

Directions for payment of an invalidity lump sum benefit

Please print clearly in black ink.

Use this form...

If you are a member of the Police Superannuation Scheme (PSS) and your application for payment of a lump sum invalidity benefit has been approved.

How to direct us

You must fill in sections 1 to 5 of this Form.

These sections tell the fund administrator, Mercer, how you want your lump sum to be paid.

In order to understand your eligibility and any conditions of payment read PSS Fact Sheet 11: *Medical discharge benefit* for members of the Police Force or PSS Fact Sheet 12: *Medical discharge benefit for a former member of the Police Force*, STC Fact Sheet 10: *Basic Benefit* and STC Fact Sheet 20: *SANCS Additional Employer Contributions (AEC) Account*.

SANCS benefit

As a member of PSS, you are entitled to receive a SANCS benefit. The SANCS benefit includes the basic benefit and, if eligible, the additional employer contribution (AEC) benefit and any Commonwealth Government contributions.

Basic benefit

The basic benefit is a lump sum benefit that is fully paid for by your employer. Further information can be found in STC Fact Sheet 10: *Basic Benefit.*

Additional employer contributions (AEC) account

Not all PSS members will have an AEC account, as it only applies to members whose employment after 30 June 2013 was subject to NSW Public Sector Wages Policy. Further information can be found in STC Fact Sheet 20: SANCS Additional Employer Contributions (AEC) Account.

Commonwealth Government contributions

Commonwealth Government contributions include the superannuation co-contribution and the Low Income Superannuation Tax Offset (LISTO). Further information can be found in STC Fact Sheet 13: *Information about the Commonwealth Government's Superannuation co-contribution and the Low Income Superannuation Tax Offset.*

When can the SANCS benefit be paid directly to you?

If you have reached your Commonwealth preservation age (between 55 and 60) and retired permanently from the workforce you are entitled to apply to have the SANCS benefit paid directly to you. If you do not meet these requirements, but have two certificates from qualified medical practitioners, stating that you are suffering from a medical condition that means you are likely to be unable to ever be employed in a capacity for which you are reasonably qualified by education, training or experience, you can also apply to have the SANCS benefit paid directly to you. Further information can be found in STC Fact Sheet 4: *When can I be paid my superannuation benefits*?

If you need help with this form

1. Your personal de	tails				
Member number			Reg	gistered number	
Mr/Mrs/Ms/Miss/Dr	Male	Female	Birth da	te (DD-MM-YYY [^]	Y)
Given name(s)					
Family name					
Residential address					
Suburb				State/Territory	Postcode
Postal address (if differen	nt from re	esidential add	dress)		
Suburb				State/Territory	Postcode
Suburb				State/ Territory	FUSICOUE
Work or Home Daytime	e contact	: telephone n	number		
Mobile number					
Email address					
2. How do you want	t to be	paid?			
Directored		lata:la*			
Direct cash pay	ment c	letalis*			

Please note that you will need to provide a copy of an extract of your bank statement with your application that clearly shows the account name and number.

 Account name (T) 	The account must i	he held solel	v or ioint	lv in i	vour namel

BSB number Account number																		
Nan	Name of bank/building society/credit union																	
Brar	nch																	

*Direct crediting is not available on a full range of accounts, or for all building society and credit union accounts. To confirm whether this facility is available, please check with your financial institution.

