

Important information before starting your application

This form can be used to apply for a transition to retirement (TTR) Income Stream or an Account Based Pension (ABP)

Please ensure you read the attached [Product Disclosure Statement \(PDS\)](#) before completing this form. If you have any questions regarding the PDS please discuss them with your Financial Adviser.

If you are commencing a TTR pension, you must ensure you have met your relevant Preservation Age, as outlined in the following table:

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
From 1 July 1964	60

If you are commencing an ABP (retirement income stream) application, you must meet one of the below conditions of release:

Permanently retired after reaching Preservation Age
Retired from an employment on or after age 60
Reached age 65
Permanent incapacity
Terminal medical condition

If you are applying for an ABP, in addition to meeting a condition of release, your pension balance must not exceed your personal Transfer Balance Cap. Please provide a copy of your personal transfer balance account to verify the cap balance at the time of submitting this request to us. In the absence of cap balance, ASM can process the pension request however we take no responsibility for exceeding the transfer balance cap.

For pensions commencing after 1 July 2023, the general transfer balance cap is \$1.9 million.

If you have any questions, please call your Adviser or Australian Super Manager on 1300 130 622 or email admin@supermanager.com.au.

Section 1 – Fund Details

Fund Name:

Section 2 – Trust Deed

A deed variation can be completed at the same time as the pension commencement to ensure that the Trust Deed is updated to include all up-to-date legislative changes and that the pension agreement is operational with the Deed. We recommend if the Deed is more than 5 years old or if there is a significant decision or strategy change in relation to the fund that the Deed is updated. Please refer to our fee schedule for current fees.

Do you want a Deed Variation completed?

- Yes
 No – the SMSF Trust Deed has been produced by ClearDocs

Please provide the name of the current Trustee/s

- Corporate Trustee Name:
 Individual Trustee Names:

Section 3 – Member Details

Title: Mr Mrs Ms Miss Other

Gender: Male Female

First Name:

Surname:

Address:

Suburb:

State:

Date of Birth:

Phone:

Email:

Section 4 – Income Stream Details

Income Stream Type

Ensure you have met all the relevant conditions of release before choosing an income stream type. Conditions of release information can be found at <https://www.ato.gov.au/Super/Self-managed-super-funds/Paying-benefits/Conditions-of-release/>

- Transition to Retirement Income Stream
- Account Based Pension Income Stream

Condition of release

Tick below the condition of release you have met to be allowed to commence this pension. Ensure you have met all the relevant conditions of release before choosing an income stream type. Conditions of release information can be found at <https://www.ato.gov.au/Super/Self-managed-super-funds/Paying-benefits/Conditions-of-release/>

For account based pension

- I have reached my preservation age and have ceased employment (including self-employment) and do not intend to ever return to work – provide a retirement declaration.
- I have reached the age of 60 and ceased an employment arrangement – provide a retirement declaration.
- I have reached age 65.
- I have met the conditions for permanent incapacity.
- I have a terminal illness.

For Transition to retirement pension

- I have reached preservation age and have not retired.

Section 5 – Pension details

Pension commencement date:

Pension purchase amount: Full Accumulation balance or
 Partial Balance (specify amount)

Section 6 – Reversionary Beneficiary Nomination

It is recommended that you seek legal advice before making a Reversionary nomination.

Is the pension to be a reversionary pension: Yes No

The nominated reversionary beneficiary must be a dependant or spouse.

Nominated Beneficiary

Title: Mr Mrs Ms Miss Other Gender: Male Female

First Name: Surname:

Address:

Suburb: State:

Date of Birth: / / Relationship:

Section 7 – Pension Payments

Will the trustee(s) pay the pension in arrears (that is, the first pension payment will be made some time after the commencement date):

- Yes
- No - Please contact ASM if the first pension payment is to be made on the commencement date.

How regularly will pension payments be made (The pension payment agreement allows the parties to vary the frequency of payments later):

- Weekly
- Fortnightly
- Monthly
- Quarterly
- Bi-Annually
- Yearly

Section 8 – Declaration

By signing the below declaration, I as a trustee/member of the fund:

- Acknowledge that I have read and understand the provided pension PDS provided by Cleardocs.
- Acknowledge that I have met all relevant conditions of release to be able to receive the pension.
- Declare that the information I have provided in this form is true, correct, and complete.
- Request that Australian Super Manager provide the necessary documentation/ information to complete the necessary changes to certain third parties as needed.
- Understand that Australian Super Manager may collect, use, and disclose the information in this form to third parties as needed.
- Declare that Australian Super Manager has not provided any advice in relation to the commencement of an income stream.
- Agree to pay the current scheduled fees for the Deed Variation (if applicable), production and administration of these pension documents (please contact ASM for confirmation if required).

Signature:

Date:

Section 9 – Retirement Declaration

Member/Trustee

Title: Mr Mrs Miss Other

Gender: Male Female

First Name:

Surname:

Address:

Suburb:

State:

Date of Birth:

Declaration of Retirement

I declare that I have satisfied one of the following conditions of release to allow me to commence this pension.

- I have reached my preservation age and have ceased gainful employment and have no intention to become gainfully employed again. (gainfully employed means employed or self-employed for gain or reward in any business, trade, profession, vocation, occupation, or employment (SIS Regulation 1.03(1)).
- I am aged 60 to 65 and have ceased an employment arrangement.
- I am over age 65.
- I am permanently retired due to permanent incapacity or terminal illness.

Signature:

Date: