



Application for CSC retirement income

CSCri is only available to eligible PSSap, PSS and CSS customers.

What is CSC retirement income (CSCri)?

CSCri provides regular payments to you in retirement until your balance runs out. We also keep your balance invested for you, so it continues to receive investment earnings.

CSCri offers both a Standard retirement income stream and a Transition to retirement income stream (TRIS).

Apply to join CSCri

Use this form to apply for a Standard retirement income stream or a Transition to retirement income stream if you are an eligible CSS, PSS or PSSap member.

What happens when I apply to join CSCri?

Before you join CSCri, you should read the Join CSCri page, **CSCri Product Disclosure Statement**, **Target Market Determination** and Financial Services Guide available at csc.gov.au/PDS. As we may set you up temporarily with a PSSap account for the purpose of consolidating your funds, you should also read the **PSSap Product Disclosure Statement** and **Target Market Determination** available at csc.gov.au/PDS

- Step 1** Complete this form and email or post it to us, and we will assess your application.
- Step 2** If your application is accepted and you are commencing your CSCri with multiple funding sources or a personal contribution only, we will consolidate your funds into your PSSap account (or set up a PSSap account for you if you do not already have one).
- Step 3** Once all your funds are consolidated into PSSap, or we receive your single source starting amount, and your application has been accepted, we will set up your CSCri account.
- Step 4** You will receive an email or letter welcoming you to CSCri and letting you know your account details.

If you are a retiring PSS or CSS member, we recommend you complete this form at the same time as you complete your PSS/ CSS benefit application 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.

Privacy

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



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

Tax File Number

Three sets of three empty boxes for Tax File Number

Note: We are authorised to collect your Tax File Number (TFN) under the Superannuation Industry (Supervision) Act 1993. We may disclose your TFN to another superannuation provider when your benefits are being transferred, unless you request to us in writing that your TFN not be disclosed to any other superannuation provider.

Declining to quote your TFN is not an offence, however giving your TFN to us will have the following advantages:

- 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.

If you are under age 60, you will also need to complete a Tax File Number Declaration form at ato.gov.au

B Your CSCri account type

Which type of income stream do you want to apply for?

Select the option that best describes your circumstances.

- Transition to retirement income stream
I have reached age 60; I have not yet turned 65 and I am still working

- Standard retirement income stream
I am age 65 or over, or

OR

- I have reached age 60 and retired from the workforce on

OR

- I am over 60 and still working, however after turning 60 I ceased gainful employment with

on DD / MM / YYYY

OR

- I am permanently incapacitated.

Permanently retired means you intend to never become gainfully employed for more than 10 hours a week.

If none of the above apply, you may not yet be eligible for a CSCri account. To discuss your options call 1300 736 096.

C Starting balance

Expected* starting balance \$ [] [] [] [] [] [] [] [] [] []

If your starting balance includes a personal contribution or rollovers from multiple sources, the money must first be consolidated into an existing PSSap account. If you don't already have a PSSap account, we will create one for you and then close the account once your CSCri has commenced.

Where will your starting balance come from?

Select ALL sources of funds that apply to ensure we set up your CSCri account correctly.

- A transfer from my CSS or PSS account. Expected amount \$ [] [] [] [] [] [] [] [] [] []

AND/OR

- A transfer from my PSSap account (select one option)

- Full balance of my PSSap account.
Date of last employer contribution (if applicable)

DD / MM / YYYY

- A partial* amount from my PSSap account \$ [] [] [] [] [] [] [] [] [] []

Continued on next page

Full balance of my PSSap account less the minimum balance for it to remain open*

* CSC will not accept a partial transfer of an amount from your PSSap account that leaves a balance of less than \$6,000 in your PSSap account. To keep your insurance through your PSSap account, you must ensure there is enough money to pay for any future insurance premiums.

