

Transfer-in Authority (from an external fund)

This form is for members of the LGS Retirement Scheme

Use this form if you want to transfer monies from a previous super fund into the LGS Retirement Scheme.

Please use a black pen and CAPITAL letters or type directly into this form online, print it and send it to us. Use (✖) to mark boxes.

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

IMPORTANT Before you transfer

When you transfer your super, your entitlements under that fund may cease. Some things to consider before switching funds are:

Fees: check whether or not your previous fund will charge an exit fee or any other fees.

Insurance: ensure that you've transferred or replaced any insurance that you have with your other fund before closing your account.

Please select the amount you would like to transfer from your previous fund.

Partial rollover only: please note that your previous fund may require you to leave a minimum of \$5,000 in your account following any partial rollover. Any insurance held may cease if you have insufficient funds to cover the premiums.

I. Your details

Member no. Date of birth Title eg. Mr

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

2. Previous fund details

Fund name

Address of the Fund Administrator or Trustee

No./Street

Suburb/Town State/Territory

Postcode Country

Membership/Account no. Phone

ABN¹

USI/SPIN¹

If you have multiple account numbers with this fund, you must complete a separate form for each account you wish to transfer.

I want to transfer the full balance (100%) from my previous fund to LGS.

OR

I want to transfer part of my balance from my previous fund to LGS. The amount I want to transfer is \$.

1. Please note that you must provide the fund's ABN (Australian Business Number) and USI (Unique Superannuation Identifier). These can be obtained directly from your chosen rollover fund. ABN can also be obtained from the Australian Prudential Regulation Authority (APRA) website, apra.gov.au

IMPORTANT

Using this form to transfer your benefits will not change the fund to which your employer pays your contributions and may close the account you are transferring your benefits from.

If you wish to change the fund into which your contributions are being paid, you will need to speak to your employer about super choice.

LGS is authorised to collect your Tax File Number (TFN) under the *Superannuation Industry (Supervision) Act 1993*. We will treat it as confidential and only use it for lawful purposes. This includes disclosing it to another super fund when we're arranging a transfer of funds for you.

You are not obliged to disclose your TFN, but there may be implications if you don't.

Without it, your contributions may be taxed at a higher rate and LGS cannot accept after-tax contributions from you.

3. LGS fund details (to provide to your previous super fund)

| | |
|---|---|
| Fund name | Local Government Super |
| Unique Superannuation Identifier (USI/SPIN) | LGS0105AU |
| Australian Business Number (ABN) | 28 901 371 321 |
| Registered Superannuation Entity Number | RI004663 |
| RSE Licence Number | L0001243 |
| Fund address | Level 12, 28 Margaret Street, Sydney NSW 2000 |
| Daytime telephone | 1300 547 873 |

4. Your Tax file number (TFN)

My TFN is:

If you do not provide your TFN:

- your contributions may be taxed at the highest rate plus Medicare levy
- you will not be able to make personal contributions to your super fund
- we may not be able to receive contributions from you or your employer
- it may be more difficult for you to monitor your account or to locate it if you lose track of it.

5. Your declaration

In signing this request form I am making the following statements:

- I declare that I have fully read this form and the relevant PDS and that the information completed on this form is true and correct.
- I am aware that I may ask my previous superannuation provider for information about any fees or charges that may apply, or any other information about the effect this transfer may have on my benefits, and do not require further information.
- I understand and acknowledge the implications of transferring my benefits from my previous fund to LGS.
- I authorise the Trustee of LGS to make all necessary arrangements, including completing any necessary documentation to effect this transfer.
- I consent to representatives of LGSS Pty Limited (Australian Financial Services Licence No. 383558) to obtain any information in relation to my superannuation.
- I have read the Privacy Collection Statement and understand how LGS will use the personal information provided on this form.
- I authorise my previous fund to provide the Trustee of LGS with all relevant details, including details of my membership, my TFN, a copy of the Rollover Benefits Statement and any other information which may be required to effect this transfer. By giving this authorisation to transfer my benefits:
 - I discharge the superannuation provider of my previous fund of all further liability in respect of the benefits paid and transferred to LGS;
 - I understand that the previous fund Trustee may be entitled to deduct a product switch fee or exit fee from the benefits transferred; and
 - I understand that LGS does not levy any transfer fees when receiving rollovers from other superannuation funds.
- I request and consent to the transfer of superannuation as described above and authorise the superannuation provider of each fund to give effect to this transfer.

Name

Signed

Date

Please return your completed form to:

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

Email: admin@lgsuper.com.au

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 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).