

# MLC Insurance super withdrawal/rollover

Policy number					
Use this form to withdraw/rollover funds from your insurance policy. We can only accept your request if the form is completed correctly. We respect your privacy and handle your information in accordance with our privacy policy, available at mlcinsurance.com.au/privacy-policy					
1. Policy and personal details					
Mr Mrs Miss Ms Other	First name				
Middle name	Last name				
Date of birth (DD/MM/YYYY) Email address					
Mobile phone number Home phone numb	per Business phone number				
out monies, identifying and amalgamating superannuation ben The approved purposes and the consequences, of not notifying Your TFN will be disclosed to the Commissioner of Taxation. Yo if your benefits are being transferred (unless you inform MLC Li	e Trustee will be required to deduct tax at the highest marginal ian Taxation Office (ATO) may apply the Superannuation. In some circumstances the additional tax on benefits and theC Limited and the Trustee are allowed to use your TFN if paying efits, for Surcharge purposes and for other approved purposes. If a TFN may change in the future.				
Yes Enter your Tax File Number in the box below N	lo 🔛				
Tax File Number					
Please tick the boxes for the sections you are completing (more certain sections of this form.	than one box can be ticked). You may only need to complete				
Section 2 - If you are rolling over the amount.					
Section 3 - If you are withdrawing the amount in cash.					
Section 4 - If you are claiming a tax deduction on any cont	ributions received by us.				
You will also need to complete section 5 - Declaration before	re returning.				



**Trustee**NULIS Nominees (Australia) Limited
ABN 80 008 515 633 AFSL 236465

Fund MLC Super Fund ABN 70 732 426 024 Insurer MLC Limited ABN 90 000 000 402 AFSL 230694

The Trustee is part of the Insignia Financial Group. MLC Limited uses the MLC brand under licence from Insignia Financial Group. MLC Limited is part of the Nippon Life Insurance Group and is not a part of the Insignia Financial Group. References to 'we', 'us' or 'our' are references to MLC Limited.

2.	Rollovers only			
1.	Do you want to have the outstanding balance rolled over?			
	Yes, to a nominated Super Fund Please go to question 2  Yes, to my Self-Managed Super Fund Please go to question 3			
	No Please go to section 3			
2.	Please provide details of the super fund receiving the rollover.			
	If you do not answer all of the questions below, your rollover may be delayed. This information can be provided by your chosen rollover institution.			
	Rollover payments cannot be paid directly to you. They must be paid by us directly to your chosen rollover institution.			
	Fund name			
	Fund address			
	und address			
	Policy/Member number Unique Superannuation Identifier (USI)			
	Australian Business Number (ABN)			
3.	Please provide details of the Self-Managed super fund receiving the rollover.			
<b>.</b>	If you do not answer all of the questions below, your rollover may be delayed. This information can be provided by your chosen rollover institution.			
	Rollover payments cannot be paid directly to you. They must be paid by us directly to your chosen rollover institution .			
	Fund name			
	Fund address			
	Electronic Service Address (ESA)  Australian Business Number (ABN)			
	BSB number Account number			
	Withdrawals			
	ou are withdrawing the funds under a condition of release, you will also need to complete the <b>Identification Form –</b> <b>Iividuals and Sole Traders</b> available on our website and return it to us together with certified copies of relevant identification			
	cuments. The withdrawal will not be able to proceed until we receive this information.			
4.	Do you want to withdraw the outstanding balance?			

Please go to question 5

Please go to section 4

Yes

No

2 of 5

This payment option is not availab	ole for amounts being rolled	d over.			
Once processed, the money will be Trustee can only pay to a bank or account holder.					
Financial institution name					
Financial institution address					
Suburb		S	State	Postcode	
Account name					
3SB number		Account number			
have reached my preservation ag of being employed again. Please n were born.			Plea	se go to questi	
Your preservation age is:					
Date of birth	Preservation age				
Before 1 July 1960	55				
1 July 1960 to 30 June 1961	56				
1 July 1961 to 30 June 1962	57				
1 July 1962 to 30 June 1963	58				
1 July 1963 to 30 June 1964	59				
After 30 June 1964	60				
am aged 60 to 64 and have left th attached a letter (or other proof) fro employment.			Plea	se go to questi	
am aged 65 and over.			Plea	se go to questi	
I have retired due to total and permanent disablement and have stopped work permanently. (Note that the Trustee will request evidence to support your claim. Please call 13 65 25 for appropriate forms and instructions).  I have been granted release from the ATO on compassionate grounds and attached the ATO approval.  I wish to withdraw money from my restricted non-preserved benefit. I have attached a letter from my previous employer confirming the date I stopped employment and that the employer contributed to the MLC Super Fund on my behalf while I was employed.			Plea	se go to questi	
			Plea	Please go to questio	
			Plea	se go to questi	
I have reached my preservation ag ssued by Centrelink or Departmer receiving social security or Veteral after reaching my preservation age	nt of Veterans' Affairs confir ns' Affairs payments for a c	ming that I have been umulative period of 39 weeks	Plea	se go to questi	