If you are setting up a Standard retirement income stream, your starting balance should not exceed your personal Transfer Balance Cap. Find out more at csc.gov.au/TBC

AND/OR

A personal contribution (this contribution must be paid into your PSSap account in the first instance. It cannot be paid directly into a pension account)*

I have made a BPAY contribution of \$ to my existing PSSap account.

^ Contribution cap limits apply. For more information go to ato.gov.au

If you have an existing PSSap account, you can make a BPay contribution using details found in the CSC Navigator. If you don't have an existing PSSap account, contact us to discuss alternate methods to make a contribution.

AND/OR

A transfer from a super fund other than PSSap, CSS or PSS (list all funds and approximate amounts in the below table)

I have, or will arrange my own transfer from the superannuation funds listed below; or

I authorise CSC to initiate transfers on my behalf to my PSSap account as follows:

Super fund name	Member number/ Account number	Fund's Unique Superannuation Identifier or product name	Amount to transfer (tick one only)
			<input type="checkbox"/> Whole balance <input type="checkbox"/> Partial amount of \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
			<input type="checkbox"/> Whole balance <input type="checkbox"/> Partial amount of \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Total			\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Attach a separate sheet with your additional super fund details if required.

D Your investment choice

How do you want your super to be invested?

You can choose one option or a mix of four options, in whole percentages only:

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 (default option)	<input type="text"/> <input type="text"/> <input type="text"/> %			
Aggressive	<input type="text"/> <input type="text"/> <input type="text"/> %			

Important: The total of all investment options must equal 100%

Which investment option do you want your payments to come from?

Note: You only need to complete this question if you chose two or more investment options above.

Select **one** only:

<input type="checkbox"/> Pro-rata method (default)	<input type="checkbox"/> Proportional method	<input type="checkbox"/> Priority method
Each income payment is withdrawn from each investment option in proportion to the balance held in each investment.	Nominate the proportion of each investment option that your payment is withdrawn from.	Pick the order of the investment options your payments are withdrawn from. Number the options you elected above, in descending order of priority (i.e. 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"/> 1 <input type="text"/> 0 <input type="text"/> 0 %	

E Your payment details

Your bank account for income payments and withdrawals

Your income stream payments can only be deposited into an account held in your name or jointly in your name. Any Australian financial institution with a BSB number will be accepted. CSC will not be liable for any errors that occur based on the account details you provide.

Deposit my income stream payments into the following bank account:

Name(s) in which your account is held

Name of your bank/ financial institution

Branch (BSB) number -

Account number

Income payment frequency

Note: If you do not make a selection, we will establish your income stream with monthly payments.

I want to be paid my income payment: Fortnightly Monthly Quarterly Half yearly Annually

How much do you want to be paid per payment?

Note: If you do not make a selection, we will establish your income stream with your minimum payment amount.

I want to receive the gross income stream amount per payment of: Minimum allowed under legislation (TRIS only) Maximum allowed under legislation# Other (nominate an amount to the nearest dollar and your indexation preference)

\$

If you selected 'Other', do you want your income stream payments to be indexed from 1 July each year?

No indexation Yes, by the Consumer Price Index (CPI) Yes, by the following amount: %

The maximum amount of 10% is not pro-rated in your first year.

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Note: The amount you list above must be within the minimum and maximum (if applicable) amounts permitted under law. For more information refer to the CSCri Product Disclosure Statement at [csc.gov.au/PDS](https://www.csc.gov.au/PDS)

For more information about how this is calculated, discuss with your financial adviser or call **1300 736 096**.

I want my first payment made:

in the next available pay period (default)

OR

in the month of

At least one payment must be made in the current financial year, unless your account is opened in June.

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 the last business day that precedes the 21st day of the month.

F 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.

Further information about the DVS, and the operation and management of the DVS Hub, is available from **IDMatch** at www.idmatch.gov.au/ and the **Attorney-General's Department** at www.ag.gov.au/.

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.

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

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 that 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. Note: we require a copy of both sides of your identification document. If your certified copy is a physical document, it must be sent by post. We cannot accept a photo or scan of a certified copy.

