

# CFS Edge Super/Pension Withdrawal form

SAVE FORM

PRINT FORM

This form can be used to withdraw cash from your CFS Edge Super or Pension account.

Mark appropriate answer boxes with a cross like the following . Start at the left of each answer space and leave a gap between words. All fields marked with an asterisk (\*) are mandatory and are required for us to complete your request.

Please upload the completed form to the Document Library via our online portal.

Telephone (for assistance) 1300 769 619

## THIS FORM CAN BE USED TO:

	Section
Request a rollover payment	1, 2, 4, 6 and 7
Request a lump sum payment	1, 3, 4, 5, 6 and 7

This Withdrawal form can be used to request a lump sum payment or a rollover. If you wish to receive a one off pension payment, your adviser can complete this request on your behalf or you can phone CFS Service and Support on 1300 769 619.

We are unable to reclassify your withdrawal type once we have processed your withdrawal from your CFS Edge Pension account.

Please speak to your adviser about the circumstances in which lump sum payments are available for Term allocated pension and Transition to retirement accounts.

## 1 ACCOUNT AND CLIENT DETAILS

\*Account number

\*Account name

\*TFN (if not previously provided). Please read 'About your TFN' at the end of this form before providing your TFN.









## 2 ROLLOVER PAYMENT DETAILS

Complete this section if you would like your withdrawal to be rolled over to another institution. Please complete all details and ensure that you provide us with a valid Australian Business Number (ABN), Unique Superannuation Identifier (USI) and for Self-Managed Super Funds (SMSF) a valid Electronic Service Address (ESA) alias.

### 2.1 ROLLOVER FUND DETAILS

Complying super fund ABN

\*Unique Super Identifier

\*Rollover institution fund name

\*Membership number

### 2.2 SELF-MANAGED SUPER FUND (SMSF) PAYMENT DETAILS

SuperStream must be used to transfer your super benefits to an SMSF due to regulatory changes. A redemption request cannot be processed until your SMSF details are verified with the ATO. This means that your SMSF will need an Australian Business Number (ABN), an Electronic Service Address (ESA) alias, and a SMSF bank account. Ensure before submitting your request that all SMSF details are up to date with the ATO.

\*SMSF name

\*SMSF ABN

and

\*Electronic Service Address (ESA) alias

SMSF Membership number

**Note:** Any amendments to the bank details must be initialled.

\*Branch number (BSB)







\*Account number











\*Name of bank account

**Note:** The bank account name must be in the name of the SMSF trustee.

**3 LUMP SUM DRAWDOWN – use this section if you would like to withdraw a lump sum from your Superannuation or Pension account**

Please select one box only:

- I have attained age 65
- I am aged 60 to 64 and have ceased a gainful employment arrangement since turning age 60.
- I am under 65 years of age and have reached preservation age. I have permanently retired and never intend to become engaged in gainful employment for 10 or more hours per week.
- I am withdrawing unrestricted non-preserved amounts only
- I have a terminal medical condition<sup>1</sup>
- I am permanently incapacitated<sup>1</sup>
- I have met a condition of release under compassionate grounds<sup>1</sup>
- I have met a condition of release under financial hardship<sup>1</sup>
- Please cross if you are **not** a holder of Australian/New Zealand citizenship or permanent residency

Go to Section 4 if CFS Edge Super account

**4 INTENTION TO CLAIM A TAX DEDUCTION ON ANY PERSONAL CONTRIBUTIONS – use this section if you have received member contributions into your Superannuation account in the current or previous financial year**

Do you intend to claim a tax deduction on any personal contributions?

- No (continue to Section 5)
- Yes (complete the Notice of intent to claim a deduction via the CFS Edge online portal. Your adviser can assist with initiating this transaction)

**Important note:**

The trustee will send an acknowledgment notice to all members who have returned a Notice of intent to claim a deduction.

To claim a deduction for your personal superannuation contribution you must have given us a valid Notice of intent to claim a deduction, on or before the day you lodge your income tax return (or the end of the next income year, whichever occurs first), and the trustee must have given you an acknowledgment notice.