5. Please provide your account details below.

7. Date of retirement or stopping work (DD/MM/YYYY)

# 4. Claiming a tax deduction

## **Past Personal Contributions**

financial year?

If you personally contributed to the MLC Super Fund between 1 July 1983 and 30 June 1992, we will assume you have claimed a tax deduction for the whole amount of those contributions unless you advise us otherwise.

From 1 July 1992, unless you advise us otherwise, personal contributions will be treated as undeducted and a tax deduction will not be permitted for these contributions. This information must be received before you stop being be a member of the MLC Super Fund.

8. Do you wish to claim a tax deduction for personal contributions made to the account in the current or previous

Yes Please read the following and complete the table on the next page.			
Generally, if your employer is contributing to superannuation A personal superannuation contribution can be claimed as a		laim a tax deduction.	
<ul> <li>you are substantially self-employed (you earn less than 10<sup>o</sup></li> </ul>	% of your assessable income from	an employer); or	
<ul> <li>you are an employee and your employer does not, and is no support.</li> </ul>	ot required by law, to provide you w	ith any superannuation	
If you need further information about claiming a tax deduction	on, please contact the ATO.		
In the table below, show the amounts of contributions for the	e current and previous financial v	ears	
In the table below, show the amounts of contributions for the	e current and previous financial y	ears	
In the table below, show the amounts of contributions for the Contribution type	e current and previous financial year	ears  Previous financial year	
· ·			
Contribution type			
Contribution type  A Member contribution			
Contribution type  A Member contribution Contributions you have made to your own policy.			

employer.

made by:

C Employer contributions

· your employer, or

employer

Co-contributions made by the government, provided you meet the eligibility\* conditions.

if you are 18 years of age or over, someone other than your

if you are under 18 years of age, someone other than your

Total contributions received by us

If you have advised member contributions in A of question 8, please nominate below the amount you intend to claim as a tax deduction.

Contribution type	Current financial year	Previous financial year
	\$	\$

	Contribution type	Odificili illialiciai yeai	i revious illianciai year	
		\$	\$	
10.	Before sending this withdrawal form to us, please check you l	nave:		
	Completed all required sections of the form.  Signed and dated the declaration on the following page.			
	Please note that failure to complete all required sections of this form may result in your withdrawal being delayed			

D Government co-contributions

<sup>\*</sup>Please contact your financial adviser or visit the ATO website ato.gov.au to determine your eligibility.

#### 5. Declaration

The answers I have given in this form are true.

I understand that this application will generate a withdrawal from my eligible MLC super or MLC pension account.

I am aware that I may ask for any information that I reasonably require for the purpose of understanding the effects on my benefit entitlement prior to rolling over my benefits. This includes information on fees, charges, effect on insurance cover (if applicable) and any other matter that I may require.

I declare that I require no such information and wish to transfer my benefits according to my instructions.

I am aware of any exit fee that may apply to this rollover or withdrawal and understand that any such fee will be deducted before the rollover or withdrawal is paid.

I am aware that this withdrawal may cause insurance cover (if any) to lapse, unless I establish an alternative payment method.

I have not previously submitted a Superannuation Contributions Tax Deduction Eligibility S.290–170 Form which included this amount. The amounts shown cannot be changed once this form is submitted.

#### Applicant's signature

V	Date (DD/MM/YY)		

### Penalties may apply if a declaration is false.

This information is of a general nature only. We recommend you seek professional advice regarding your own taxation position.

# 6. Send us your form

Please send your completed form to us at:

MLC Life Insurance - Operations PO BOX 23455 Docklands VIC 3008

Email: enquiries.retail@mlcinsurance.com.au

If you have any questions, please contact your financial adviser, or call us on **13 65 25**, between 8.30am to 6pm (AEST/AEDT), Monday to Friday.