



Early access – specified compassionate grounds

Benefit application form and information

Things you need to note:

Before you complete this form please read the **Product Disclosure Statement (PDS)** for your scheme and the **Early access to your super benefits** factsheet.

You will need to contact the **Australian Taxation Office (ATO)** for an approval letter to authorise the release of monies on specified compassionate grounds. For more information about approval for early access on these grounds, refer to the ATO website at <u>ato.gov.au</u>

Accessing your super early may significantly impact your eligibility for further benefits including a pension and retrospective invalidity (where these options are available).

Who should use this form

Use this application if you are an 'eligible member' and the ATO has approved an early release of benefits on compassionate grounds.

You will need to provide a copy of the ATO's approval* letter with this completed form.

Note: Any release of benefits must also be in accordance with scheme rules. We can only release the full amount approved by the ATO if there is enough equity in your account that can be released.

Who is an eligible member?

An 'eligible member' is a contributing, preserved, or associate member of a CSC scheme, excluding:

- Pensioners
- CSS Associate members
- DFRDB members (unless you have a MilitarySuper Ancillary Account)

• MilitarySuper members who have reached age 60.

Note: MilitarySuper contributing members, as well as members aged 55 to 59, are only eligible to access their Ancillary Benefit.

What you need to provide with your application

For your application to be processed, Commonwealth Superannuation Corporation (CSC) requires:

- this form to be fully completed; and
- a copy of your ATO approval letter to be attached, which will authorise the release of monies on specified compassionate ground; and
- that your identity is verified (refer to Identification requirements on page 4).

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

Any financial produ advice, you should relation to a schem Commonwealth Sug

> Defence Force Retirement and Death Benefits Scheme ARN: 39 798 362 763

ustralian Defence orce Superannuation BN: 90 302 247 344 SE: R1077063

Commonwealth Superannuation Schem ABN: 19 415 776 361 RSE: R1004649

Public Sector ne Superannuation accumulation plan ABN: 65 127 917 72 Military Superannuatio and Benefits Scheme ABN: 50 925 523 120 RSE: R1000306 alian Defence Cover 54 250 674 722 c Sector rannuation Scheme 74 172 177 893

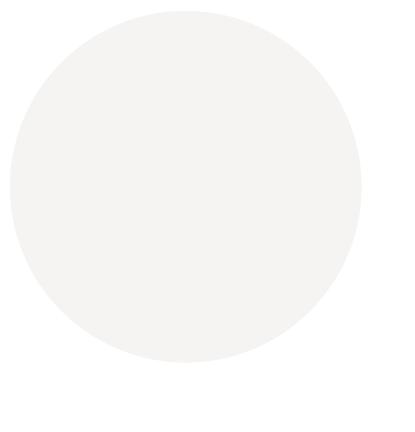
22 Scheme RB Scheme G Scheme SPB

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This form is for...

CSS, PSS, MilitarySuper, ADF Super and PSSap members. If you have any questions regarding this form please refer to the contact details on the last page.

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Australian Government Commonwealth Superannuation Corporation





Early access – specified compassionate grounds Form start



Your details

Please complete all fields in this section.

A contact phone number and email address is requested in case we need to contact you about your application. Supplying these details may help avoid delays in processing.

Which scheme are you applying for a release from?	Tick your super fund	Send your completed form to the below email or postal address
	PSSap	formsandapplications@pssap.com.au
	— .	or
		PSSap
		Locked Bag 20117
		Melbourne VIC 3001
	ADF Super	formsandapplications@adfsuper.gov.au
		or
		ADF Super
		Locked Bag 20116
		Melbourne VIC 3001
	CSS	formsandapplications@csc.gov.au
		or
		GPO Box 2252
		Canberra ACT 2601
	PSS	formsandapplications@csc.gov.au
		or
		GPO Box 2252
		Canberra ACT 2601
	MilitarySuper	formsandapplications@csc.gov.au
	/ 1	or
		GPO Box 2252
		Canberra ACT 2601



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an Defence over 250 674 722 ublic Sector uperannuation Scher BN: 74 172 177 893

