

## **Super Savings**

## How to make a claim

## **Early Release of Super on Compassionate Grounds**

#### **Please note:**

If you have ceased work due to sickness or injury, call us on **13 11 84** before proceeding.



#### Am I eligible to make a claim?

#### Do you need financial help with:

	<b>Medical treatment or transport for you or your dependant(s)?</b> To pay for medical costs and transport required to treat a life-threatening illness or injury, acute or chronic pain, or an acute or chronic mental disturbance.
	<b>Modifications to your home and/or motor vehicle?</b> To fund specific modifications that are necessary to accommodate special needs if you or your dependant has a severe disability (doctor's certification required).
	<b>Funeral assistance?</b> To assist with funeral and other expenses related to the death of a dependant.
	<b>Palliative care?</b> To provide care for you or your dependant who is dying from a terminal illness (including home care).
	Mortgage assistance? To prevent your mortgagee (lender) from selling your principal

#### If you ticked any of the above boxes you are eligible to apply.

It's important to know that you may pay extra tax if you make a claim. Refer to ato.gov.au for more information on tax implications.

See step 1 below for details on how to apply.

#### STEP 1

#### How do I apply?

place of residence.

#### **Get approval from Australian Taxation Office (ATO)**

We cannot process your claim without approval from the ATO. For Australian Retirement Trust to allow the early release of your super on 'compassionate grounds' the **ATO must first be satisfied that your application meets the eligibility criteria**. The ATO will notify you in writing of their assessment of your application. You must attach **the approval letter from the ATO** when returning this form. To apply for approval or to find out more information, the ATO can be contacted on 13 10 20 or at ato.gov.au

#### STEP 2

#### **Obtain supporting documents**

Before you can apply you will need to obtain supporting documents. Please refer to page 2 of this form for more information.

#### Important information

The Q230 and Q251 letters issued by the DHS for financial hardship claims WILL NOT qualify you for a compassionate grounds claim. Please contact Australian Retirement Trust to discuss your options.

# Want your payment as quickly as possible?

You MUST complete ALL mandatory fields (we'll return your form if it is incomplete) and attach your approval letter from the ATO.

Make sure you provide **ALL** the requested bank or credit union account details.

#### STEP 3

#### Complete the attached form

The below describes important things to remember when completing each section of the form

## 1,2 Personal details & Employment details

Ensure you include your residential address. **Legislation states we may not be able to process your claim without this.** (Please note a PO Box is not a residential address.)

## 3 Claiming a tax deduction

Carefully consider if you want to claim a tax deduction on contributions you've made to your account first. Refer to ato.gov.au for more information.

## 4 Your payment amount

The amount you request here cannot be more than the amount approved by the ATO. Refer to ato.gov.au for information on tax implications.

## 5 Your payment details

Money cannot be paid into a credit card account, third party account or an overseas account.

## 6 Proof of identity

You can use this section to give your consent to Australian Retirement Trust to electronically verify your identity. If you prefer not to be verified electronically, refer to our Proof of Identity Requirements Factsheet at <a href="mailto:art.com.au/poi">art.com.au/poi</a> for instructions on how to prove your identity using your identity documents.

#### 7 Checklist

Use the checklist to double check everything is complete.

#### 8 Authorisation and declaration

Then read the statements and sign.

We can accept scanned copies of your form and your approval letter from the ATO, however all certified proof of identity documents must be mailed to Reply Paid 2924 Brisbane Qld 4001.

## **Super Savings**

# Early Release of Super on Compassionate Grounds



13 11 84 | art.com.au Reply Paid 2924 Brisbane Qld 4001

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Member number

**Important note:** Only Australian or New Zealand citizens or permanent residents of Australia are permitted to claim for early release of super on compassionate grounds.

Q230 and Q251 letters issued by the DHS do not qualify you for a compassionate grounds claim. Please contact Australian Retirement Trust to discuss your options.

**Important:** Please provide us with as much information as possible. Please tick boxes where appropriate.

Use BLOCK letters and dark ink when completing this form and ensure it is signed and dated. \*DENOTES MANDATORY FIELD.

1 Personal details						
Title						
First name*	Middle name					
not nume						
Last name*	Date of birth*	MYYYY				
<b>dome address*</b> (must not be a PO Box)						
Suburb*	State*	Postcode*				
<b>Postal address</b> (if different from your home address	5)					
Suburb*	State*	Postcode*				
Mobile number	Daytime contact nu	ımber				
<b>Email*</b> Use your personal rather than a work email a	address, so we can contact yo	ou if your work situation changes.				
Tax file number (TFN) details						
ou are not required to provide your TFN. If we do no	ot have your TFN, you may pa	ay more tax than you need. You can provide or update your TFN in Member Online				
r by completing a Tax File Number Notification forn	n available on our website. To	o protect your privacy, please do not write your TFN on this form.				
2 Employment details						
Please provide the name of your last employer*		Are you still working for this employer?*				
		YES NO If No, what date did you finish?* (DD/MM/YYYY)				
Please note if you ceased work due to sickness or injury call us on 13 11 84.						
Claiming a tax deduction						

If you want to claim a tax deduction on voluntary after-tax contributions you have already made, you must do this before you submit this form.

If you make a partial or full-withdrawal from your Accumulation account before submitting a request to claim a tax deduction, you will not be able to claim some (or all) of the amount you have contributed as a tax deduction. Find out more at <a href="mailto:art.com.au/tax-deductions">art.com.au/tax-deductions</a>.

If you intend to claim a tax deduction, you can let us know by completing the online form in Member Online.

