



Change your account details

This form is for CSCri members only, not PSS or CSS.

Important information about this form

Use this form to change or correct your Commonwealth Superannuation Corporation retirement income (CSCri) account details including:

- your personal information or contact details (go to **Section B**)
- your bank, building society or credit union account where your income stream is paid (go to **Section C**)
- your income stream amount per payment (go to **Section D**)
- how often your income stream is paid — fortnightly, monthly, quarterly, half yearly or annually (go to **Section E**)
- your investment option selection (go to **Section F**)
- your payment order from your investment option selection (go to **Section G**)
- the status of your income stream (if you meet a condition of release)
- from a transition to retirement income stream to a standard retirement income stream (go to **Section H**).

If you wish to elect or change your beneficiaries, please use the Nominate your beneficiaries form.

How to complete this form

- Confirm your Member Number and personal information in **Section A**.
- Complete only the sections of this form relevant to the changes you wish to make.
- Sign and date the form in **Section I**.
- Certify and enclose personal documents if required with your completed form.

How to use this form

Please use CAPITAL LETTERS and a black or blue pen.

Mark boxes like this with a cross (X) then fill out the next question or section.



Any financial product advice in this document is general advice only and has been prepared without taking account of your personal objectives, financial situation or needs. Before acting on any such general advice, you should consider the appropriateness of the advice, having regard to your own objectives, financial situation and needs. You may wish to consult a licensed financial adviser. You should obtain a copy of the CSCri Product Disclosure Statement (PDS) and consider its contents before making any decision regarding your super.

Commonwealth Superannuation Corporation (CSC) ABN: 48 882 817 243 AFSL: 238069 RSEL: L0001397 | Commonwealth Superannuation Corporation retirement income (CSCri) is offered by CSC, the trustee of the Public Sector Superannuation accumulation plan (PSSap) ABN: 65 127 917 725 RSE: R1004601

Submitting your form

Send your completed form to us at:

CSCri
GPO Box 2252
Canberra ACT 2601

or email us to lodge the application form:

formsandapplications.cscri@contact.csc.gov.au

Your privacy is important to us

We're committed to protecting your privacy. We collect your personal information for the purposes of providing superannuation services to you, improve our products and to keep you informed. We will only share your personal information where necessary for providing superannuation services to you. This may include disclosing your personal information to our scheme administrator, service providers or government or regulatory bodies.

Your personal information may be accessed overseas by our service providers. Please see our privacy policy for full details. Your personal information will not be otherwise used or disclosed unless required or permitted under law. A full copy of our privacy policy as well as the privacy complaint process is available at csc.gov.au/privacy

You can also update your personal or payment details securely online via the CSC Navigator section of the website csc.gov.au



Change your account details

A Your personal details

Note: Before we can update your details, you are required to provide 4 Points of Identification. This helps us verify your identity and keep your account secure.

Member number

Personal information (as currently displayed on your CSCri account)

Title Mr Mrs Ms Miss Other

Surname

Given name(s)

Date of birth / /

Email on file

Residential address on file

Suburb/town State Postcode

B Change your personal information or contact details

Please only complete those details you wish to change on your account.

Your **NEW** name

Title Mr Mrs Ms Miss Other

Surname

Given name(s)

To change the name on your CSCri account, we must receive a certified copy of **ONE** of the following documents:

- Marriage certificate
- Birth certificate if you are using your maiden name (**Note:** If reverting to maiden name we also need a copy of marriage cert to show link in names i.e. from Beveridge to Perrow)
- Change of name certificate if you changed your name by deed poll.
- Guidance on certifying personal documents is provided at the end of this form.

Your **NEW** residential address

Suburb/town State Postcode



[Continued on next page](#)

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E Change how often your income stream is paid

I want to be paid my income payment:

Fortnightly
 Monthly
 Quarterly
 Half yearly
 Annually

Pay my next income stream payment in the month of:

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

Note: Fortnightly payments are generally paid to your bank account every second Thursday (subject to how long your bank takes to process the payment). Monthly, quarterly, half yearly or annual payment frequency payments are paid regularly to your bank account, generally on the 21st day of the month. If the 21st day of the month is a weekend or public holiday, your payment will generally be made on last business day that precedes the 21st day of the month.

F Change your investment option or mix options

How do you want your account invested?

