

# Pension Application Form



Before signing this Member Application Form, please ensure that you have read the latest NQ Super & Pension Product Disclosure Statement (PDS) and the current Additional Information Booklet (AIB), available from [www.nqpension.com](http://www.nqpension.com) or on request by phoning 1300 986 450. A reference to the 'member' in this form is a reference to the applicant for membership of NQ Super & Pension (the Fund). Any application for membership is subject to acceptance by the Trustee.

**Note: A copy of member's ID (driver's licence, passport or equivalent) is required to be submitted with this form.**

## Section 1: Personal details (all fields are mandatory)

Surname:	<input type="text"/>	Salutation:	<input type="text"/>
Given name(s):	<input type="text"/>		
Date of birth:	<input type="text"/>	Gender:	<input type="text"/>
Postal address:	<input type="text"/>		
Suburb:	<input type="text"/>	State:	<input type="text"/>
	<input type="text"/>	Post code:	<input type="text"/>
Residential address:	<input type="text"/>		
Suburb:	<input type="text"/>	State:	<input type="text"/>
	<input type="text"/>	Post code:	<input type="text"/>
Telephone (BH):	<input type="text"/>	(AH):	<input type="text"/>
	<input type="text"/>	Mobile:	<input type="text"/>
Email address:	<input type="text"/>		

Would you like your username and password for online access automatically emailed to this email? Yes  No

I would like to receive electronic correspondence from NQ Super & Pension, where applicable, to the email address Yes  No

**Tax file number:**  See the PDS and AIB for important information about the TFN declaration

**Please note: If you are under the age of 60, you should also supply a standard TFN declaration form.**

**Citizenship details:**  
(Please tick one of the following)

<input type="checkbox"/>	I am an Australian citizen	<input type="checkbox"/>	I am a permanent resident of Australia
<input type="checkbox"/>	I am a New Zealand citizen	<input type="checkbox"/>	I hold a subclass 405 or subclass 410 temporary visa

## Section 2: Type of pension

Please select the pension you are applying for:

Account Based Pension (proceed to Section 3.1)	<input type="checkbox"/>	Transition to Retirement Account Based Pension (proceed to Section 3.2)	<input type="checkbox"/>
Term Allocated Pension (proceed to Section 3.1)	<input type="checkbox"/>		

**Please note: A term allocated pension is only available for transfers or rollovers of existing term allocated pensions into the Fund if the term allocation pension facility is open. See the AIB for important information about pensions including transition to retirement rules and changes to the taxation of pensions.**

## Section 3: Eligibility

**3.1 Account based pensions:**  
(Please tick one of the following)

<input type="checkbox"/>	I am aged 65 or over	<input type="checkbox"/>	I have reached my preservation age and am permanently retired
<input type="checkbox"/>	I am aged 60 or over, am not permanently retired and have terminated an employment arrangement	<input type="checkbox"/>	I am permanently incapacitated

**3.2 Transition to retirement pensions:** (Please tick to confirm)  I have reached my preservation age, and am engaged in gainful part-time or full-time employment (i.e. employed at least 10 hours per week)

## Section 4: Funding your pension

How will you be funding your pension? Please tick **all** applicable sources.

I have an NQ Super account and wish to use the funds from this account. My member number is:

How much money do you want to transfer to your pension account?  Full balance

Partial balance, please specify: \$

**If you are applying for a Transition to Retirement Pension you will need to maintain a minimum balance of \$6,000 in your NQ Super account.**

I would like to transfer funds from another superannuation provider.

Will this rollover include off-market transfer of shares?  Yes - Please specify approximate value: \$   No

**If you are transferring funds from another superannuation provider you must complete a Request to Transfer Form which is available on our website [www.nqpension.com/pds-and-forms/](http://www.nqpension.com/pds-and-forms/).**

I would like to make an additional voluntary contribution.  
Yes - Please complete a Member Voluntary Contribution Form which is available on our website [www.nqpension.com/pds-and-forms/](http://www.nqpension.com/pds-and-forms/).

**If you are aged between 67 and 74 you must complete a Work Test or Work Test Exemption Declaration Form which is available on our website [www.nqpension.com/pds-and-forms/](http://www.nqpension.com/pds-and-forms/)**

If none of the above options apply to you, please call the Administrator on 1300 264 264.

## Section 5: Pension payment options

Please be advised that I wish for my pension payments to commence in the month of:

I nominate pension payments to be:  Monthly  Quarterly  Half-yearly  Yearly

I nominate pension payments to be:  Minimum amount\*  Maximum amount\*  Actual amount: \$   per annum  per month

\*A maximum amount can only be specified for a Transition to Retirement Pension. Pension payments must meet government standards. We reserve the right to adjust your nominated pension payment so that government standards are met. From time to time, the minimum amount prescribed by law may change. For up to date information about the minimum, contact the Administrator on 1300 986 450 or go to [www.nqpension.com.au](http://www.nqpension.com.au)

**Term Allocated Pensions only (Term Allocated Pension is only available for transfers or rollovers of existing Term Allocated Pensions into the Fund if the Term Allocation Pension facility is open. Check [www.nqpension.com.au](http://www.nqpension.com.au) to check that this facility is currently available.)**

What is the term of your existing Term Allocated Pension?

Please select which life expectancy was used to calculate the term:  Your life expectancy

Your spouse's life expectancy<sup>#</sup>

<sup>#</sup>If you select this option, you must specify your spouse under the Nomination of Reversionary Pension section below.

## Section 6: Banking details (for pension payments)

BSB:  Account number:

Account name:

## Section 7: Beneficiaries

### Nomination of preferred beneficiary

You are able to nominate who you wish your benefits to be paid to in the event of your death. You can nominate a dependant or legal personal representative. You have the option of making two different types of beneficiary nominations:

- 1. Preferred beneficiary nomination** – please complete the section below; or
- 2. Binding beneficiary nomination** – you must use the separate Binding Nomination of Beneficiary Form available from [www.nqpension.com](http://www.nqpension.com)

Please note that a preferred nomination of beneficiary guides but does not bind the Trustee. You may revoke or change your nomination at any time by completing a new nomination of beneficiaries form. See the AIB for more information about nominating beneficiaries.

In the event of my death please pay my remaining balance to:

My estate

The following nominated dependants

Full name of preferred nominated beneficiary	Date of birth	Relationship	% of benefit
			100%

### Nomination of reversionary pension

Please specify the name of your spouse who you wish to nominate to become a reversionary pensioner in the event of your death.

Surname:  Given name:  Relationship:  Date of birth:

Address:  Post code:

Note: Refer to the AIB for more information. The person you nominate must qualify as your 'spouse' at the date of your death.

## Section 8: Investment choice

Do you wish to invest 100% into your advisers recommended investment portfolio?

Yes

No – Please complete the Investment Choice Form available from [www.nqpension.com](http://www.nqpension.com)

#### Please note:

- Please refer to the AIB for further information regarding the available investment options.
- If no allocation has been nominated, the Cash Account (the pension product's default option) will apply. Minimum initial investment of \$20,000 for the NQ Direct Share option.
- For the NQ Direct Share option and NQ Term Deposit options, to facilitate the payment of fees and other amounts, at least 5% of your account balance or \$5,000 (whichever is the lowest) must be maintained in the Cash Account, at all times.
- For the NQ Direct Share option you must have a licensed financial adviser and nominate that adviser in Section 9 of this form.

## Section 9: Adviser details

**Please Note: You can only nominate an adviser that is a representative of a dealer group that is authorised to provide financial services in relation to NQ Super & Pension.**

Adviser name:

Dealer group:  Phone number:

Practice name:  Email address:

AFSL number:  Authorised Representative number:

## Section 10: Consent to deduct one-off advice fee

**NQ Super & Pension must obtain your written consent before fees can be deducted from your account. If you do not agree with the amount described below, you do not have to sign this consent. You may vary or withdraw your consent at any time by notifying your adviser or NQ Super & Pension in writing.**

If you sign this form you will pay the following one-off advice fee from your NQ Super & Pension account(s).

**One-off advice fee** \$  Inclusive of GST .

As part of the advice, the dealer group will provide you with a Statement of Advice (SOA), which outlines what this fee includes. Refer to your SOA for detailed information about what services are associated with this fee.