If you need help with this form

3. What do you want to do with your SANCS Benefit?

Mark one box with a cross.	The SANCS benefit is a lump sum that can be rolled over or, in some circumstances, be paid directly to you. Read page one of this Form to see when the SANCS benefit can be paid directly to you.										
	I wish to rollover the whole amount of my benefit (see Section A) OR										
	I have reached the Commonwealth Preservation age and retired permanently from the workforce. I wish to apply for payment of the benefit directly to me. (see section B over page) <i>OR</i>										
	I have attached two certificates from qualified medical practitioners stating that I am suffering from a medical condition that makes it likely that I will be unable ever to be employed in a capacity for which I am reasonably qualified by education, training or experience. Pay the whole amount directly to me (see Section B over page).										
	Section a. Rollover details										
	Name of chosen rollover fund										
	Payee (if different from fund name)										
	Postal address of chosen rollover fund										
	Suburb State/Territory Postcode										
	Suburb State/Territory Postcode										
	Contact name at chosen rollover fund <i>(if known)</i>										
	Unique Superannuation Identifier (USI) (not applicable for transfers to SMSF's)										
	Australian Business Number (ABN)										
	Electronic Service Address (ESA)* (only applicable for transfers to SMSF's)										
	Rollover policy name and/or number (<i>if known</i>)										
	If you wish to rollover into more than one fund, please copy this page and complete details for each rollover.										
	To avoid delay in the payment of your benefit, please complete all rollover details above. This information is required under Commonwealth tax provisions. It can be obtained directly from your chosen rollover fund. The ABN may also be obtained by using the Super Fund Lookup service at the superfundlookup.gov.au website.										
	*An ESA is an alias that represents the uniform resource locator (URL) or internet protocol (IP) address of a messaging provider. It ensures you meet all technical requirements for interacting electronically across the superannuation network. An email address is not an ESA.										
	You can obtain an ESA from an SMSF messaging provider or through your SMSF intermediary such as SMSF administrator, tax agent, accountant or some banks. Many of these options are no cost or low cost.										
	If you choose to rollover any part of your benefit – it must be rolled over to a complying superannuation fund.										

If you need help with this form

Section a. Rollover details continued

If you choose to rollover to a self-managed superannuation fund (SMSF), payment will be made by electronic funds transfer (EFT) to the SMSF's operating bank account. You will need to provide a copy of a bank statement for the SMSF, and the bank account name will need to match the name of the SMSF. Your membership in the SMSF will also be confirmed using the ATO's SMSF verification service prior to processing any rollover.

Section b. Direct cash payment details*

Please note that you will need to provide a copy of an extract of your bank statement with your application that clearly shows the account name and number.

Account name

BSB number Ad	ccount number
Name of bank/building society/credit union)	
Branch	

4. How do you want to pay your Surcharge Debt account (if applicable)?

If you have a Surcharge Debt account, you have three options as to how to pay this amount:

- You can have the amount of the Surcharge Debt account deducted from your SANCS Benefit (before payment), or
- it can be deducted from your PSS Benefit, whether pension or lump sum (before payment), or
- you can pay the amount of the debt account to the Scheme as a voluntary payment (please contact us so we can provide EFT details).

The Surcharge Debt account must either be deducted from a benefit or a voluntary payment made before any benefit is paid from the scheme.

Please note that if you do not select any of the three options, the amount of the Surcharge Debt account will be deducted from your SANCS Benefit (before payment).

Mark one box with a cross.

*Direct crediting is not available on a full range of accounts, or for all building society and credit union accounts. To confirm whether this facility is available, please check with your financial

institution.

Please select one of the following options.

- Please deduct the amount of my Surcharge Debt account from my SANCS Benefit (before payment).
- Please deduct the amount of my Surcharge Debt account from my PSS Benefit (before payment).
- I wish to pay the amount of my Surcharge Debt account to the scheme as a voluntary payment. I have completed an electronic funds transfer (EFT) and have provided evidence of the payment.

If you need help with this form

5. Your signature

I declare that the information I have given is correct.

I have reviewed Section 6 - Proof of Identity and Section 7 - Electronic verification, and confirm the following (please select one or more):

I am not required to provide proof of identification as I am not receiving any part of my benefit in cash and am not rolling over any part of my benefit to a self-managed superannuation fund (SMSF)

I have provided certified proof of identity documents

If my proof of identity documents are not certified correctly, I consent to State Super or Mercer Administration Services (the fund administrator) verifying my identification electronically.

I have provided electronic verification information in Section 7. I consent to State Super or Mercer Administration Services (the fund administrator) verifying my identification electronically.