Please invest my account balance in the following option or mix of options:

| | | | | | | |
|----------------|--|---|---|-------|--|---|
| Cash | <input type="text"/> <input type="text"/> <input type="text"/> | % | } | TOTAL | <input type="text"/> <input type="text"/> <input type="text"/> | % |
| Income Focused | <input type="text"/> <input type="text"/> <input type="text"/> | % | | | | |
| Balanced | <input type="text"/> <input type="text"/> <input type="text"/> | % | | | | |
| Aggressive | <input type="text"/> <input type="text"/> <input type="text"/> | % | | | | |

Ensure your total percentage equals 100% and your selection is in whole percentages only.

Note: If you changed your investment option selection to two or more options, please also reconfirm or change your income stream payment order method in **Section G** below. If you elect not to complete **Section G**, your income stream payments will draw down via method one — the pro-rata method (explained in **Section G**).

If your investment option change request is received by us within two business days of the 21st of the month, your change will take effect after that month's CSCri income payments are completed. Please note, any switch request received within two business days of your fortnightly payment date or the 21st of the month (or earlier business day if the 21st falls on a weekend or public holiday) will not be processed prior to your payment date and will be taken to have been received after the payment date.

G Change your income stream payment order method

Complete this section if you are currently invested in two or more investment options, or you elected to change to two or more investment options in **Section F** above.

Select **one** method only.

Please pay my income stream using my selected income stream payment method:

| <input type="checkbox"/> Pro-rata method (default) | <input type="checkbox"/> Proportional method | <input type="checkbox"/> Priority method |
|---|--|---|
| Elect your income stream payments to be withdrawn from your current investment option selection, or those options you selected in Section F , in proportion to the balance in each option at the time of the withdrawal. | Specify (below) the proportion to be withdrawn from your current investment options, or those options you selected in Section F . | Specify (below) the order of investment options from which your payments are to be withdrawn from your current investment option selection or those options you selected in Section F . Please number options below in descending order of priority (for example, the highest priority option will be labelled 1). |
| | Cash <input type="text"/> <input type="text"/> <input type="text"/> % | <input type="checkbox"/> Cash |
| | Income Focused <input type="text"/> <input type="text"/> <input type="text"/> % | <input type="checkbox"/> Income Focused |
| | Balanced <input type="text"/> <input type="text"/> <input type="text"/> % | <input type="checkbox"/> Balanced |
| | Aggressive <input type="text"/> <input type="text"/> <input type="text"/> % | <input type="checkbox"/> Aggressive |
| | Total <input type="text"/> <input type="text"/> <input type="text"/> % | |

H Change to standard retirement income stream

Complete this section only if you are a current transition to retirement income stream member who wishes to change the status of your income stream to a standard retirement income stream. To qualify, you must meet **ONE** condition of release in the list below. Please select which condition you meet.

Note: As a current transition to retirement income stream member, restrictions are placed on your ability to access amounts in your CSCri account. However, if you satisfy one of the conditions of release below you can change the status of your transition to retirement income stream to a standard retirement income stream, which means that you will no longer be subject to maximum withdrawal amounts each year (although minimum withdrawal amounts will continue to apply).

For more information on a standard retirement income stream, please refer to your **CSCri Product Disclosure Statement**, which is available at csc.gov.au

I satisfy the following condition of release (please tick **ONE** box):

- I have reached my preservation age, ceased working and do not intend to work for more than 10 hours a week in the future (permanently retired)
- I have reached age 60 and changed my employment arrangements

I Declaration

I,
Surname

Given name(s)

declare that the information I have provided on this form is complete and correct.



Signature

Date signed
D D / M M / Y Y Y Y
 / /

Certifying your documents

The following people can certify your documents:

- a legal practitioner enrolled on the roll of a supreme court or the high court of Australia
- a judge or magistrate of a court
- a chief executive officer of a Commonwealth court
- a registrar or deputy registrar of a court
- a Justice of the Peace (JP)
- a notary public
- a police officer
- an Australian consular officer or an Australian diplomatic officer
- an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- a finance company officer with five or more years of continuous service
- a member of the Institute of Chartered Accountants in Australia (ICAA), Certified Practising Accountants (CPA Australia) or the Institute of Public Accountants (IPA).

For a full list of certifying authorities, refer to Schedule 2 of the *Statutory Declarations Regulations 2018* available at legislation.gov.au or contact us if you require further information. The certifying authority must confirm in writing that you are the valid holder of the identification that you are presenting and that any copies are true copies of the original.

Important: The certification must include the signature, name, address, occupation, telephone number and registration number (if applicable) of the certifying authority.



Lodge application

Email your completed application form, together with any certified copies of your personal documentation that are required to members. formsandapplications.cscri@contact.csc.gov.au or post it to: **CSCri, GPO Box 2252, Canberra ACT 2601**



For more information visit csc.gov.au

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