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Reference number																							
Title		Mr			N	1rs			Ms				Viss			Ot	ther						
Surname																							
Given name(s)																							
Date of birth	D	D	/	М	м	/	Y	Y	Y	Y													
Residential address																							
	Subur	b														State				Postco	de		
Postal address (leave blank if same as																							
residential address)																							
	Subur	b														State				Postco	ode		
Phone	Busin	ess ho	urs										After	hours									
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- we will be able to accept all permitted types of contributions to your account/s;
 other than the tax that may ordinarily apply, you will not pay more tax than you need to-this affects both contributions to your superannuation and benefit payments when you start drawing down your superannuation benefits; and
- it will make it much easier to find different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

ATO Release

Application for early access to superannuation benefit on specified compassionate grounds

Please complete all fields and enclose a copy of the ATO letter with your application.

hereby apply for part of my superannuation benefit amounting to the sum of * \$	I,																									
hereby apply for part of my superannuation benefit amounting to the sum of * \$																										
	hereb	oy al	oply	for	part	ofn	ny si	uper	ann	uatio	on b	enef	fit a	mou	ntin	g to	the	sum	of*	:	\$					

I have enclosed the written determination by ATO that I have satisfied the condition of release of my superannuation benefit on specified compassionate grounds.

Bank details



Note: We can only pay your benefit into an Australian account held in your name. If it's a joint account, one of the names listed must be yours.

Name of institution												
Name of account holder												
Branch location												
Branch (BSB) number		-										
Account Number												

Note: If the BSB number or account number you have provided is incorrect, the payment will not be accepted by your financial institution.

D

Identification requirements

To confirm your identity, we require some information from you—this is to protect your benefit against fraud, money laundering and terrorism financing, under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*. CSC may request additional identification documents for verification purposes, where required.

Verifying your documents

Identifying documents may be verified through the Document Verification Service (DVS). DVS is a national online system that allows approved government agencies and organisations to compare a member's identifying information with a government record. It is not a database and does not store any personal information. Requests to verify a document are encrypted and sent via a secure communications pathway to the document issuing authority for checking.

DVS is only compatible with some identification documents, these have been listed below.

If you don't provide authorisation to have documents verified electronically or your documents are incompatible with DVS, you will need to provide certified copies of required documents. Please also refer to the section Certifying your documents.

An electronic copy of your identification documents will be stored in a secure environment and hard copies will be securely stored off-site. All copies will only be used for the purpose of confirming your identity. You need to send in identification with every application.

Certifying your documents

If you're providing certified documents, the certifying authority must confirm in writing you are the valid holder of the identification you are presenting, and any copies are true copies of the original.



IMPORTANT: The certification must include the name, signature, qualification and registration number of the certifying authority (if applicable), and the date of the certification.

The following sample of certifying authorities can certify your documents in Australia: • Dentist

- Employee of a Commonwealth authority engaged on a permanent basis with five or more years of continuous service who is not specified elsewhere in this document
- Financial Adviser or Financial Planner
- Justice of the Peace (JP)
- Legal Practitioner
- Medical Practitioner
- Member of the Australian Defence Force who is:
- an Officer; or
- a Non-Commissioned Officer within the meaning of the *Defence Force Discipline Act 1982* with five or more years of continuous service; or
- a Warrant Officer within the meaning of that Act.
- Midwife
- Notary Public
- Nurse
- Occupational therapist
- Physiotherapist
- Psychologist.

For a full list of certifying authorities refer to Schedule 1 of the Statutory Declarations Regulations 2023 available at legislation.gov.au/F2023L01753/

Note: We require a copy of both sides of your identification document.

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How can I meet the identification requirements?

You only need to provide **one** document from the **Primary photographic identification** category. If you can't provide any **Primary photographic identification** you will need to provide **one** secondary identification document from List A AND **one** secondary identification document from List B. We can only accept documents that are listed below for identification purposes.

If the name we hold on file for you is different to the name on your identification, or two pieces of identification are in different names, please provide a certified copy of your **Marriage** or **Change** of Name certification.

25.	

*

If you would like us to use DVS to verify your identification, please check both boxes below.

