Australian Government





Approved invalidity retirement Benefit application



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 whose invalidity retirement has been approved by the Trustees and who have been formally retired on invalidity grounds by their employer.

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 your completed application and any supporting documents directly to us. Instructions are provided at the end of the form.
- After we have paid your benefit, it is important 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.

You are able to lodge your application up to three months in advance of your retirement date and up to three months after.

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 invalidity benefits factsheet.
- · Get a benefit estimate using member services online.
- Contact us at the details 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 \square with a \checkmark or \bigstar then fill out the next question or section.



ormation provided in this document is general advice only and has been prepared wit advice, you should consider the appropriateness of the advice, having regard to your uld obtain a copy of the CSS Product Disclosure Statement (PDS) and consider their c onwealth Superannuation Corporation (CSC) ABN: 48 882 817 243 AFSL: 238069 RSEL: L000 e of the Commonwealth Superannuation Scheme (CSS) ABN: 19 415 776 361 RSE: R1004649

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.

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 – Benefit options

Option 1 – maximum pension, refund of productivity component and supplementary contributions

This option gives you a standard CPI-indexed pension together with an additional non-indexed pension purchased with your member component only. Your productivity component will be paid as a lump sum.

Option 2 – standard CPI-indexed pension and lump sum

This option gives you a standard CPI-indexed pension plus a lump sum of your member and productivity components.

Option 3 – lump sum only, no pension

This option is only available to former provident account members. It gives you a lump sum based on three times your accumulated basic contributions and fund earnings, plus any supplementary contributions and your productivity component.

Option 4 – lump sum only (less than 15 years' contributory service and benefit reduced on medical grounds)

This option is only available if we have advised you that your benefit is to be reduced on medical grounds and you have less than 15 years' contributory service. It gives you a lump sum of three and a half times your accumulated basic contributions and earnings, plus any supplementary contributions and your productivity component.

Section D – Personal earnings declaration

If all or part of your benefit is being paid as a pension and if you are receiving personal earnings (ie salary, wages, fees or other amounts for services rendered, including directorships fees), you are required to give us particulars of those earnings.

Section E – 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.

Section F – Your lump sum cash payment

We can only pay your lump sum into an Australian account held in your name. If it's a joint account, one of the names listed must be yours. Taxation legislation states once an amount has been paid to you or deposited in your bank account, you cannot subsequently roll it over.



Section G – Rollover details

You need to check that you can rollover your benefit to a complying super fund, rollover fund, 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.

If you wish to and are eligible to rollover part of your CSS benefit to the Commonwealth Superannuation Corporation retirement income (CSCri), the Fund details have been prepopulated for you. CSCri is an account-based income stream for those who wish to keep their lump sum benefit invested in government super in retirement.

If you are currently a PSSap Ancillary Member, and wish to and are eligible to join CSCri, your rollover will be paid to your PSSap ancillary membership account first. The Fund details for PSSap have been prepopulated for you. We will send all rollover payments directly to your nominated rollover fund(s). Please make sure you have the correct postal address of your fund(s).

Can I choose which component of the benefit to rollover first?

While you may request the components of your benefit be paid in a specific manner, the payment will be subject to proportioning.

Proportioning rules require that your taxable and tax-free components be spread in equal proportions across those parts of the benefit payment you receive as cash or rollover.

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 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

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 000 277**, 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 This page has been intentionally left blank.



Commonwealth Superannuation Corporation



Approved invalidity retirement Benefit application

2. Form start



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

Personal details

Personal details

Reference number (AGS)]													
Cessation date	D	D	/	M	M	/	Y	Y	Y	Y												
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Commonwealth Superannuation Scheme																						



Section A continued on next page

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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.

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.

DVS is only compatible with some identification documents, these have been listed below. 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 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 \checkmark or \bigotimes



- 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 1

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.

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

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.

Benefit options

Select only one option.

Option 1

Maximum pension, lump sum of productivity component and supplementary contributions

Option 2

Standard CPI-indexed pension and lump sum of member and productivity components

Option 3

Lump sum only, no pension (only available if you are a former Provident Account member)

Option 4

Lump sum only, less than 15 years' contributory service and benefit reduced on medical grounds

D

Personal earnings declaration

After retirement will you be in receipt of personal earnings (refer to the **Explanatory notes** for the definition of personal earnings)?

