

# Pension Application Form

September 2018

## Member Details

Mr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Other	<input type="checkbox"/>	
First given name	<input type="text"/>									
Middle names	<input type="text"/>									
Family name	<input type="text"/>						Date of Birth	<input type="text"/>		
Residential address	<input type="text"/>									
Suburb/town	<input type="text"/>				State	<input type="text"/>		Postcode	<input type="text"/>	
Daytime telephone no.	<input type="text"/>									
Email address	<input type="text"/>									
Postal address (if different)	<input type="text"/>									
Suburb/town (if different)	<input type="text"/>				State	<input type="text"/>		Postcode	<input type="text"/>	
Current or former employer	<input type="text"/>									

## Amount to be invested in your pension account

Is the whole of your existing benefit in Pitcher Retirement Plan to be transferred to your Pension Account?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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**Note:** There is currently a \$1.6m pension cap that limits the amount you are able to transfer into your Pension Account. This cap applies across all superannuation funds that you are a member of. Accordingly, you should consider whether you have pension accounts in other superannuation funds.

If you answered no, what amount of your superannuation benefits is to be transferred to your Pension Account?

\$	<input type="text"/>
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Do you wish to add to your Pension Account by:

Transferring a benefit from another fund? If so, please complete a Transfer Authority Form and send to us. Upon receipt of this form, we will arrange the transfer with the other fund(s) on your behalf and notify you when the transfer is completed.

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Making a personal contribution to Pitcher Retirement Plan account for transfer to your Pension Account? If so, the contribution must be made before you complete this form.

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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## Insurance

Are you currently covered for death or permanent disablement insurance with the Plan?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Do you want to continue or have insurance cover?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Please refer to the Plan's Product Disclosure Statement for further details about insurance options.

**Payment amounts**

Please select **ONE** of the following four pension payment options:

Minimum Pension Amount

**OR**

Maximum Pension Amount (Transition to Retirement Pensions only)

**OR**

An annual Gross amount of \$

**OR**

An annual amount after-tax of \$

**Commencement date of Pension:**

**Payment Frequency**

Please select **ONE** of the following payment dates:

Monthly on the 20th day of each month

**OR**

Quarterly on the 15th day of September, December, March and June

**OR**

Half-yearly on 15th of December and June

**OR**

Annually in arrears on 15th day of month of

If you make your initial investment between 1 June and 30 June, do you wish to defer your first payment until the next financial year?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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### Investment Choice

Please indicate how you want your Pension Account is to be invested:

#### Investment of Pension Account

Cash	%
Capital Stable Fund	%
Balanced (MySuper) Fund*	%
Growth Fund	%
High Growth Fund	%

Total 100%

You can choose one option or a selection to suit your circumstances. Please ensure that your selection totals 100%.

\*The Balanced (MySuper) Option is the Default option. You may switch your Investment Choice, at any time, free of charge.

### Payment Instructions

Account Name			
Name and address of Institution			
Account number		Branch BSB number	

### Treatment of Pension on Death

Please tick one of the following options:

**Option One** – Paid as a lump sum to your nominated Dependents or to your estate. If you elect this option, you should complete a *Beneficiary Variation Form*.

**Option Two** – Paid as a Reversionary Pension to your spouse. If you elect this option, please provide the following information regarding your spouse:

Mr	Mrs	Miss	Ms	Other						
First given name							Sex	Male	Female	
Other given names							Date of Birth			
Family name										
Street no. and name										
Suburb/town				State			Postcode			

## Pension Application Form (continued)

### Type of Pension

I wish to establish:

- A Pension Account including provision for lump-sum withdrawals  
**(If applying for a Pension Account including lump sum withdrawals please sign the retirement declaration below)**

**OR**

- A Transition to Retirement Pension Account with no provision for commutation of Pension payments to lump sum payments.

**From 1 July 2017, investment earnings attributable to Transition to Retirement Pension Accounts will be taxed at 15% (i.e. investment earnings will no longer be exempt from tax).**

### Retirement Declaration

I hereby declare that I have retired from employment.

Signature

Date

### Providing identification

To protect your superannuation investment, legislation requires that certified copies of identification documents be provided when authorising the Transfer of Benefits.

I have included **a certified copy** of one of these documents (*tick one box*):

- Drivers Licence issued under State Territory Law; or  
 Passport

The following people can certify copies of the originals as true and correct copies:

- Accountant – member of a recognised professional accounting body or a registered tax agent
- Manager of a bank or credit union
- Barrister, solicitor or patent attorney
- Police officer
- Postal manager
- Principle of an Australian Secondary College, High School or Primary School
- A Justice of the Peace with a registration number

## Pension Application Form (continued)

### Application Declaration

I hereby apply to become a Pension Member of the Pitcher Retirement Plan. I have read and understood the Product Disclosure Statement for the Pitcher Retirement Plan.

- I agree to be bound by the provisions of the Trust Deed including any amendments;
- I agree to supply the Trustee with all information it requires for the management and administration of the Plan;
- I have read the Plan's Privacy Policy and agree that the Trustee may use my personal information for the purposes described and may retain my Tax File Number on file.

Signature

Date

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**Please print this form once completed, sign and forward to:**

Pitcher Retirement Plan  
GPO Box 5193  
MELBOURNE VIC 3001

Pitcher Retirement Plan Pty Ltd (ABN 77 092 941 574) as trustee for the Pitcher Retirement Plan (ABN 15 828 677 472) is registered with the Australian Prudential Regulation Authority. MySuper Authorisation 15 828 677 472 277.