I confirm that I am authorised to provide the personal details presented and I consent to the information being checked with the document issuer or official record holder via third party systems for the purposes of confirming my identity.

I have attached identification for DVS verification.

You must provide a copy* of one of the following:

Primary photographic identification

DVS compatibility is shown as 🗸 or 😢

- A current Australian Driver's Licence (front and back of licence must be provided).
- A current Australian Passport (or one which has expired within the last two years).
- A current Australian Proof of Age card (issued under a State or Territory law).

Secondary identification requirements

Only provide these documents if you're unable to provide **one** of the **Primary photographic identification** documents.

List A

Your Australian Birth Certificate or extract issued by a State or Territory.
Please note: Birth Certificate extracts and Birth Certificates issued before 1970 may not be verified by DVS.

Your Citizenship Certificate issued by the Commonwealth.

Your current Pensioner Concession Card issued by the Department of Human Services.

List B

Your notice issued by the Australian Taxation Office (ATO) within the last 12 months that shows your name, current residential address, and records an amount payable either to or from the ATO.

Your notice issued by a local council or utilities provider in the last three months showing the provision of services and current residential address. For example: rates notice, electricity or water bill.

Your notice issued by the Commonwealth or a State or Territory government within the last 12 months showing your name and current residential address, and the provision of a financial benefit. **For example:** a Centrelink letter.

Members residing overseas

If you live overseas and provided an overseas bank account, you need to meet 100 points of identification requirement and need to have documents certified, it needs to be done by a person in a foreign country who is authorised by law in that jurisdiction to administer oaths or affirmations or to authenticate documents. For more information refer to **ag.gov.au** and **dfat.gov.au**. Documents provided in a foreign language must be accompanied by a certified translation completed by an accredited translator.

Please contact us as we require further documents.

*Don't send original documents.

If your documents are

incompatible with DVS,

don't forget to provide certified copies.

Declare and sign this form

I declare that:

- the information I have provided is true and correct to the best of my knowledge;
- I acknowledge it may be a criminal offence to knowingly provide false or misleading information or documents;
- I have read the relevant PDS for my scheme and I understand the options available for my retirement;
- I understand the consequences of approval of my request, including potentially foregoing a pension option or retrospective invalidity consideration in the future
- I understand that supplying my TFN is optional and that if I have not provided my TFN, tax will be deducted at the highest marginal tax rate (plus Medicare levy); and
- the TFN I have provided is the same number advised to me by the ATO.

I understand that if I have not provided all the required information, this application may be returned to me for completion and payment will be delayed.

Your name	Full name														
		_													
Circu	Signature Date signed														
Sign		Y													



- I have read all the information in this form, the PDS and Early access to your super benefits factsheet, and any other information I require to make an informed decision.
- I have attached a copy of my ATO release letter.
- I have included my bank account details at Section C.
- I have attached certified copies of documents to prove my identity, or I have completed Section D and agreed to have my documents verified electronically.

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

How can I get more information?

CSS Commonwealth Superannuation Scheme	Public Sector Superannuation Scheme	n Public Sector Superannuation accumulation plan
EMAIL members@css.gov.au PHONE 1300 000 277 FAX (02) 6275 7010 MAIL CSS GPO Box 2252, Canberra ACT 2601 WEB csc.gov.au	EMAIL members@pss.gov.au PHONE 1300 000 377 FAX (02) 6275 7010 MAIL PSS GPO Box 2252, Canberra ACT 2601 WEB csc.gov.au	EMAILmembers@pssap.com.auPHONE1300 725 171FAX1300 364 144MAILPSSapLocked Bag 20117Melbourne VIC 3001WEBcsc.gov.au
ADF Super Super Australian Defence Force Superannuation	Military Super Superannuation Benefits Scheme	
EMAILmembers@adfsuper.gov.auPHONE1300 203 439FAX1300 204 314MAILADF SuperLocked Bag 20116Melbourne VIC 3001	EMAILmembers@enq.militarysupPHONE1300 006 727FAX(02) 6275 7010MAILMilitarySuperGPO Box 2252Canberra Act 2601	per.gov.au
WEB csc.gov.au	WEB csc.gov.au	

