

### Change your account details

#### Important information about this form

Use this form to change or correct your Commonwealth Superannuation Corporation retirement income (CSCri) account details including:

- your personal information or contact details (go to Section B)
- your bank, building society or credit union account where your income stream is paid (go to Section C)
- your income stream amount per payment (go to Section D)
- how often your income stream is paid fortnightly, monthly, quarterly, half yearly or annually (go to Section E)
- · your investment option selection (go to Section F)
- your payment order from your investment option selection (go to Section G)
- the status of your income stream (if you meet a condition of release) from a transition to retirement income stream to a standard retirement income stream (go to Section H). If you wish to elect or change your beneficiaries, please use the Nominate your beneficiaries form.



#### How to complete this form

- Confirm your Member Number and personal information in Section A.
- Complete only the sections of this form relevant to the changes you wish to make.
- Sign and date the form in Section I.
- Certify and enclose personal documents if required with your completed form.

#### 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**

Send your completed form to us at:

**CSCri** 

Locked Bag 20115

Melbourne VIC 3001

or email us to lodge the application form: formsandapplications@cscri.com.au

You can also update your personal or payment details securely online via the **CSC Navigator section of** the website csc.gov.au

### 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





Given name(s)  Date of birth  Change your personal information  Or contact details  Please only complete those details you wish to change on your account.  Your NEW name  Title  Mr Mrs Ms Miss Other  Surname  Given name(s)  To change the name on your CSCri account, we must receive a certified copy of ONE of the following documents:  • Marriage certificate  • Birth certificate if you are using your maiden name (Note: If reverting to maiden name we also need a copy of marriage cert to show link in names i.e from Beveridge to Perrow)  • Change of name certificate if you changed your name by deed poll.  Guidance on certifying personal documents is provided at the end of this form.  Your NEW residential address  My postal address is the same as my NEW residential address:  Yes No	Member Number																							
Surname  Given name(s)  Change your personal information  or contact details  Please only complete those details you wish to change on your account.  Your NEW name  Title	Personal information (as curren	tly dis	splay	ed o	on y	our	CSC	ri ac	cou	nt)														
Change your personal information  or contact details  Please only complete those details you wish to change on your account.  Your NEW name  Title	Title		Mr			N	⁄lrs			Ms				Viss			01	ther						
Change your personal information or contact details  Please only complete those details you wish to change on your account.  Your NEW name  Title	Surname																			T				
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Your CORRECT date of birth														
	<b>Note:</b> You must provide a certified copy of a personal document to support the change such as your birth certificate, passport or driver's licence.													
Your NEW	Guidance on certifying personal documents is provided at the end of this form.													
	Post													
communication preference	OR													
	Email													
	@													
	Note: By nominating email you agree to receive the following via email:													

- electronic notification to access secure information (including your Member Statement)
   electronically via CSC Navigator at csc.gov.au
- information about our products and services; and
- notification to participate in member research.

# Change your bank account where your income stream is paid

\*

Deposit my income stream payments into the following bank account:

**Note:** Additional identification is required if you wish to change your bank account details for your regular retirement income stream. Please see our **ID Documents** factsheet for further info on what to provide.

Name(s) in which your account is held	
Name of your bank/financial institution	
BSB	
Account number	
	Note: Vous income stroom normants can only be denesited into an account held in your

**Note:** 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. CSCri will not be liable for any errors that occur based on the account details you provide.



### Change your income stream amount per payment

amount option is for a Transition to I wish to receive the gross Minimum allowed under legislation Retirement income income stream amount (TRIS only) Maximum allowed under legislation# **stream only.** The per payment of: Other (please nominate an amount to the nearest dollar) not pro-rated in your \$ first year. per payment Do you want your income stream payments to be indexed from 1 July each year? No Indexation Yes - By CPI % Yes - by the following amount: Note: The amount you list above must be within the minimum and maximum (if applicable) amounts permitted under law. For more information refer to your CSCri Product Disclosure Statement at csc.gov.au



### Change how often your income stream is paid

I wish to be paid my income stream:	Fortnightly  Monthly	Quarterly Half yearly	Annually
Pay my next income stream payment in the month of:	Note: Fortnightly na	nyments are generally n	aid to your hank

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



### Change your investment option or mix options

### How do you want your account invested?

Please invest my account balance in the following option or mix of options:

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Cash	%	Balanced	%	- 100%	NOTE: Ensure your <b>total</b> percentage equals 100%
Income Focused	%	Aggressive	%	= 100%	and your selection is in whole percentages only.