Your consent expires once the amount is deducted from your super account. This means the dealer group will have to ask for your consent again if the Fund wants to deduct fees from your super account for further advice from the dealer group in future.

You can withdraw your consent to the deduction of fees from your account by contacting the Fund. However, your withdrawal must be received before the Fund deducts the one-off fee from your account.

## Section 11: Consent to deduct ongoing advice fees

**NQ Super & Pension must obtain your written consent before fees can be deducted from your account. If you do not agree with the amount described below, you do not have to sign this consent. You may vary or withdraw your consent at any time by notifying your adviser or NQ Super & Pension in writing.**

If you sign this form, you will pay the following ongoing advice fee from your NQ Pension account from the start date indicated below to the cease date.

Ongoing advice fee type	Fee estimate ^	Start date*	Cease date*
\$ Based fee \$ <input type="text"/> Inclusive of GST		<input type="text"/>	<input type="text"/>
% Based fee <input type="text"/> % Up to 2.2%, inclusive of GST p.a.	\$ <input type="text"/> Estimated p.a.	<input type="text"/>	<input type="text"/>
% Based insurance fee <input type="text"/> % Up to 33% of premiums paid, inclusive of GST p.a.	\$ <input type="text"/> Estimated p.a.	<input type="text"/>	<input type="text"/>

Your consent expires 150 days after the cease date of the ongoing advice fee. After this date, the dealer group will have to ask for your consent again if it wants to continue deducting ongoing advice fees from your account in return for ongoing services.

You can vary or withdraw your consent at any time by contacting your adviser or the Fund directly.

^ This amount is a fee estimate only based on your current balance or insurance premiums and an agreed percentage fee stated above which is to be applied at the time the deduction is processed.

\* You must provide a start date and cease date for the fee to be applied. The cease date must be a maximum of 12 months from the start date.

## Section 12: Transaction authority

I authorise my adviser as nominated in Section 9 to give or carry out instructions regarding the operation of my account (including investments) as set out below. I understand that in giving or carrying out instructions, my adviser may access my account details and transact on my account. I also understand that the Trustee or its services providers can accept and act on such instructions given by my adviser without requiring my signature, additional proof, instructions or further confirmation from me. The instructions or transactions for which this authority applies are:

1. Investment of the amount transferred into my account to commence a pension
2. Switching between investment strategies/ underlying investment holdings including purchasing and selling investments
3. Starting or stopping a regular withdrawal amount (where permissible under relevant law)
4. Changing the weightings of securities held in respect of your account.

Note: The Trustee cannot accept your application to the Fund without this authority in certain circumstances. Refer to the current PDS and Additional Information Booklet for further information.

**Member signature:**

Date:

## Section 13: Member declaration

I make the following declarations and acknowledgements:

### General

- I understand that I am bound by the provisions of the Trust Deed for NQ Super & Pension dated 12 May 2000 as amended from time to time.
- I have been provided a copy and have read and understood the relevant PDS and have obtained, read and understood the current Additional Information Booklet including any terms, conditions or limitations relating to the role of my nominated adviser, any investments in the Fund (including the Fund's investment options).
- I acknowledge that I have read and understood the information about contributions contained in the Additional Information Booklet and that I have satisfied myself that any contributions made by myself are consistent with the contribution rules prescribed by superannuation legislation.
- I consent to the Trustee accepting and acting on directions, instructions, requests and other communications (including faxes and emails) in relation to investment management and administration in connection with the Fund, from my adviser as nominated in Section 9 and any duly authorised signatory appointed by my nominated adviser or the dealer group, acting on my nominated adviser's behalf. I authorise the Trustee to continue to accept, rely upon and act on these communications until I notify the Trustee in writing otherwise.
- I understand that the adviser or dealer group nominated in Section 9 is not an employee, partner, joint venturer or agent of the Trustee.
- I agree to indemnify the Trustee against all losses, actions, liabilities, claims and expenses incurred by or on behalf of the Trustee, directly or indirectly, in relation to the Trustee (or a person acting on behalf of the Trustee including, but not limited to, the Trustee's directors, employees or service providers) acting upon the directions, instructions, requests and other communications given or transactions made by my adviser as nominated in Section 9 or a duly authorised signatory appointed by my nominated adviser or the dealer group acting on my nominated adviser's behalf.
- The information I have provided in this form is true and correct.

