Update account details

We can only accept your request if the form is correctly completed.
Please don't photocopy this form as it contains unique information to help us process your request quickly.

1. Your personal details

Account number

Customer number (if known)

Contact telephone (business hours)

Title

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

First name

Middle name

Family name

Date of birth (DD/MM/YYYY)

Email

2. Your changes

Please select and complete the sections where you want to add or make changes then sign **Section 10** to authorise the changes.

If you want to change your name, address or contact details, please use the **Update personal details** form on **mlc.com.au**

Super accounts

Regular investment	☐	**Complete Section 3**
Bank details	☐	**Complete Section 4**

Pension accounts

Payment details	☐	**Complete Section 5**
Bank details	☐	**Complete Section 6**

All accounts

Tax File Number (TFN)	☐	**Complete Section 7**
Authorised representative	☐	**Complete Section 8**
Client linking	☐	**Complete Section 9**

Full information on the services listed above is available in the **How to Guide** on **mlc.com.au**

NULIS Nominees (Australia) Limited
ABN 80 008 515 633
AFSL 236465

MLC Super Fund
ABN 70 732 426 024

3. Super regular investments

☐ Add a new regular investment ☐ Update details of your existing regular investment ☐ Cancel your regular investment

You can request more than one contribution type in the table below.

Contribution type	Amount $
Personal or Self employed[1]	
Employer contributions	
• Compulsory	
• Voluntary	
Salary Sacrifice	
Spouse	

1 If you intend to claim a tax deduction, please complete the **Notice of intent to claim or vary a deduction for super contributions** form on **mlc.com.au**. These contributions will be classified as non-concessional contributions until you send us a valid Notice of intent. To to check if you're eligible to claim a tax deduction on your super contributions, go to the ATO website at **ato.gov.au**

Start date (DD/MM/YYYY)

If you haven't given us a date, we'll use the next available date, following the receipt of your request.

End date (DD/MM/YYYY) If applicable

You only need to provide an end date if you want your investment to stop at a specified date.

If your request isn't processed in time to meet this date, we'll use the next available date for the frequency you have selected.

Frequency

Please indicate the preferred frequency of your regular investment. If this isn't specified, the **monthly** frequency will apply.

☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly ☐ Half yearly ☐ Yearly

If you want more than one regular investment, please fill in a separate form. You can't split a contribution type (eg personal) across two bank accounts.

Are you adding or changing the bank details for your regular investment?

No ☐ If you have no other changes, please go to **Section 10** to authorise your request.

Yes ☐ Please go to **Section 4**.

4. Super bank details

For additional one–off and regular investments

Name of bank

Name of account

BSB

Account number

Please specify the type of investment to be drawn from this account

☐ Regular investment

☐ Additional one–off investments

Direct Debit Request

I, being the holder of the account, request MLC Limited and/or NULIS Nominees (Australia) Limited to draw money from my account. I acknowledge this direct debit arrangement is governed by the Direct Debit Request Service Agreement set out at **mlc.com.au/ddrsa**. I consent to the agreement being made available at **mlc.com.au/ddrsa** as well as the terms of the agreement.

Signature of account holder

Must be signed by all account holders if different to signatory in Section 10.

✗ Date (DD/MM/YY)

✗ Date (DD/MM/YY)

If you have no other changes, please go to **Section 10** to authorise your request.

5. Pension payment details

Select yearly payment amount

Please choose the **annual amount** of income (gross of tax) you want to receive.

For information on the age-based minimum please refer to the **How to Guide** or PDS available on **mlc.com.au**

You can specify the annual amount you'd like paid; however, this must be within the required minimum and maximum (if applicable) limits.

Amount

☐ The minimum allowed amount

☐ The maximum allowed amount (applies to a TTR pension only)

☐ Specified **annual** amount $ pa

Date of next payment

(DD/MM/YYYY)

Frequency

Please choose the frequency for your income payments and we'll pro rata the annual payment amount in accordance with your selection.

☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly ☐ Half yearly ☐ Yearly

Indexation (available to MasterKey Pension Fundamentals accounts only)

If you'd like to increase your pension payment by a set percentage each year on 1 July, please choose from the amounts below.

