

Combine my super – full rollover form



Save time, go online!

The quickest way to roll your super into UniSuper is by logging into your account at unisuper.com.au.

Use this form to transfer the **entire** balance of your super from another fund to your UniSuper account. If you're rolling over more than one account, you'll need to complete a form for each rollover. To arrange a partial rollover into UniSuper, please contact your other fund.

Please note: If you're a UniSuper pension member and you don't have an active super account, we'll open an Accumulation 1 account on your behalf to receive your rollover. You won't receive any default insurance cover and your rollover will be invested in our default investment option (Balanced).

BEFORE YOU ROLLOVER

If you rollover your full balance, your other super account may close. You may have insurance that you'll lose, incur fees or have tax obligations. If you're unsure or have insurance you want to keep, you may want to speak to a financial adviser.

You should also confirm your personal details are current and correct with both us and your other fund before you begin.

VERIFYING YOUR IDENTITY

We'll verify your identity using your TFN. If you haven't provided your TFN or it can't be validated, we'll require you to send us a certified copy of your identification with your form.

WHEN WILL THE ROLLOVER BE COMPLETED?

Rollovers generally take about five business days to be completed. Once we receive your form, we'll send a request to your previous fund on your behalf.

There can sometimes be delays if the information you provide isn't correct or if your previous fund requires additional information. It's best to follow up with your previous fund to make sure your request is processed promptly.

You can check to see if your rollover request has been successfully completed by logging into your account at unisuper.com.au or by calling us on **1800 331 685**.

SELF-MANAGED SUPER FUNDS (SMSFS)

You can't use this form if you're looking to rollover a self-managed super fund (SMSFs). Rollovers from SMSFs must be initiated by the SMSF administrator.

Any rollover amounts will need to be sent electronically via an approved SuperStream payment method. Your administrator will also need to notify UniSuper via an approved SuperStream channel. Please provide your administrator with the UniSuper details listed below to arrange a rollover from your SMSF.

Fund: UniSuper

UniSuper USI: 91 385 943 850 001

UniSuper ABN: 91 385 943 850

The name of your UniSuper Product (Accumulation 1 or 2, Defined Benefit Division, Personal Account)

SECTION 1 YOUR DETAILS

- ▶ Please complete in BLACK or BLUE BALL POINT PEN using CAPITAL letters. Cross (X) where required.
- ▶ Please note all fields are mandatory apart from your tax file number (TFN). Please read information about providing your TFN at unisuper.com.au/tfn. You can also request a copy of that information by calling **1800 331 685**.

Member number

Title

Mr Mrs Ms Dr Professor Other

Surname

Given name(s)

This includes your first and middle name(s).

Date of birth (DD/MM/YYYY)

Sex at birth* Male Female

* Insurance premiums are based on your sex at birth which may not match your gender identity, please refer to *Insurance in your super* for more information.



SECTION 1 CONTINUED

Daytime contact number	<input type="text"/>		
Email address	<input type="text"/>		
Your tax file number (TFN)	<input type="text"/>		
	<input type="checkbox"/>	I don't wish to quote my TFN.	
Residential address (not PO Box)	<input type="text"/>		
Suburb/Town	<input type="text"/>		
State	<input type="text"/>	Postcode	<input type="text"/>
Country (if not Australia)	<input type="text"/>		

SECTION 2 OTHER FUND DETAILS

➤ Refer to the latest correspondence from your other fund to help you complete these details.

Membership/policy number of previous fund	<input type="text"/>		
Full name of previous fund	<input type="text"/>		
Please complete two of the following:			
Australian Business Number (ABN) of previous fund	<input type="text"/>		
Unique Superannuation Identifier (USI)	<input type="text"/>		
Product name/ID	<input type="text"/>		
Phone number of previous fund	<input type="text"/>		
Address of previous fund (number and street, or PO Box)	<input type="text"/>		
Suburb/Town	<input type="text"/>		
State	<input type="text"/>	Postcode	<input type="text"/>

SECTION 3**MEMBER DECLARATION AND SIGNATURE**

➤ Please read this declaration before you sign and date or upload your form to your online account.

I declare that:

- the information provided on this form is true and correct
- I consent to the rollover of superannuation as described on this form and authorise the superannuation provider to give effect to my rollover request
- I authorise UniSuper (or its agents) to contact my other super fund regarding this request to rollover my super from that fund into my UniSuper account
- I am aware that I may ask the trustee of my previous fund for all the information that I need to understand my benefit entitlements in that fund and the effect of a rollover on my benefit entitlements and understand and acknowledge the implications of rolling over my benefit from my previous fund into UniSuper
- I discharge the trustee of my previous fund from all further liability in respect of the benefit rolled over to UniSuper
- I acknowledge and understand that rollovers retain their preservation status and that preserved benefits must generally remain in the superannuation system until I meet a relevant condition of release
- I authorise UniSuper to invest my rollover in accordance with my current investment instructions
- I understand that if I do not have a future contributions strategy or rollover strategy, my rollover will be invested in the Balanced investment option which is the fund's default investment option and its MySuper offering
- I consent to my tax file number (if provided) being disclosed for the purposes of consolidating my account
- I consent to my personal information being used in accordance with UniSuper's Privacy Policy.

Signature

Date

<input type="text"/>	<input type="text"/>	<input type="text"/>
DD	MM	YYYY

Returning your form

Mail to: UniSuper
Level 1, 385 Bourke Street
Melbourne Vic 3000

Email to: enquiry@unisuper.com.au

PRIVACY STATEMENT

UniSuper is committed to protecting your personal information in accordance with privacy law obligations. The information that you provide to UniSuper on this form is collected and used in accordance with our Privacy Policy which can be found online at unisuper.com.au/privacy. If you have any privacy related questions, please call **1800 331 685**.

Need help?

If you need more information or help to complete this form:

- Email enquiry@unisuper.com.au
- Call **1800 331 685**.