Please continue over page

#### Your payment amount How much would you like us to pay you? You can choose the total amount the ATO has approved for you or a lesser amount. Please pay me: the total the ATO approved amount (before tax) OR before tax after tax a lesser a lesser \$ OR (gross) amount of: amount of: (net) **Note:** the amount requested cannot be more than the amount approved by the ATO. Where your account balance falls below \$6,000 after this payment is made and you want to maintain your insurance cover in your account, you'll need to ensure there is enough money to pay for any future insurance premiums and you will need to make at least one eligible contribution every 12 months or advise us in writing via art.com.au/keep-my-insurance that you wish to retain your insurance cover. If you choose a lesser amount than what's approved by the ATO, no additional payment will be made at a later date. Your payment details Please ensure the Australian bank, building society or credit union account details provided are accurate and written clearly. We may not be able to recover funds paid to an incorrect account where incorrect details are provided below. We can only deposit amounts into an account held in your name or jointly in your name. Name on account\* Branch (BSB) number\* Australian bank account number\* Name of financial institution\*

Money cannot be paid into a credit card account, third party account or an overseas account. We will take care to ensure your money is paid in accordance with the details you have provided. However, we accept no responsibility for any loss which occurs as a result of incorrect account details you provide us.

If the bank or credit union rejects the payment of your money, we'll pay you by cheque and may take longer than payments made electronically. For account validation purposes, we may require a copy of your bank statement to confirm bank account ownership and will advise if this is required.

Please continue over page

### Proof of identity

As part of the electronic verification process, we will submit your document details (for example, your driver's licence number) to third party credit reporting agencies (CRAs) and/or the Australian Government's Document Verification Service (DVS) for the purpose of confirming your identity. The DVS checks whether the information you provide matches the original records held by the relevant authorities. A CRA may check your information against the DVS and/or against records in your credit information file.

We will only use the information you provide to verify your identity and not for any other purpose. A CRA does not give us access to your credit related information, such as credit card and loan applications.

More information about the DVS is available on the Australian Government's IDMatch website at **www.idmatch.gov.au**. More information on how we electronically verify your identity and your rights is available in our Proof of Identity Requirements fact sheet available at **art.com.au/poi**.

Please choose one of the proof of identity options below.

Вус		onal details presented. I confirm I have read and understood the process for verifying my at to my information being verified electronically via submission to the DVS and/or a CRA.
You must	st provide either driver licence or Australian passport details	s if you are choosing electronic verification, plus your Medicare card if available.
1.	Full name exactly as it appears on my driver licence	
	Licence number Car	rd number (as shown on back or front of licence)¹
	State of issue Val	lid to
	1 Some Australian States and Territories have mandatory driver's licence numbers a you have to give us both so we can complete our checks.	and driver's licence card numbers. If that's the case for your area,
2.	My Australian passport number is Pas	ssport expiry date
		D D M M Y Y Y Y
	Full name including middle name (as shown on passport)	
	Place of birth (as shown on your passport)	
	Country of birth (not shown on your passport)	
	Family name at birth (not shown on your passport)	
3.	Full name <b>exactly</b> as it appears on my Medicare card	
	My Medicare number is Val	ilid to
		M 2 0 Y Y My reference number on this card is
	Select your Medicare card colour Green Blue	e Yellow
Option 2	2 - Document-based verification	
		VS or via a CRA, we may verify your identity in other ways but this may take longer. com.au/poi for instructions on how to prove your identity using your identity documents.

Please continue over page

Checklist						
So that your application can be processed as quickly as possible, please comple necessary sections and all required information has been supplied.	ete the following checklist to ensure you've completed all of the					
Have you read the How to make a claim pages of this form, including impacts to my insurance and tax payable?	Have you attached a copy of your approval letter from the ATO?					
Have you completed this application form in full and signed and dated the authorisation and declaration below?	If you prefer not to be verified electronically, have you referred to our Proof of Identity Requirements Factsheet at art.com.au/					
If you want be able to claim a tax deduction, have you completed the Notice of Intent to Claim a Tax Deduction form in Member Online?	poi for instructions on how to prove your identity using your identity documents?					
Remember: The Q230 and Q251 letters issued by the DHS do not qualify you for a compassionate grounds claim. Please contact Australian Retirement Trust to discuss your options.						
Important If you prefer not to be verified electronically, all certified Proof of identity documents must be mailed to us.						
8 Authorisation and declaration signed on behalf of the	ne member					
By signing this request form I am making the following statements:						
$\bullet~$ I declare I have fully read this form and the information completed is true and correspond to the complete of the second corresponds to the contract of the corresponding corresponds to the cor	ect.					
• Where the full balance of my account is paid from Australian Retirement Trust, I hereby release Australian Retirement Trust from any further liability to me or my executors, administrators or dependants in respect of my participation in the Fund and request and authorise the termination of my membership in the Fund. I understand that by doing this my insurance cover (if any) will end.						
- $$ I approve the deduction of any applicable tax from the benefit paid. I am aware of	taxes that may apply.					
• I have considered the fees and charges, impact on insurance cover and the implication to my benefit entitlement prior to applying for the early release of my super on compassionate grounds. I do not require further information and authorise the withdrawal to proceed.						
I am a citizen or permanent resident of Australia or citizen of New Zealand.						
Full name (print in BLOCK letters)*						
Signature*	Date signed* (DD-MM-YYYY)					
	D D M M 2 0 Y Y					
Please sign in blue or black pen. Digital signatures only accepted if form is saved as a	read-only, certified copy with an audit trail.					
9 Send us your form						
Send your completed form and certified ID (if applicable) to us by:	Save form					
Post: Australian Retirement Trust Reply Paid 2924 Brisbane Qld 4001	Print form					
Online: You can upload your forms securely using our website at art.com.au/upload						

We're careful with your personal information. Our privacy policy explains how we handle it. You can find it at art.com.au/privacy