### Pension

- I understand that the pension I selected may not provide me with pension payments for the rest of my life, and that payments will cease once my account balance reduces to zero.
- I understand that if I commute my pension after joining (e.g. within a few years after joining) the value of my benefit may be less than I paid in.
- If applicable, in relation to my term allocated pension, I understand that once my term allocated pension has commenced, I cannot change the term of my pension, or amounts paid.
- I understand that pension products are complex and that different taxation and social security implications may apply to my pension depending on my personal circumstances. I acknowledge that the Trustee cannot provide me with advice about this and that I should consult an appropriately qualified adviser for advice that relates to my personal circumstances.
- In relation to a pension commenced (and continuing to be paid) under transition to retirement rules, I understand that additional restrictions apply to such pensions and that the tax treatment of such pensions has significantly changed from 1 July 2017.

### Personal information

- I acknowledge that I have read and understood the Privacy Policy described in the Additional Information Booklet.
- I acknowledge that I have read and understood the information about quotation of tax file numbers contained in the PDS and Additional Information Booklet.

### Investment

- I understand that my account balance can rise and fall, and that neither the Trustee, nor any of its directors, Acclaim Management Group Limited, nor any of its directors, nor any of the fund managers or financial product issuers utilised by the Fund or accessible to you via the Fund guarantee the performance of the Fund or its investment options.
- I acknowledge that the Trustee will invest my account in accordance with the selections made by myself in this form and (where applicable) in any Investment Choice Form (as varied by myself or my nominated adviser in accordance with my transaction authority, from time to time) but that the Trustee reserves the right not to do so where necessary or appropriate without liability to the Trustee.
- I hereby direct the Trustee to invest my account balance as indicated above, based on the declarations and acknowledgements made in this form.
- Where I have selected (or select) an illiquid investment, I acknowledge and accept that a period of longer than 30 days may be required to facilitate redemption or switching requests due to the illiquid nature of the investment.
- Where I have selected (or select) a Managed Fund or Term Deposit Investment Option, I have been provided a copy and have read and understood the relevant PDS for the investment(s) I have selected to invest in. I agree to obtain (and have or will obtain) the relevant PDS or disclosure document for the option from [www.nqpension.com.au](http://www.nqpension.com.au) before making any selection of an NQ Single Manager Investment Option or Term Deposit Option, or from my nominated adviser in Section 9 of this form.

## Section 13: Member declaration (continued)

### Advice fees

- I confirm my adviser has provided me with professional advice including the formulation of an investment strategy that has taken into consideration my personal objectives, financial situation and needs.
- I understand the initial one-off fee, ongoing fee and advice fee for insurance cover are negotiable between my nominated adviser and myself and that any fees agreed to by me are in addition to the other fees stipulated in the PDS.
- Unless I have stipulated otherwise in this form, I agree to the adviser remuneration detailed in Section 10 and 11 being deducted monthly in arrears from my account balance in the Fund as at the last day of the month and authorise the Trustee to pay that adviser remuneration to the dealer group and for the dealer group to pass on such amount (if any) it determines to my adviser as nominated in Section 9.
- If I have more than one account in the Fund, I agree to authorised advice fees being deducted in the manner set out in the AIB.
- I confirm my adviser has provided me with a Statement of Advice in relation to any financial product advice provided by my adviser as required by government legislation
- I am aware that any fees deducted by my adviser from my superannuation account are to be only in relation to the Fund or its investments.
- I am aware that if requested by the Fund or its Trustee, my adviser may provide copies of my Statement of Advice in relation to any advice fees deducted from my account in order for the Fund or its Trustee to ensure advice fees are in relation only to my interest in the Fund or its investments.
- I am aware that any fees deducted from my account that are paid to my adviser are to be only in relation to the Fund, its investments or insurance obtained through superannuation.
- I am aware that if requested by the Fund or its Trustee, my adviser may be asked to provide copies of my Statement of Advice in relation to any advice fees deducted from my account in order for the Fund or its Trustee to ensure advice fees are in relation only to my interest in the Fund.

