



# Rollover request

## MLC MasterKey Pension Fundamentals MLC MasterKey Term Allocated Pension

For **cash withdrawals and additional income payments**, please use the form available on **mlc.com.au**

We can only accept your request if the form is correctly completed.

We respect your privacy and handle your information in accordance with our privacy policy, available on **mlc.com.au**

\* **Mandatory fields.**

### 1. Your account details

Account number*	Customer number (if known)	Contact telephone* (business hours)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	Gender*	
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	
First name*	Middle name(s)	
<input type="text"/>	<input type="text"/>	
Family name*	Other/Previous names	
<input type="text"/>	<input type="text"/>	
Date of birth* (DD/MM/YYYY)	Email	
<input type="text"/>	<input type="text"/>	

### Residential address\* (your residential address can't be a PO Box)

Unit number	Street number	Street name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Suburb	State	Postcode	Country	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

### 2. Your tax file number (TFN)

Have you previously provided us with your TFN?

Yes  Please go to **Section 3**.

No  Please write your tax file number in the box provided below.

**Tax File Number (TFN)**

Under the Superannuation Industry (Supervision) Act 1993, your super fund is authorised to collect your TFN, which will only be used for lawful purposes. Your TFN will be used for identification purposes and will be disclosed to your other super provider, unless you request in writing that it is not disclosed. If we're unable to identify you we may request additional information.

Please go to **Section 3**.

### 3. Rollover including a UK transfer amount

Does your account contain a UK transfer amount?

No  Please go to **Section 4**.

Yes  Please complete the details below.

Is the fund to which you are rolling over a Qualified Recognised Overseas Pension Scheme (QROPS)?

No  Please go to **Section 4**.

Yes  Please provide the QROPS number

Please go to **Section 4**.

### 4. Rollover amount

How much of your investment do you want to rollover?

If your account includes MLC MasterKey Investment Protection, **please tick the box** to confirm you've checked your balance and understand that if you exceed the amount available for withdrawal, this will impact the protection on your account.

**Full rollover**  Please go to **Section 5**.

**Part rollover**  Please specify the amount required\*. \$

A part rollover will be taken out of the taxable and tax-free components in proportion to those components at the time of the rollover.

Please complete the **Investment options** details below.

#### Investment options

From which investment options do you wish to deduct your partial rollover?

Pro-rata across all investment options  Please go to **Section 5**.

From specific investment options  Please complete the table below.

Please note that if no selection is made, your withdrawal will be made pro rata across all investment options.

Please write the full name of the investment option

Percentage **OR** Amount

Please write the full name of the investment option	Percentage	<b>OR</b> Amount
	%	\$
	%	\$
	%	\$
	%	\$
	%	\$
	%	\$
	%	\$
	%	\$
	%	\$
	%	\$

Please go to **Section 5**.

## 5. Rollover fund details

Where is your rollover going?

If you have an MLC MasterKey Term Allocated Pension account, you can only rollover to another complying income stream.

- A Self Managed Super Fund  Please go to **Section 6**.  
Another rollover institution  Please complete **Rollover fund details** below.  
Another MLC account  Please enter your **MLC account** below.

MLC product name

MLC account number

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### Rollover fund details

Rollover payments can't be paid to you.

Fund name\*

### Rollover fund address

PO Box

Street number

Street name

Suburb

State

Postcode

Country

Account or policy number\*

Unique Superannuation Identifier (USI) (if known)

Super Fund Australian Business Number (ABN)\*

If you don't provide the receiving Fund's ABN, your claim may be delayed.

Please go to **Section 8** to authorise this transaction.

## 6. Rollover to a Self Managed Super Fund

The following conditions must be met for us to process your request. Please tick the boxes if you can confirm these conditions.

- The fund is registered as a complying Self Managed Super Fund.  
 You are a member, and either the director of a corporate trustee or an individual trustee of the Self Managed Super Fund where your benefit is being transferred.

Name of Self Managed Super Fund\*

Self Managed Super Fund – ABN\*

Fund telephone\*

### Your payment details

**Cheque**  We're required to mail your payment to the registered address of your Self Managed Super Fund (SMSF). If you want to check the registered address, you can go to [superfundlookup.gov.au](http://superfundlookup.gov.au).