Indexation only applies to specified amounts.

☐ 0% ☐ 1% ☐ 2% ☐ 3% ☐ 4% ☐ 5% ☐ 10%

Are you changing the bank details for your pension payment or changing the portion to be paid to your bank accounts?

☐ No If you have no other changes, please go to **Section 10** to authorise your request.

☐ Yes Please go to **Section 6**.

6. Pension bank account

The bank account can be in either your name or a joint account where you are an account holder.

Account one

What portion is to be paid to this account?

%

Name of bank

Name of account

BSB

–

Account number

Account two

What portion is to be paid to this account?

%

Name of bank

Name of account

BSB

–

Account number

If you have no other changes, please go to **Section 10** to authorise your request.

7. Tax File Number (TFN)

Tax File Number

You don't have to provide a TFN, however, if you don't:

- personal contributions will be rejected
- additional tax will apply to employer and salary sacrifice contributions
- any withdrawals will be taxed at the highest marginal tax rate inclusive of the Medicare levy.

Your TFN is confidential, and MLC is authorised by tax laws to collect your TFN. MLC may use your TFN only for lawful reasons, in paying out monies, identifying or combining superannuation benefits. Your TFN may be disclosed to the trustee of another Fund or RSA provider if your benefits are transferred, unless you request in writing for it not to be disclosed.

If you have no other changes please go to **Section 10** to authorise your request.

8. Authorised representative

☐ Add a new authorised representative ☐ Update your existing authorised representative's details ☐ Remove existing authorised representative

Your authorised representative's details

Title

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ______

Surname

Given name(s)

Date of birth (DD/MM/YYYY)

Mobile phone

Contact telephone (business hours)

Email

Address (we can't accept a PO Box)

Customer number (if existing customer)

Signature of authorised representative

✗

Date (DD/MM/YY)

What level of authority do you want your authorised representative to have on your account?

☐ My authorised representative can make **enquiries only** on my account

☐ My authorised representative can make **enquiries and transact** on my account

I understand the information on appointing an authorised representative as set out in the current **How to Guide** on **mlc.com.au**

I release, discharge and indemnify MLC from all losses, liabilities, actions, proceedings, claims and demands (including in relation to negligence) in respect of acts or omission of my/our authorised representative, whether authorised by me or not.

Signature of Investor

✗

Date (DD/MM/YY)

If you have no other changes, please go to **Section 10** to authorise your request.

9. Client linking

Please complete the following details if you want to link with one other investor with an eligible MLC MasterKey account, for the purpose of generating a fee refund into an eligible product.

Please see the relevant **How to Guide** on **mlc.com.au** for more information on eligible MLC MasterKey products.

Name of investor you'd like to link to

We may accept the nomination of a family trust, superannuation fund or business.

Customer number of nominated investor

Date of birth of nominated investor (if applicable) (DD/MM/YYYY)

Relationship to you

☐ Spouse ☐ De facto ☐ Parent ☐ Trust ☐ Child ☐ Sibling ☐ Business

Signature of person or representative of the business or trust nominated above.

✗ Date (DD/MM/YY)

Please go to **Section 10** to authorise your request.

10. Your agreement and declaration

Before making this change I have considered the information in the relevant Product Disclosure Statement and/or Annual Report about the investment options I have selected. I have also reviewed the information on the management of my account in the **How to Guide**. (These documents are available on **mlc.com.au**)

Please sign below to authorise us to process your request.

Signature of Investor or Power of Attorney

✗ Date (DD/MM/YY)

If signed under the Power of Attorney: Attorneys must attach a certified copy of the Power of Attorney if not already supplied. The Attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her Power of Attorney and is also authorised to sign this form.

Power of Attorney documents can't be accepted by fax.

11. Send us your form

Please mail your completed, signed and dated form to:

MLC
PO Box 200
North Sydney NSW 2059

If you have any questions, please speak with your financial adviser, call us on **132 652** Monday to Friday between 8.00 am and 6.00 pm (AEST/AEDT) or visit **mlc.com.au**

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