



Transfer your super to PSSap

Use this form to transfer super from another fund into your PSSap account.

- You need to be an eligible member to transfer super into PSSap.
- Before making any decisions, please read the **PSSap Product Disclosure Statement (PDS)** available at csc.gov.au
- If you need assistance, please call **1300 725 171**.

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/Members/Privacy-policy/

Consolidate online

Did you know that you can search for lost super and super held with other funds using our Super Finder tool? The tool allows you to view your super and consolidate into PSSap with just a few clicks!

Available at csc.gov.au



Public Sector
Superannuation
accumulation plan

A

Provide your personal details

PSSap member number

Title Mr Mrs Ms Miss Other

Surname

Given name(s)

Date of birth / /

Residential address

Postal address

Phone

Email

Your Tax File Number (TFN)

I have already provided my TFN to PSSap. You can check this by logging into **PSSap Member Online** or under the Your details section of your **Member Statement**

PSSap is authorised to collect and validate your TFN under the *Superannuation Industry (Supervision) Act 1993*. To improve the electronic transfer of funds between superannuation providers, your TFN is required to be validated with the Australian Taxation Office (ATO).

B

Transfer details

Super fund name	Member number	Fund's USI/ESA*	Amount to transfer (tick one only)
			<input type="checkbox"/> Whole balance (default) <input type="checkbox"/> Partial amount of \$
			<input type="checkbox"/> Whole balance (default) <input type="checkbox"/> Partial amount of \$
			<input type="checkbox"/> Whole balance (default) <input type="checkbox"/> Partial amount of \$
			<input type="checkbox"/> Whole balance (default) <input type="checkbox"/> Partial amount of \$

* USI = Unique Superannuation Identifier

* ESA = Electronic Service Address - applicable to Self Managed Super Funds (SMSF) only

C Authorisation

By signing this request form I am making the following statements:

- I request and consent to the transfer of superannuation as described in this form
- the information I have provided on this form is true and correct
- I am aware I may ask my superannuation provider for information about any fees or charges that may apply, or any other information about the effect this transfer may have on my benefits, including insurance cover, and have obtained or do not require such information
- I have read the **PSSap Product Disclosure Statement (PDS)**, and this application is made subject to the terms and conditions of that information
- I consent to my Tax File Number being disclosed for authorised purposes
- I am aware and agree that my transfer amount will be invested in line with my existing investment strategy or, if I have not made an investment choice, in the PSSap default investment option called MySuper Balanced
- once my benefits have been transferred from the fund named on this form, the Trustee of that fund is discharged from any further liability for the amount transferred
- I am aware that personal information I or a third party provide, such as my employer, is collected, held, used and disclosed as required or authorised by law in accordance with the privacy policies and notice, available via csc.gov.au or by contacting us on **1300 725 171**, for the purpose of managing my super. This includes the management of superannuation investments, providing me with superannuation products and information, the administration of my account, conducting market research and product development. The privacy policies and notice contain important information about how personal information is handled, including rights to access and update that information and how a complaint about a breach of privacy can be made.



Sign

SIGNATURE	

Date signed

D	D	/	M	M	/	Y	Y	Y	Y

Please send this form to:

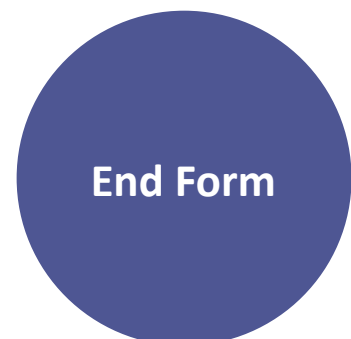
PSSap
Locked Bag 20117
Melbourne VIC 3001

or email to:

formsandapplications@pssap.com.au

How do I get more information?

EMAIL members@pssap.com.au
PHONE 1300 725 171
FAX 1300 364 144
MAIL PSSap
Locked Bag 20117
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