No
OR
 Yes If Yes, who will be paying for the services rendered of the work performed? (if self employed write 'Self'):

My estimated pre-tax earnings will be



per fortnight

per month

per year

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												



Your lump sum cash payment (if applicable)

I would like my lump sum cash payment to be comprised of either (please choose one):





Rollover details

If you wish to and are eligible to roll over to Commonwealth Superannuation Corporation retirement income (CSCri) please complete **G1** below.

If you wish to roll over to any other rollover fund or RSA, please complete G2.

G1. Rollover to CSCri

I would like to rollover: (please choose one)

		my entire lump sum benefit
	OR	only part of my lump sum benefit (please choose one):
	0.5	a gross dollar amount of \$ OR a percentage of lump sum %
	OR	the balance after lump sum cash payment
Are you a PSSap Ancillary Member?		Yes No
If Yes		If you are a PSSap Ancillary Member your rollover will be paid into your PSSap ancillary account prior to starting the retirement income stream from CSCri.
		You must also complete the form Apply for CSC retirement income for PSSap members available on our website at csc.gov.au and send your completed form to CSCri (see address below) your CSS Approved invalidity retirement benefit application form to CSS.
PSSap member number		
Name of fund		Public Sector Superannuation accumulation plan
ABN of fund		65 127 917 725
Postal address of fund		PSSap Locked Bag 9300 Wollongong NSW 2500
Unique Superannuation Identifier (USI) of fund		65127917725001
If No		If you are not a PSSap Ancillary Member, your rollover will be paid directly to CSCri.
		You must also complete the form Apply for CSC retirement income for CSS and PSS members available on our website at csc.gov.au and send your completed form to CSCri (see address below) when you provide your CSS Approved invalidity retirement benefit application form to CSS.
Name of fund		Commonwealth Superannuation Corporation retirement income (part of Public Sector Superannuation accumulation plan)
ABN of fund		65 127 917 725
USI of fund		65127917725002
Postal address of fund		CSCri Locked Bag 8840 Wollongong NSW 2500

If you have specific instructions relating to which components of your benefit you would like to take as a rollover to PSSap or CSCri, please attach these details separately.

Additional details attached?

	Yes		No
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Section G continued on next page

G2. Rollover to other fund or retirement savings account (RSA)

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 e	ntire lui	np sum b	enefit											
OR	only	part of	my lump :	sum b	enefi	t (plea	se ch	ioose	one):						
OR Rollover fund or RSA nominate		\$ a p alance	oercentag	e of lu % o sum	ump s cash	paymo	ent								
Name of fund or RSA															
Name of fund of RSA															
	AUSTRALIA	BUSINES	NUMBER				1								
ABN of fund or RSA															
Membership number (known															
as Member Client Identifier) for fund or RSA															
	USI = Uniqu	e Superar	nuation Ide	ntifier											
USI of fund or RSA															
Postal address of fund															
	SUBURB									STAT	E	Р	оѕто	ODE	
If you have an acific instructions															

If you have specific instructions relating to which components of your benefit you would like to take as a cash payment or rollover (subject to proportioning), please attach these details separately.

No

Additional details attached?

Yes		
res		

Superannuation contributions surcharge

I would like my outstanding superannuation contributions surcharge debt to be 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)

Taxation matters

What is your start date for taxation purposes? (See Section I in the Explanatory notes)



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

If you have elected to take a pension, you should also complete a **Tax File Number declaration** form (available from the ATO or your personnel section) to claim any available tax offsets 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.





I declare that:

• I have been advised to read the CSS PDS before completing this form

SIGNATU

- 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 C**, 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 CSC.



RE]	Date
		D
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Member checklist

I have:

- filled in all the sections applicable to me
- completed the Identification requirements in Section B
- selected a benefit option in Section C
- provided bank account details for my pension payment in Section E
- completed cash payment and account details in **Section F** (if applicable)
- included rollover fund details in Section G (if applicable)
- attached my completed Tax File Number declaration (for pension recipients only)
 - signed the declaration in Section J.

You have now completed this form.

Please return it, along with any attachments, to:

CSS GPO Box 2252 Canberra ACT 2601

or email to:

formsandapplications@csc.gov.au

Please take a copy of your completed form for your records.

Please submit your completed form directly to us. We'll contact your employer to obtain the information we need from them. We'll do our best to action your application as quickly as possible after your cease date, however delays in processing may occur if:

your application is not completed fully or is invalid
you don't provide sufficient identification

we need to wait for information from your employer or
 your benefit requires manual calculation

We'll let you know if any of these apply to your benefit application.

End Form



Email



Phone 1300 000 277



3 1300 27

Fax (02) 6275 7010

