



# Invalidity pensioner employment and personal earnings Declaration

1. Explanatory notes
2. Form

## Important information about this form

You should use this form if you are a Public Sector Superannuation Scheme (PSS) invalidity pensioner **under the age of 60**, and your employment status and personal earnings have changed. This is because we are required to review the rate of your pension taking into account your personal earnings (which reduces the possibility of you receiving an overpayment that would need to be repaid to PSS).

## How to use this form

Please use CAPITAL LETTERS and a black or blue pen.

Mark boxes like this ☐ with a ✓ or ✗ then fill out the next question or section.

## Submitting your form

Please return your completed form to:

**Post:** Casework Services  
PSS  
GPO Box 2252  
Canberra ACT 2601  
AUSTRALIA

**Email:** [pensions.technical@csc.gov.au](mailto:pensions.technical@csc.gov.au)



Public Sector  
Superannuation  
Scheme

# 1. Explanatory notes start

If you don't notify us or provide incorrect information about your employment status and personal earnings while employed, and you don't have a reasonable excuse for not notifying us, your pension may be suspended or cancelled.

Your invalidity pension is typically paid for life, however, there are some exceptions:

- Your invalidity pension will be **cancelled** if you are permanently re-employed in the Australian Public Service (APS) on an ongoing basis at any age. You must advise us that you have been permanently re-employed and you must tell your new employer that you are in receipt of an invalidity pension. If you don't do this immediately upon commencement, you may accrue an overpayment which you will have to repay.
- Your invalidity pension will be **adjusted** or **suspended** according to the amount you earn if you rejoin the APS on a non-ongoing (temporary) contract. You're obliged by law to advise us of any personal earnings in the APS.
- Your invalidity pension will be **adjusted** or **suspended** according to the amount you earn (ie your personal earnings) if you become employed by **local** or **state government**, or in the **private sector (including self-employed)**.

## Definition of personal earnings

**Personal earnings** means salary, wages, fees or other amounts received by you for services rendered or work performed by you, including:

- remuneration paid as the director of a company
- commission received for canvassing, collecting or similar activities.

### Notes:

1. **Changed circumstances:** If you provide details of your personal earnings for the next 12 months and your circumstances change, you are required to again complete this form with revised details of your estimated personal earnings.
2. **Penalties:** There can be penalties (including criminal sanctions) for the failure to provide correct information without reasonable excuse.

End of  
explanatory  
notes



# Invalidity pensioner employment and personal earnings Declaration

## 2. Form start

Read the Explanatory notes and each section of the form carefully before filling it in.

A

### Personal details

Reference number (AGS)

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Salutation

☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other 

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Surname

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Given name(s)


Date of birth

D	D
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 / 

M	M
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 / 

Y	Y	Y	Y
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Address


**SUBURB**

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**STATE**

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**POSTCODE**

--	--	--	--	--	--

Phone

**BUSINESS HOURS**

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**MOBILE NUMBER**

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Public Sector  
Superannuation  
Scheme

➔ Section A continued on next page

[illegible]

Y	Y	Y	Y

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I am currently employed and/or in receipt of personal earnings (including self employment)

☐ Yes – go to **Section C**

☐ No – go to **Section D**

## Date employment commenced

D	D	M	M	Y	Y	Y	Y

**Note:** If you do not know the precise date, provide as much information as you can.

[illegible]

Nature of employment  
(you may complete more  
than one box)

☐ Ongoing (permanent)

☐ Part-time

☐ Non-ongoing (temporary or casual)

Name of employer  
(or your self employment  
details)

[illegible]

### Employer contact details

## BUSINESS HOURS

[illegible]**FAX**

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EMAIL

[illegible]

From

$\begin{array}{|c|c|} \hline D & D \\ \hline \end{array} / \begin{array}{|c|c|} \hline M & M \\ \hline \end{array} / \begin{array}{|c|c|c|c|} \hline Y & Y & Y & Y \\ \hline \end{array}$

to

$\begin{array}{|c|c|} \hline D & D \\ \hline \end{array} / \begin{array}{|c|c|} \hline M & M \\ \hline \end{array} / \begin{array}{|c|c|c|c|} \hline Y & Y & Y & Y \\ \hline \end{array}$

Normal fortnightly earnings  
**before tax**  
(gross per fortnight)

[illegible]

If you expect your personal earnings to fluctuate considerably throughout the year, include an estimate of the average amount (attach a separate letter if there is not sufficient space here for you to provide additional information).

Estimate of earnings **before tax** for the next 12 months (gross per annum)

\$ \_\_\_\_\_

If this amount is not your normal fortnightly earnings multiplied by 26 fortnights, please explain the basis of your estimate, including any periods when your fortnightly earnings will be higher or lower than normal, eg because of unpaid leave.

[illegible]

I am providing additional documents

- ☐ Yes  
☐ No

# D Centrelink/Department of Human Services (DHS) Disability Support Pension (DSP)

Are you in receipt of a Centrelink/DHS Disability Support Pension (DSP)?

- ☐ Yes  
☐ No – go to **Section E**

What is your Centrelink/DHS reference number?

				-					-					-	
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In what year did your DSP start?

Y	Y	Y	Y

If you are unable to answer the two questions above, write 'unknown'.

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- ☐ I authorise Commonwealth Superannuation Corporation (CSC) and PSS to contact Centrelink and/or DHS to obtain more information about my DSP, if necessary.

After each financial year we notify Centrelink and/or DHS of the invalidity pension amount paid to you during the financial year. This may affect your DSP entitlement. Please contact Centrelink or DHS for more information.

## E Declaration

I declare that:

- to the best of my knowledge the above statement together with any additional information, including attachments, is true and correct
- I acknowledge that a failure to provide correct information without reasonable excuse may result in the suspension or cancellation of my PSS invalidity pension
- I acknowledge that a deliberate failure to provide correct information without reasonable excuse may result in criminal sanctions, for example under the *Crimes Act (Cth) 1914*.

 **Sign**

SIGNATURE

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Date signed

D	D	/	M	M	/	Y	Y	Y	Y

**You have now completed this form.**

Please return your completed form to:

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Canberra ACT 2601  
AUSTRALIA

**Email:** [pensions.technical@csc.gov.au](mailto:pensions.technical@csc.gov.au)

**End Form**



**Need assistance?  
Call us on the phone  
numbers below**



**Email**  
[pensions.technical@csc.gov.au](mailto:pensions.technical@csc.gov.au)



**Phone**  
1300 000 377



**Financial Advice**  
1300 277 777



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Canberra ACT 2601



**Web**  
[csc.gov.au](http://csc.gov.au)



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