



Deferred benefit continuing with same employer (transition to retirement)

Benefit application

1. Explanatory notes
2. Form

Important information about this form

Before you complete this benefit application form, please read the **CSS Product Disclosure Statement (PDS)**. This form and the **Explanatory notes** are for CSS members who wish to claim their deferred benefit and are continuing employment with the same employer to which their CSS membership relates (ie the same employer you were with when you deferred your benefit).

What we need from you

To help us process your benefit claim quickly, make sure you:

- fully understand your benefit entitlements
- complete the form fully and accurately
- send the completed form to us at the address shown on page 13; if you'd like to confirm that we have received your application, call **1300 000 277**
- after we have paid your benefit, it is very important that you tell us if you change your postal address or bank account details; this allows us to send you information each year about your benefit, and make payments to the correct account.

Please note that once you lodge an application for a deferred benefit, you can't change your claim date or withdraw your claim.

What you can expect from us

- After we receive your application form, we will check that it's complete and correct.
- We will contact you if there are any issues.
- Once your benefit has been processed, we will send you a letter with the details of your entitlement.

Where can I find out more about my benefit entitlements?

- Visit our website at csc.gov.au
- See our **CSS transition to retirement** factsheet.
- Get a benefit estimate by contacting us or using **Member Services Online**.
- Contact us at the details shown at the end of this form.
- Obtain personal financial advice for your needs and goals (see overleaf).

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 post your completed, signed application form and attached documents to:

CSS
GPO Box 2252
Canberra ACT 2601
AUSTRALIA



Commonwealth
Superannuation
Scheme

1. Explanatory notes start

Financial advice for your needs and goals

Obtaining professional advice from an experienced financial planner can help you reach your financial goals.

CSC's authorised financial planners provide 'fee for service' advice, which means you receive a fixed quote upfront. There are no obligations, commissions or hidden fees.

To arrange an initial advice appointment please call **1300 277 777** during business hours.

Preservation age restrictions

Because you are continuing employment with the same employer, you cannot claim your deferred benefit until you reach your preservation age.

Your preservation age is based on your date of birth as follows:

Date of Birth	Preservation age
Before 1/7/1960	55 years
1/7/1960 – 30/6/1961	56 years
1/7/1961 – 30/6/1962	57 years
1/7/1962 – 30/6/1963	58 years
1/7/1963 – 30/6/1964	59 years
After 1/7/1964	60 years

Lump sum payments have conditions

If you want to take any part of your benefit as a lump sum, you cannot take it as cash in hand. Instead, you must roll it over to a complying fund or retirement savings account (RSA).

Section B – Identification requirements

To guard against fraud, money laundering, terrorism financing, you need to provide us with information to verify your identity before your request can be processed. The identification documents you send us will be verified electronically using a Document Verification System, or you can provide certified copies of your documents with your application. If you supply certified documents, the person certifying them must attest that the documents are true copies, and that you are the valid holder of the identification. Copies of your documents will be scanned and stored on our secure document management system.

Section C – Employment status declaration

You must confirm that you are still employed with the same employer who contributed to your account when you were a contributing member.

If your employment situation has changed, this may not be the correct form to complete.

Note: Giving false or misleading information is a serious offence.

Section D – Claim date

You must supply a claim date when completing your benefit application form. If you do not nominate a date we will return your form to you. Your claim date is important, as it's the day before your pension starts.

Because you are continuing in employment with the same employer, the date you nominate must be a date on or after you reach your preservation age (refer to **Preservation age restrictions** above).

You can't nominate a claim date that is earlier than the date on which you are completing the benefit application form. Also, once you lodge your application, you can't change your claim date or withdraw your claim.

Please note: Interest on CSS deferred benefits is generally calculated up to the date your application is processed, not your claim date or the date you complete this application. CSS fund earnings can be positive or negative. You should keep this in mind when planning your retirement.



Notes continued on next page

Section E – Benefit options

Option 1 – Maximum pension

This option gives you a standard CPI-indexed pension together with an additional non-indexed pension funded by your member and productivity components.

Option 2 – Maximum pension, lump sum of productivity

This option gives you a standard CPI-indexed pension, an additional non-indexed pension funded by your member component and a lump sum of your productivity component, which must be rolled over to a regulated superannuation fund.

Option 3 – Standard pension, lump sum of member and productivity

This option gives you a standard CPI-indexed pension plus a lump sum of your member and productivity components, which must be rolled over to a regulated superannuation fund.

Option 4 – Full lump sum

This option is only available if you are a former provident account member and have reached age 60. This option gives you a lump sum (subject to cashing restrictions) based on three times your accumulated basic contributions and fund earnings, plus any supplementary contributions and your productivity component.

