http://lgsuper.com.au/PDS)

## I. Your details

Date of birth  DD/MM/YYYY Title, e.g. Ms

Given name/s

Family name

Email address

Phone (home)  Phone (work)

Phone (mob)

### Postal address

No./Street

Suburb/Town  State/Territory  Postcode

Residential address  select if same as postal address above

No./Street

Suburb/Town  State/Territory  Postcode

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

Please select the type of nomination you would like to make and then complete the relevant section.

## 2. Type of nomination

I would like to make a binding death benefit nomination to a dependant or Legal Personal Representative (go to Section 3).

I would like to nominate my spouse as my reversionary beneficiary (go to Section 4).

I would like to remove an existing nomination (go to Section 5).

You can nominate one or more beneficiaries. A beneficiary must either be a dependant or your Legal Personal Representative (LPR).

A **Dependant** includes:

- your spouse at the time of your death.
- your child or children.
- any other dependant.
- any other person with whom you had an 'interdependency relationship' just before you died.

Please refer to the relevant Product Disclosure Statement (PDS) for a further explanation of dependants.

If you require more space for beneficiaries please copy this page.

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% and be whole numbers.

### 3. Binding death benefit nomination

Benefit allocation percentage:

**Beneficiary 1**     %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone (home)

**Type of nomination**

Spouse  Child  Interdependant  Any other dependant  LPR/Estate

**Beneficiary 2**     %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone (home)

**Type of nomination**

Spouse  Child  Interdependant  Any other dependant  LPR/Estate

**Beneficiary 3**     %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone (home)

**Type of nomination**

Spouse  Child  Interdependant  Any other dependant  LPR/Estate

**Beneficiary 4**     %

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone (home)

**Type of nomination**

Spouse  Child  Interdependant  Any other dependant  LPR/Estate

Benefit allocation percentage:

**Beneficiary 5**

%

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone (home)

**Type of nomination**

Spouse  Child  Interdependant  Any other dependant  LPR/Estate

**Total**

%

You can nominate your spouse as your reversionary beneficiary when you apply for an LGS Guaranteed Income account. Although you may cancel this nomination at a later date, you cannot change your nomination.

If you remove your existing nomination, the Trustee will, at its discretion, pay your death benefit to your dependants or Legal Personal Representative.

**4. Reversionary spouse nomination**

Title, e.g. Ms  Full name

No./Street

Suburb/Town  State/Territory

Postcode     Country

Phone (home)

**5. Remove existing nomination**

I would like to remove the following beneficiary nomination from my LGS Guaranteed Income account:

**Beneficiary**

Full name

**6. 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 revoke the nomination, whichever is sooner.
- 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.
- I understand that personal information provided on this form will be used to action my request.

Signed

Date

**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.

## 7. 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

Please mail original documents as they are required for proof of identity.  
DO NOT EMAIL.

### 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](https://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).