Note: If you changed your investment option selection to two or more options, please also reconfirm or change your income stream payment order method in Section G below. If you elect not to complete Section G, your income stream payments will draw down via method one — the pro-rata method (explained in Section G).

If your investment option change request is received by us within two business days of the 21st of the month, your change will take effect after that month's CSCri income payments are completed. Please note, any switch request received within two business days of your fortnightly payment date or the 21st of the month (or earlier business day if the 21st falls on a weekend or public holiday) will not be processed prior to your payment date and will be taken to have been received after the payment date.



### Change your income stream payment order method

Complete this section if you are currently invested in two or more investment options, or you elected to change to two or more investment options in **Section F** above.

Select one method only.

Please pay my income stream using my selected income stream payment method:

Pro-rata method (default)	Proportional m	ethod	Priority metho	od						
Elect your income stream payments to be withdrawn from your current investment option selection, or those options you selected in <b>Section F</b> , in proportion to the balance in each option at the	Specify (below) the be withdrawn from investment options, you selected in <b>Sect</b>	your current or those options	Specify (below) the order of investment options from which your payments are to be withdrawn from your current investment option selection or those options you selected in <b>Section F</b> . Please number options below in descending order of priority (for example, the highest priority option will be labelled 1).							
time of the withdrawal.	Cash	%	Cash	Income Focused						
	Income Focused	%	Balanced	Aggressive						
	Balanced	%								
	Aggressive	%								
	Total	1 0 0 %								



## Change to standard retirement income stream

Complete this section only if you are a **current transition to retirement income stream member** who wishes to change the status of your income stream to a **standard retirement income stream**. To qualify, you must meet ONE condition of release in the list below. Please select which condition you meet.

Note: As a current transition to retirement income stream member, restrictions are placed on your ability to access amounts in your CSCri account. However, if you satisfy one of the conditions of release below you can change the status of your transition to retirement income stream to a standard retirement income stream, which means that you will no longer be subject to maximum withdrawal amounts each year (although minimum withdrawal amounts will continue to apply).

For more information on a standard retirement income stream, please refer to your CSCri Product Disclosure Statement, which is available at csc.gov.au

I satisfy the following condition of release (please tick ONE box):

I have reached my preservation age, ceased working and do not intend to work for more than 10 hours a week
in the future (permanently retired)

I have reached age 60 and changed my employment arrangements



,												
Given name(s)												
Surname												

declare that the information I have provided on this form is complete and correct.

Signature	Date	e sig	ned							
	D	D		M	M		Υ	Υ	Υ	Υ
			/			/				

Please send this form, together with any certified copies of your personal documentation that are required to:

**CSCri** 

Locked Bag 20115

Melbourne VIC 3001

or email us to lodge the application form:

formsandapplications@cscri.com.au

#### **Certifying your documents**

The following people can certify your documents:

- a legal practitioner enrolled on the roll of a supreme court or the high court of Australia
- a judge or magistrate of a court
- a chief executive officer of a Commonwealth court
- · a registrar or deputy registrar of a court
- a Justice of the Peace (JP)
- a notary public
- a police officer
- an Australian consular officer or an Australian diplomatic officer
- an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- a finance company officer with five or more years of continuous service
- a member of the Institute of Chartered Accountants in Australia (ICAA), Certified Practicing Accountants (CPA Australia) or the Institute of Public Accountants (IPA).

For a full list of certifying authorities, refer to **Schedule 2** of the *Statutory Declarations* Regulations 2018 available at legislation.gov.au or contact us if you require further information. The certifying authority must confirm in writing that you are the valid holder of the identification that you are presenting and that any copies are true copies of the original.



#### **Important**

The certification must include the signature, name, address, occupation, telephone number and registration number (if applicable) of the certifying authority.



### We're here to help

If you have any questions or need help filling out this form, we're available to chat between 8:30am - 6:00pm, Monday to Friday.

**CSCri Customer Service Centre** 1300 736 096 members@cscri.com.au



members@cscri.com.au







Melbourne VIC 3001