You must rollover your entire lump sum to a regulated superannuation fund.

Section F – Your pension payment

Account details

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

Election for reduced initial pension benefit in return for increased spouse's and/or children's pension benefit

If you tick yes we will reduce your pension to 93% of your full pension amount. In return, your eligible spouse will be entitled to 85% of your pension benefit.

Benefits to eligible children or orphans also increase under this option.

If you tick no, should a spouse's pension become payable, your spouse will be entitled to 67% of your pension entitlement at date of death.

You should be aware you can't change your choice if your situation with your spouse and/or children changes after you make this election.

For more information about reversionary benefits, please refer to the **Death Benefits** factsheet.

Section G – Rollover details

You need to check that you can rollover your benefit to a complying super fund, rollover fund, retirement savings account (RSA), or use it to purchase an annuity.

Rollover fund nominations

You can nominate up to two rollover funds or RSAs to receive all or part of your lump sum benefit.

We will send all rollover payments electronically to your nominated rollover fund(s). If your fund does not accept electronic payments, the payment will be issued in the form of a cheque and sent directly to the receiving fund. If you do not supply us with an address for the fund, the cheque will be sent directly to you.

Section H – Superannuation contributions surcharge

You only need to fill in this section if you have an outstanding surcharge debt. Please refer to the **Superannuation contributions surcharge** factsheet for more information.



Section I – Taxation matters

Start date for taxation purposes

The start date relates to the date your eligible service period (ESP) started. We use it to calculate the various components of your super lump sum payment for taxation purposes. You'll need to contact your personnel section for your ESP date.

Generally, your ESP is the number of days between the date you started APS employment (which may be earlier than the date you joined CSS), and the date we make your payment. If your CSS membership started before 1 July 1983 and you have a long service leave start date earlier than your CSS start date, that earlier date applies as your ESP start date.

We also include earlier periods of employment for which you paid a transfer value into CSS in your ESP. If you don't show a date in this section, we will use the date you joined CSS as your start date.

Your Tax File Number (TFN)

If you don't give us your TFN, we are required to deduct tax at the top marginal rate plus the Medicare levy from your benefit.

Approval to advise your TFN to rollover funds

We will give your TFN to the receiving fund unless you instruct us not to. Please note that there are consequences for not supplying your TFN to a fund.

Note: We are required to validate your TFN with the ATO's records to confirm the TFN provided is yours and correct. Your TFN will be validated before your benefit can be rolled over to another fund or paid using the SuperTICK validation service. If you do not provide your TFN, the processing of your benefit payment may be delayed.

Section J – Declaration

If you don't sign this section, your form will be returned to you and your payment may be delayed.

Privacy

We are collecting the information on this form to determine your entitlement to benefits under CSS. Where applicable, we will pass on identifying information to the rollover institutions you nominate.

We also pass on information about your CSS entitlements to the ATO, Centrelink and the Department of Veterans' Affairs.

Personal information that you or a third party provide, such as your 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 277 777**, for the purpose of managing your super.

This includes the management of superannuation investments, providing superannuation products and information, the administration of accounts, 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.



End of
explanatory
notes



Deferred benefit continuing with same employer (transition to retirement)

Benefit application

2. Form start

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



Personal details

Reference number (AGS)

Title

 Mr Mrs Ms Miss Other

Your name

GIVEN NAME(S)

SURNAME

Date of birth

/ /

Relationship details

 Married Single De facto

Start date of de facto relationship (if applicable)

/ /

Spouse's name

GIVEN NAME(S)

SURNAME

Spouse's date of birth

/ /

Your address

RESIDENTIAL ADDRESS

SUBURB/TOWN STATE POSTCODE

POSTAL ADDRESS

SUBURB/TOWN STATE POSTCODE



Commonwealth Superannuation Scheme

Section A continued on next page

Your phone numbers

BUSINESS HOURS

Form for business hours: 2 boxes for area code, 8 boxes for number.

AFTER HOURS

Form for after hours: 2 boxes for area code, 8 boxes for number.

MOBILE NUMBER

Form for mobile number: 4 boxes for area code, 8 boxes for number.

Would you like to receive an SMS to confirm we have received your application?

Form with checkboxes for 'No' and 'Yes'.

Your email address

Form for email address: 2 rows of boxes for domain and extension.

B 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*.

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.

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.

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

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.

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

For a full list of certifying authorities refer to **Schedule 2** of the *Statutory Declarations Regulations 2018* available at www.legislation.gov.au/Details/F2018L01296

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**.





If you would like us to use DVS to verify your identification, please provide authorisation by placing a check in the box 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.



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).

If your documents are incompatible with DVS, don't forget to provide certified copies.




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.

Certifying your documents overseas

If you live overseas 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.