**Bank payment**  Please complete the bank details below

Name of bank

Name of bank account: **We can only transfer to an account in the name of the Self Managed Super (SMSF).**

BSB

Account number

## 6. Rollover to a Self Managed Super Fund Continued

### Proof of identity

You'll need to provide us with proof of identity before we can process your rollover. Please see the list of identity documents in **Section 7**.

Your financial adviser can also identify you (see **Section 10**).

## 7. Proof of Identity – Self Managed Super Funds

Please attach **certified copies** of the identification documents from **List 1, 2 or 3** below.

For more information go to [mlc.com.au](http://mlc.com.au) for the **Proof of Identity guide** which includes a more detailed list of certifiers.

### List 1 – Acceptable primary Australian and foreign ID documents

Tick (✓)	<b>Provide ONE certified document from this list.</b> If you don't own a document from this list, you'll need to provide 2 documents from List 2 or 2 documents from List 3.
<input type="checkbox"/>	Australian State/Territory driver's licence containing a photograph of the person
<input type="checkbox"/>	Australian Passport (a passport that has expired within the preceding 2 years is acceptable)
<input type="checkbox"/>	Australian card issued under a State or Territory for the purpose of proving a person's age and containing a photograph of the person
<input type="checkbox"/>	Foreign passport or similar travel document containing a photograph and the signature of the person*

**OR**

### List 2 – Acceptable secondary Australian ID documents.

**Provide TWO documents from this section. One from Part A and one from Part B.**

Tick (✓)	<b>Part A – Provide ONE certified document from these options</b>
<input type="checkbox"/>	Australian birth certificate
<input type="checkbox"/>	Australian citizenship certificate
<input type="checkbox"/>	An Australian pension card, health care card or senior health care card issued by the Department of Human Services/ Centrelink or the Department of Veteran Affairs

**AND**

Tick (✓)	<b>Part B – Provide ONE certified document from these options</b>
<input type="checkbox"/>	A document issued by the Australian Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address
<input type="checkbox"/>	A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address
<input type="checkbox"/>	A document issued by an Australian local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address)
<input type="checkbox"/>	If under the age of 18, a notice that was issued to the individual by a school principal within the preceding 3 months and contains the name and residential address and records the period of time that the individual attended that school

**OR**

### List 3 – Acceptable secondary foreign ID documents

Tick (✓)	<b>Provide certified copies of BOTH documents listed below.</b>
<input type="checkbox"/>	Foreign driver's licence that contains a photograph of the person in whose name it is issued and the individual's date of birth*
<input type="checkbox"/>	Foreign national identity card issued by a foreign government containing a photograph of the person in whose name the card was issued*

\* Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

Please go to **Section 8** to authorise this transaction.

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## 8. Your agreement and declaration

I agree:

- if my completed request is received before 3.00 pm AEST/AEDT, it will usually be processed using the unit price for that business day (which is calculated at the end of the day)
- if my completed request is received after 3.00 pm AEST/AEDT, it will usually be treated as having been received the next business day
- where I have invested into an illiquid investment option, or an investment option I have has become illiquid, we may take longer than 30 days to transfer out of the investment option.


There are times when we might not be able to process your rollover instructions, for example when:

- there are liquidity issues in the investment
- the fund manager suspends transactions
- we can't obtain a price
- the instruction is incomplete, and
- unforeseen circumstances prevent us from using our administration systems.

Before requesting this rollover, I have considered the information in the relevant **Product Disclosure Statement** 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](http://mlc.com.au))

### Signature of Investor or Attorney

Name

	Date (DD/MM/YY)					

### NAB Term Deposits

I understand NAB Term Deposits are invested for a fixed term. Early access to part or all of my investment prior to maturity will:

- require 31 days notice, in addition to processing time, and
- potentially be subject to a reduced amount of interest to offset the costs to NAB of the early withdrawal.

Withdrawal requests that reduce the minimum of my other investment option(s) below 10% of my account balance may not be processed.

### UK pension transfers

I understand that if part of my benefit contains a UK transfer amount, there may be UK tax implications.

**If signed under 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 faxed.

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## 9. Send us your form

Please mail, fax or email your completed, signed and dated form to:

**NULIS Nominees (Australia) Limited**  
PO Box 200  
North Sydney NSW 2059

**Fax: 02 9964 3334**

**Email: [contactmlc@mlc.com.au](mailto:contactmlc@mlc.com.au)**

If you're providing identification documents, we'll need to receive an original or certified copy of original document(s) via mail. Identification documents sent to us via email or fax will not be accepted.

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](http://mlc.com.au)