Note - if you provide authorisation to have your identity verified electronically but the documents are not compatible, you will need to provide certified copies of the required documents. We will contact you if this is the case.

Name (Print in BLOCK LETTERS)

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Re	eturn t	he co	mple	eted	for	m to):										
Sta	ate Sup	ber (PS	SS)														
	PO Box																
Me	elbourn	e VIC	300	1													

If you need help with this form

Your privacy

The information you provide in this Form is collected on behalf of and held for State Super by the scheme administrator. Mercer Administration Services (Australia) Pty Ltd, in accordance with STC's Privacy Statement, the Privacy and Personal Information Protection Act 1998 (NSW) and the Health Records and Information Privacy Act 2002 (NSW), under which you have rights of access and correction. Information you provide may be disclosed to lawfully authorised government agencies and third parties.

For further information about privacy, contact Mercer by writing to:

GPO Box 2181 Melbourne VIC 3001

or visit

www.statesuper.nsw.gov.au

ABN 29 239 066 746 SPIN SAS0101AU

6. Proof of identity

You may need to provide certified[†] proof of identity documentation or electronic verification information with your application to prove that you are the person to whom the superannuation entitlements belong. Proof of identity is only required if your application is for:

- the payment of any part of your benefit as a lump sum payable directly to you – including your basic benefit
- the rollover of any part of your benefit to a Self Managed Super Fund (SMSF)
- the payment of a pension benefit.

Note – You are not required to

provide proof of identification if you are applying to rollover your entire benefit (including your basic benefit) to a complying superannuation fund, other than a self managed superannuation fund (SMSF). If your entire benefit is being transferred to a complying superannuation fund (other than a SMSF) we are able to verify your identity through the Australian Taxation Office (ATO) using their Super TFN Integrity Check (Super TICK) service. In the event that Super TICK is unavailable or if the records we hold do not match the ATO records - identity documents may be required. Identity documents or electronic verification information will still be required for rollovers to a SMSF.

The following certified documents can be accepted:

Either

One of the following certified documents:

- Current Australian State or Territory drivers licence containing a photograph of the person, or
- Australian Passport, or
- Current card issued under a State or Territory law for the purpose of providing a person's age containing a photograph of the person, or
- Current foreign passport or similar travel document containing a photograph and the signature of the person*

OR

One certified document from each of the following groups:

Group 1

- An Australian birth certificate or birth extract issued by a State or Territory
- Citizenship certificate issued by the Commonwealth
- Current pension card issued by Centrelink that entitles the person to financial benefits

Group 2

- Notice issued by the Commonwealth or a State or Territory government within the preceding 12 months that records the provision of financial benefits to you, i.e., a letter from Centrelink.
- Notice issued by the Australian Taxation Office within the past twelve months that contains your name and residential address and records an amount payable to or by you, i.e., your last tax assessment.
- Notice issued by a local government body or utilities provider within the past three months that shows your name, residential address and the provision of services to you, i.e. water, gas or electricity bill, rates notice.
- * Documents not written in English must be accompanied by an English translation prepared by an accredited translator.

Change of name

Make sure that proof of change of name is also provided if your current name is not the same as the name on these documents, e.g. Change of name certificate, or deed poll document. If your name has changed on marriage, a marriage certificate issued by the Registry of Births, Deaths and Marriages is required; ceremonial marriage certificates are not acceptable.

[†] Certified means that all copied pages of original proof of identity documents or change of name documents have been certified as true copies by an individual approved to do so. Persons who are authorised to certify documents

If you need help with this form

6. Proof of identity continued

must sight the original and the copies and make sure both documents are identical, then make sure that all copies are certified as true copies by writing or stamping 'certified true copy' followed by the individual's signature, printed name, qualification and date.