Persons residing overseas and foreign residents may need to contact us.

***Don't send original documents.**

C Employment status declaration

I am continuing in employment with the same employer I was with at the time I deferred my CSS benefit. The name of my employer is:

NAME OF EMPLOYER

D Claim date

Please note that this date cannot be earlier than the date you complete and sign this benefit application form.

I,

FULL NAME

whose Reference number (AGS) is

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

hereby give written notice to Commonwealth Superannuation Corporation that I wish to claim my deferred benefit on:

D	D	/	M	M	/	Y	Y	Y	Y
		/			/				

E Benefit options

Select only one option

- Option 1** – Maximum pension – go to **Section F**.
- Option 2** – Maximum pension, lump sum of productivity – go to **Section F** for pension payment instructions, then **Section G** for lump sum rollover instructions.
- Option 3** – Standard pension, lump sum of member and productivity – go to **Section F** for pension payment instructions, then **Section G** for lump sum rollover instructions.
- Option 4** – Full Lump sum (only available if you are a former provident account member and you have reached age 60) – go to **Section G**.



Your pension payment

1. Account details for your pension payment

Name of institution

Name of account holder

Branch (BSB) number
Must be six numbers -

Account number
No more than nine numbers

2. Election for reduced initial pension benefit in return for increased spouse's and/or children's pension benefit

Do you want to take a reduced pension?
 Yes No



Rollover details

If you are splitting your benefit between two funds, copy this page, complete the details and attach to this form.
I would like to rollover: (please choose one)

- my entire lump sum benefit
- OR only part of my lump sum benefit (please choose one):
- a gross dollar amount of \$
- OR a percentage of lump sum %

Rollover fund or RSA nominated to receive all or part of your lump sum

Name of Fund or RSA

ABN of Fund or RSA **AUSTRALIAN BUSINESS NUMBER**

Membership Number (known as Member Client Identifier) for Fund or RSA

USI of Fund or RSA **USI = UNIQUE SUPERANNUATION IDENTIFIER**

Postal address of Fund

SUBURB/TOWN **STATE** **POSTCODE**

H Superannuation contributions surcharge

I would like my outstanding superannuation contributions surcharge debt deducted from either:

- my standard CPI-indexed pension (permanent reduction)
OR my additional non-indexed pension (permanent reduction)
OR my lump sum benefit (if applicable)

I Taxation matters

What is your start date for taxation purposes?

D	D	/	M	M	/	Y	Y	Y	Y

What is your Tax File Number?

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

Tick this box if you don't want us to give your TFN to another super fund.

Pension recipients should also obtain and complete a Tax File Number declaration form (obtainable from the ATO) in order to claim any available tax rebates and deductions. Attach the completed declaration to this application form.

Note: We are required to validate your TFN with the ATO's records to confirm the TFN provided is yours and correct. Your TFN will be validated before your benefit can be rolled over to another fund or paid using the SuperTICK validation service. If you do not provide your TFN, the processing of your benefit payment may be delayed.

J Declaration

I declare that:

- I have been advised to read the **CSS Product Disclosure Statement** before completing this form.
- I have been given enough information about the benefit options available to make an informed decision.
- The information I have provided is true and correct to the best of my knowledge. I acknowledge that it may be a criminal offence to knowingly provide false or misleading information or documents.
- By choosing a benefit option in **Section E**, I understand that I am making a formal election under the provisions of the CSS legislation and this benefit election cannot be changed, except in certain circumstances approved by Commonwealth Superannuation Corporation.
- I have made an election regarding the reduced pension option in **Section F** (if applicable) and understand that I cannot change this election.

 **Sign**

SIGNATURE

Date signed

D	D	/	M	M	/	Y	Y	Y	Y

If you need more information, call **1300 000 277** or email members@css.gov.au

K Checklist

I have:

- read all the **Explanatory notes**
- attached certified copies of documents requested in **Section B** to prove my identity
- elected a claim date in **Section D** which is not earlier than the date I completed this form
- selected a benefit option in **Section E**
- completed a reduced pension election and account details in **Section F**
- included rollover fund details for my lump sum in **Section G** (if applicable)
- attached my completed **Tax File Number declaration** (for pension recipients only), and
- signed the declaration in **Section J**.

You have now completed this form.

Please return it, with any attachments to:


CSS
GPO Box 2252
Canberra ACT 2601
AUSTRALIA



 **Email**
members@css.gov.au

 **Phone**
1300 000 277

 **Financial Advice**
1300 277 777

 **Post**
CSS
GPO Box 2252
Canberra ACT 2601

 **Web**
csc.gov.au

 **Overseas Callers**
+61 2 6192 9501

 **Fax**
(02) 6275 7010