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.
- 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 www.legislation.gov.au/F2023L01753/

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Meeting 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 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).

*** 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. **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. **Example:** a Centrelink letter.

Members residing overseas

If you live overseas and need to have documents certified, it needs to be done by a person in that 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, foreign residents or anyone wishing to receive payments into an foreign bank account, please contact us to confirm this option and the necessary documentation requirements.

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

G Your beneficiary nomination

Select **one** option only.

- For binding and non binding nominations use the **Nominate your beneficiaries** form available at csc.gov.au

OR

- Reversionary beneficiary (provide their details below).

Nominating a reversionary beneficiary means that if you die, your income stream will continue to be paid to your nominated dependant until the benefit is reduced to nil or commuted.

 **Continued on next page**

Title Mr Mrs Ms Miss Other

Surname

Given name(s)

Date of birth / /

Relationship to you

The person you elect as a reversionary beneficiary in the event of your death can be any one of the following:

- your spouse;
- your children under 18*; or
- an interdependent (both at the time of your nomination and your death).

***Important:**

You can nominate a child 18 or older only if:

- they are aged between 18 and 25 and financially dependent on you immediately before your death; or
- they are disabled within the meaning of the *Disability Services Act 1986* (Cth).

Any income stream payable to a child over 18 years old and who is not disabled, will only be paid until the child reaches the age of 25, at which time a lump sum of the remaining account balance will be paid. If the child is disabled as described above, the income stream will be payable until the account balance becomes zero.

H Declaration and checklist

Have you completed the steps to set up your account?

- All funding sources to be used to open my CSCri account are listed in **Section C**
- I have enclosed proof of identification documents as outlined in **Section F**

If a retiring PSS/CSS member:

- I have completed a PSS/CSS benefit application form.

If starting your CSCri with rollovers from super funds other than PSSap, CSS or PSS:

- I have completed Transfer details for each fund

If under the age of 60:

- I have completed a TFN declaration with the ATO.

Declaration

The information shown on this application is true and correct.

I have read and understood the **CSCri Product Disclosure Statement** and **Financial Services Guide** and, if applicable, the **PSSap Product Disclosure Statement** and **Financial Services Guide**, and this application is made subject to the terms and conditions of those documents.

I have read the **CSCri Target Market Determination** so I understand the class of customers for which this product has been designed, taking into account the objectives, financial situation and needs of the target market.

I understand and acknowledge that if I am not already a member of PSSap and I am commencing my CSCri account with multiple sources of funds or using only personal contributions, I will require a temporary PSSap account to be opened to accept these monies (in the cash option) and will be subject to the fees and costs associated with this.

I understand and accept that no party associated with CSCri guarantees the performance of the investment options in CSCri.

I am applying to be a member of CSCri and, if accepted as a member, I agree to be bound by the **PSSap Trust Deed**.

If consolidating from other non CSC super funds:

- I authorise CSC to contact the fund/s named on this form in order to obtain information related to this request
- I consent to my personal information being used or disclosed in accordance with the CSC privacy policy and the privacy notice in this form, and I consent to my TFN being used and disclosed for authorised purposes.



Sign

Signature

Date signed

/ /

I Submit your form

You have now completed this form.

Important: If you elect not to have your eligible identification documents verified through DVS, then you must provide hard copies of your certified documents via post. If you missed the DVS election, it is on page 7.

Post this completed form to:

CSCri Applications
GPO Box 2252
Canberra ACT 2601

or email us to lodge the application form: formsandapplications.cscri@contact.csc.gov.au



Want to know more?

Our CSCri Contact Centre is available to assist you 8.30 am–6 pm, Monday–Friday.

CSCri Customer Service Centre

Call: **1300 736 096**

Email: members.cscri@contact.csc.gov.au



For more information visit [csc.gov.au](https://www.csc.gov.au)

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.

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