

# Condition of release

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

## 1. Your account 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

## Residential address (we can't accept a PO box)

Unit number

Street number

Street name

Suburb

State

Postcode

Country

## 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)

**You don't have to provide your TFN; however, if you quote your TFN your super fund can accept all permitted contributions for you, you won't pay more tax on super contributions and benefits than you need to, and it will be easier to find different super accounts in your name; if you don't quote your TFN, any withdrawals may 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 must use your TFN only for lawful reasons. Your TFN may be disclosed to the Trustee or another Fund or RSA provider if your benefits are transferred, unless you request in writing for it not to be disclosed.

Please go to **Section 3**.

NULIS Nominees (Australia) Limited  
ABN 80 008 515 633  
AFSL 23465

MLC Super Fund  
ABN 70 732 426 024

MLC Superannuation Fund  
ABN 40 022 701 955

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### 3. Your condition of release

Please choose the condition of release you have met. Meeting a condition of release means that your super or pre-retirement benefits will become unrestricted non-preserved and can be cashed at any time. For more information on what moving into retirement phase means for you please refer to the relevant Product Disclosure Statement or How to Guide.

- I have reached my preservation age\* and have permanently retired.
- I am aged 60 to 64 and have left the service of an employer since reaching the age of 60.

Date left employer was (DD/MM/YYYY)

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When you've reached age 65, you'll automatically meet a condition of release without you having to notify us.

If you have met another condition of release\*, such as permanent incapacity or terminal illness, please call us on **132 652** Monday to Friday between 8.00 am and 6.00 pm (AEST/AEDT) or visit **mlc.com.au**

\* For more information on the meaning of preservation age and about conditions of release, please call us or **visit ato.gov.au**

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### 4. Your agreement and declaration

Before completing this form I have also reviewed the information on the management of my account in the relevant Product Disclosure Statement or How to Guide. (These documents are available on [mlc.com.au](http://mlc.com.au))

Name of Investor or Attorney

Signature

	Date (DD/MM/YY)					
	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>					

**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 or emailed.

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### 5. Send us your form

For MLC Wrap and Navigator accounts, please mail your completed, signed and dated form (including Power of Attorney documents) to:

**MLC**  
**GPO Box 2567**  
**Melbourne VIC 3001**

For all other accounts, please mail your completed, signed and dated form (including Power of Attorney documents) 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**