Member signature:

Date:

## Section 14: Adviser declaration (adviser to complete)

I make the following declarations, undertakings and acknowledgements personally and on behalf of the dealer group shown in Section 9:

- I accept the terms of the adviser transaction authority in Section 9 and agree to act in accordance with this authority and any written instructions I receive from the member. I agree to provide the member with any information or documents that they request in relation to any instructions or transactions generated under this authority.
- I declare that all directions, instructions, requests and other communications I give to the Trustee, or transactions I make on the member's account will only be made after prior consent of the member and will include (where applicable) accurate and full information and disclose any facts or circumstances relevant to the communication or transaction.
- I confirm I am authorised through a holder of a current AFSL.
- I confirm that my authorisation enables me to provide financial services in relation to the Fund, including the Fund's financial products and investment and insurance options.
- I have provided the member with a Statement of Advice in relation to any financial product advice I have provided to the member as required by government legislation.
- I have provided the member with access to the current PDS or other disclosure documents for each of the selected investments available for investment through the Fund.
- I have fully disclosed to the member all fees and costs associated with investing in the Fund in accordance with government legislation.
- I will if requested by the Fund or its Trustee provide copies of a member's Statement of Advice in relation to any advice fees deducted from a member's NQ Pension account in order for the Fund or its Trustee to ensure advice fees are in relation only to the member's interest in the Fund, its investments or insurance obtained through superannuation
- I confirm that any adviser fees payable to me as agreed by the member are/ will be for financial services relating only to the Fund or its investments.
- I confirm that any changes to the amount, frequency, method or manner of payment of advice fees will be signed off in writing by the member prior to making such changes and that I will immediately notify the Trustee of such changes.
- I confirm that all emails and other electronic communications containing personal or sensitive information will be sent through a secure site using encryption or other devices to protect the information and that I will ensure the security, confidentiality and privacy of information (including personal information) about the member that I access from the Fund in accordance with all relevant Government legislation.
- Where I have submitted an electronic copy of this form, I confirm that I will retain the original copy of the form for a minimum period of 7 years and supply the original to the Trustee as requested by or on behalf of the Trustee.
- I agree to indemnify the Trustee against all losses, actions, liabilities, claims and expenses incurred by or on behalf of the Trustee, directly or indirectly, in relation to the Trustee (or a person acting on behalf of the Trustee including, but not limited to, the Trustee's directors, employees or service providers) acting upon the directions, instructions, requests and other communications given, or transactions made, by me or my duly authorised signatory.
- I agree to promptly refund, on request by or on behalf of the Trustee, any advice fees paid out of the Fund's assets that are not in accordance with the declarations and acknowledgements in this form.
- I agree to provide the Trustee with any information requested by or on behalf of the Trustee in relation to the adviser details and adviser remuneration shown in this form.
- If contacted by or on behalf of the Trustee from time to time to confirm my ongoing adherence to this Adviser Declaration, I will cooperate.
- I agree to immediately notify the Trustee if I breach or am likely to breach any relevant law, the terms of this Adviser Declaration or cease to be authorised to provide financial services relating to NQ Super & Pension
- I agree to seek member renewal of the adviser service fee arrangements every two years if it is not renewed before then.
- I agree to notify the Fund immediately if a renewal is not received and understand that the Fund will cease the payment of advice service fees.
- I agree to immediately notify the Trustee if any of the information provided by myself in this form ceases to be true and correct or changes in any way.
- I declare that I am duly authorised to provide the above declarations, undertakings and acknowledgements on behalf of the dealer group named in Section 9 of this form.
- I declare that all information provided by myself in this form is true and correct.

Adviser signature:

Date:

**Please return this completed form to NQ Super & Pension PO Box 3528, Tingalpa DC Qld 4173 or email to [info@nqpension.com.au](mailto:info@nqpension.com.au)**

Phone: 1300 113030 Fax: (07) 3899 7299 Website: [www.nqpension.com.au](http://www.nqpension.com.au)

**We are committed to respecting the privacy of the personal information you give us.**

Our formal Privacy Statement sets out how we do this. If you would like a copy of NQ Super & Pension's Privacy Statement, please let us know. We have published our Privacy Statement on our website at [www.nqpension.com.au](http://www.nqpension.com.au)