You cannot lodge or vary a notice of intent to claim a deduction if:

- the fund named on this form has commenced paying a pension based on part or all of the contributions for which you intend to claim a deduction; or
- you have previously withdrawn an amount or rolled out to another fund all or part of the contribution for which you want to claim a deduction.

**5 LUMP SUM PAYMENT DETAILS**

**Note:** Any amendments to the bank details must be initialled.

\*Branch number (BSB)

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\*Account number

\*Name of bank account

See section 2 for all rollover requests.

<sup>1</sup> Please contact your adviser for certified document requirements to enable this transaction.

## 6 WITHDRAWAL AMOUNT

### 6.1 PARTIAL WITHDRAWAL DETAILS

Partial lump sum/rollover for \$

This withdrawal will be made gross of fees and taxes.

Please ensure there are sufficient funds in the cash account or that trades have been placed on your account to cover this request and minimum cash balance requirements. You are required to maintain a minimum of \$10,000 in your account after any partial withdrawals. If required, we will adjust your payment amount to ensure this minimum is maintained.

OR

### 6.2 FULL CLOSURE WITHDRAWAL DETAILS

Full lump sum/rollover and closure of the account

Does this account hold suspended funds, outstanding redemptions and/or corporate actions that may prevent this transaction being processed in one amount?

No (continue to **Section 7**)

Yes

Transfer as much as possible now, and the remainder when it is available in the cash account

Transfer the whole amount once it is available in the cash account

If no selection is made above we will transfer the **whole amount once it is all available in the cash account** unless there are suspended funds that are not immediately redeemable. In those cases we will transfer the available cash once all liquid funds have been redeemed.

Are you closing an Allocated Pension account which holds suspended funds?

No (continue to **Section 7**)

Yes

Please ensure the current financial year minimum pension payment requirements have been met in full then cancel ongoing payments

Please ensure there is sufficient cash available to continue making the regular pension payments for the remainder of the current financial year

If no selection is made, we will keep sufficient cash in the account to continue making the regular pension payments for the remainder of the current financial year.

**Please note:** If you have insurance on this account, your insurance cover will continue in accordance with the policy terms until your account is closed and insurance premiums will continue being deducted from your superannuation account.

Please contact your adviser to discuss your options if you require insurance cover once the superannuation account has been closed.

## 7 DECLARATION AND SIGNATURE

I declare that:

- I authorise my withdrawal to be paid as instructed on this form;
- if the withdrawal relates to a rollover I am aware that fees and charges may apply, and I have all the required information about the effect this rollover may have on my benefits;
- I have access to the current PDS including all statements and information that are incorporated by reference and I have read or do not require such information;
- all details in this form are true and correct;
- I acknowledge that if premiums for an insurance policy are being deducted from my superannuation account via a rollover, my cover will continue in accordance with the policy terms and premiums will continue to be deducted from my account (as long as sufficient funds are available) until my account is closed or my cover is cancelled;
- where my other fund is an SMSF, I confirm that I am a member; and
- I consent to my information being used in accordance with the CFS privacy policy.

\*Member signature

\*Name

\*Date



If you complete this declaration with a wet signature, please submit a copy of your certified ID to accompany this request.

## 8 ABOUT YOUR TAX FILE NUMBER (TFN)

Under super law (*Superannuation Industry (Supervision) Act 1993 (Cth)*), we can collect your TFN. If you provide your TFN, it will be treated confidentially.

If you give us your TFN, you are giving us consent to use it for legal purposes, including:

- calculating the tax on any benefits you're entitled to
- providing information, including your TFN, to the Commissioner of Taxation
- where applicable, searching for your other super accounts, using your TFN.

If you ever ask us to roll over your benefits to another super fund, we may also give your TFN to that fund.

You don't have to give us your TFN – it's not required by law. But if you don't:

- you won't be able to make personal contributions to your account
- you may pay more tax on your benefits than you would otherwise have to – sometimes significantly more
- you also may not receive Government co-contributions that you may otherwise be eligible for
- it may be difficult to find and consolidate your super benefits or to pay the benefits you are entitled to receive.

**Please note:** The legal purposes may change in the future following legislative change and the consequences of not providing your TFN may also change as a result.