If you are in Australia

The following persons are eligible to certify copies of original documents:

- Australia Post Permanent Employee or Agent (who is currently employed with the post office and has at least two continuous years of service or is in charge of supplying postal services to the public)
- Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955)
- Bailiff
- Bank Officer, Building Society Officer or Credit Union Officer (with two or more years of continuous service)
- Chiropractor
- Commissioner for Affidavits or Declarations
- Court Officer: Registrar or Deputy Registrar of a Court, Judge, Clerk, Magistrate, Master of a Court, Chief Executive Officer of a Commonwealth Court
- Dentist
- Fellow of the National Tax Accountants' Association
- Finance Company Officer (with two or more years of continuous service with one or more finance companies)
- Justice of the Peace
- Legal practitioner
- Marriage celebrant (registered under Subdivision C of Division 1 of Part IV of the Marriage Act 1961)
- Medical practitioner
- Member of Chartered Secretaries
 Australia
- Member of Commonwealth Parliament, State Parliament, Territory Legislature or a Local Government Authority (State or Territory)

- Member of Engineers Australia (other than at the grade of student)
- Member of the Association of Taxation and Management Accountants
- Member of the Australasian Institute of Mining and Metallurgy
- Member of the Australian Defence Force (who is an officer; or a noncommissioned officer within the meaning of the Defence Force Discipline Act 1982 with two or more years of continuous service or a warrant officer within the meaning of that Act)
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- Minister of Religion (registered under Subdivision A of Division 1 of Part IV of the Marriage Act 1961)
- Notary Public
- Nurse
- Optometrist
- 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
- 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
- Patent attorney
- Permanent employee of the Commonwealth (or Commonwealth Authority) or a State or Territory (or State or Territory Authority) or a Local Government Authority with two or more years of continuous service
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Pharmacist
- Physiotherapist
- Police Officer, Sheriff's Officer or Sheriff
- Psychologist
- Senior Executive Service Employee of the Commonwealth (or Commonwealth

If you need help with this form

6. Proof of identity continued

Authority) or a State or Territory (or State or Territory Authority)

- Teacher employed on a full-time basis at a school or tertiary education institution
- Trade marks attorney
- Veterinary surgeon

If you are outside Australia

The following people are eligible to certify copies of original documents outside of Australia:

- consular staff at an Australian Embassy, High Commission or Consulate
- a public notary or other person authorised to administer an oath or affirmation or to authenticate documents in the country you are visiting or living in.

The professions listed under **If you are in Australia** can only certify documents outside Australia if they work or are registered in Australia. Where your documents are certified outside Australia, the certifier must quote their registration number or the relevant law that qualifies them to authenticate your documents.

7. Electronic verification

Please complete this section if you would prefer to allow us to verify your identity information electronically, instead of providing certified proof of identity documents.

We use a platform called 'greenID' to complete this verification. GreenID assists entities in meeting their Anti-Money Laundering and Counter-Terrorism Funding obligations by providing a secure and complete identity verification system.

You must provide complete details for any TWO of the following (note, only Australian documents can be verified electronically)

1. Medicare Card

Full name exactly as shown on my Medicare Card

Medicare number					Refe	erenc	ce nu	ımb	er					
Valid to (MM-YYYY)					Med	dicare	e car	d co	olour					
						Gree	en		Blue		Yell	OW		
2. Drivers Licence														
Full name exactly as	shown	on my	Drivers	Lice	nce									
		\square												
Licence number					Driv	er lic	ence	eca	rd nu	ımbe	er			
State of issue	Expiry ((DD-M	M-YYY	Y)										
		-	-											
3. Australian Pass	port													
Passport Number														
	T T													
Place of birth (as sh	own on p	basspo	ort)											
Country of birth (not	shown o	on pas	sport)											
		П												
Expiry date (DD-MM	-YYYY)													
Notes: If your name need to provide a ce Births, Deaths & Ma	ertified lin						-					-		of
If you complete the to validate your deta				lentit	y ide	ntific	ation	n, ₩€	e will	take	e this	s as o	cons	ent

If you provide authorisation to have your identity verified electronically but the documents are not compatible, you will need to provide certified copies of the required documents and post these to us. We will contact you if this is the case.

If you need help with this form