



Transfer to a self-managed super fund

Important information about this form

- Use this form to transfer part or all of your benefit to a self-managed super fund (SMSF).
- If you request a partial transfer, you must leave at least \$6,000 in your account.
- Proportioning rules require your taxable and tax-free components to be spread in equal proportions across your benefit payment.

Important Information if you have lifePLUS Protect insurance cover:

- If you elect to transfer all of your benefit to another super fund, your lifePLUS Protect insurance cover will cease effective from the day you transfer.
- If you are requesting a partial transfer and are still contributing to ADF Super, your lifePLUS protect insurance cover will remain on your account* and premiums will continue to be deducted. Your insurance cover will continue as long as there's enough in your PSSap account to pay for insurance premium deductions.
- If you are requesting a partial transfer and are no longer contributing to ADF Super, to protect your super balance, under super law we have to make accounts inactive if we don't receive any contributions for 16 consecutive months. Making an account 'inactive' stops your insurance cover. If you want to keep your cover, even though your account is inactive, you'll need to write to us within 60 days of your account becoming inactive, to let us know. Your insurance cover will continue as long as there's enough in your ADF Super account to pay for insurance premium deductions.
- Before changing or consolidating super funds, make sure you can get the insurance cover you need in your chosen fund.

*CSC is required to cancel your insurance cover in some circumstances. We will get in touch with you ahead of time if your account is at risk of having insurance cover cancelled.

How to use this form

Please use CAPITAL LETTERS and a black or blue pen.

Mark boxes like this ☐ with a ✓ or ✗ then fill out the next question or section.

Submitting your form

If you wish to use the Document Verification Service (DVS), please email your application and a copy of one of the listed ID requirements in **Section D** to: formsandapplications@adfsuper.gov.au

Or

If you do not wish to use DVS, please send your completed form and your certified proof of identity documents to:

ADF Super
Locked Bag 20116
Melbourne VIC 3001



Australian
Defence Force
Superannuation

Privacy

We're committed to protecting your privacy. We collect your personal information for the purposes of providing superannuation services to you, improving our products and to keep you informed. We will only share your personal information where necessary for providing superannuation services to you. This may include disclosing your personal information to our scheme administrator, service providers or government or regulatory bodies. Your personal information may be accessed overseas by our service providers. Please see our privacy policy for full details. Your personal information will not be otherwise used or disclosed unless required or permitted under law. A full copy of our privacy policy as well as the privacy complaint process is available at csc.gov.au/privacy



Provide your personal details

ADF Super membership no.	<input type="text"/>																
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="text"/>																
Surname	<input type="text"/>																
Given name(s)	<input type="text"/>																
Date of birth	<table><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table>	D	D	M	M	Y	Y	Y	Y	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Address	<div>RESIDENTIAL ADDRESS</div> <div><input type="text"/></div> <div><input type="text"/></div> <div>SUBURB</div> <div><input type="text"/></div> <div>STATE</div> <div><input type="text"/></div> <div>POSTCODE</div> <div><input type="text"/></div> <div>POSTAL ADDRESS</div> <div><input type="text"/></div> <div><input type="text"/></div> <div>SUBURB</div> <div><input type="text"/></div> <div>STATE</div> <div><input type="text"/></div> <div>POSTCODE</div> <div><input type="text"/></div>																
Phone	<div>BUSINESS HOURS</div> <div><input type="text"/></div> <div><input type="text"/></div> <div>AFTER HOURS</div> <div><input type="text"/></div> <div><input type="text"/></div>																
Mobile Number	<div>MOBILE NUMBER</div> <div><input type="text"/></div> <div><input type="text"/></div>																
Email	<div><input type="text"/></div> <div>@ <input type="text"/></div>																
Your Tax File Number (TFN)	<div><input type="text"/></div> <div><input type="text"/></div> <div><input type="text"/></div>																
	<input type="checkbox"/> I have already provided my TFN to ADF Super (You can check this by logging into ADF Super Member Online or under the 'Your details' section of your Member Statement).																

ADF Super is authorised to collect and validate your Tax File Number (TFN) under the *Superannuation Industry (Supervision) Act 1993*. To improve the electronic transfer of funds between superannuation providers, ADF Super is required to validate your TFN with the Australian Taxation Office (ATO). In the event that your TFN cannot be validated, or you do not wish to provide your TFN, you will be required to provide identification in accordance with **Section D**.

Confirm the amount you would like to transfer to your SMSF

Option 1: A partial amount of (You must leave at least \$6,000 in your ADF Super account)

\$. net

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D	D	M	M	Y	Y	Y	Y

☐ Wait for my final employer contribution

Confirm the details of the SMSF we are transferring to

[illegible]

AUSTRALIAN BUSINESS NUMBER

[illegible][illegible]**POSTAL ADDRESS**[illegible]

SUBURB

[illegible]

STATE

--	--	--

POSTCODE

--	--	--	--

Account name

[illegible]

BSB number

			-			
--	--	--	---	--	--	--

Account number

[illegible]

If this happens, we'll be in touch with you within 5 days of receiving your rollover request.



Identification requirements

To confirm your identity, we need some information from you—this is to protect your benefit against fraud, money laundering and terrorism financing, under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*.

Verifying your documents

You can authorise us to verify your identification electronically using the Document Verification Service (DVS). DVS is a national online system that allows approved government agencies and organisations to compare a member's identifying information with a government record. It is not a database and does not store any personal information. Requests to verify a document are encrypted and sent via a secure communications pathway to the document issuing authority for checking.

If you don't provide authorisation to have documents verified electronically or your documents are incompatible with DVS, you will need to provide certified copies of required documents. Please also refer to the section Certifying your documents.

An electronic copy of your identification documents will be stored in a secure environment and hard copies will be securely stored off-site. All copies will only be used for the purpose of confirming your identity. You need to send in identification with every application.

DVS is only compatible with some identification documents, these have been listed below.

Certifying your documents

If you're providing certified documents, the certifying authority must confirm in writing that you are the valid holder of the identification you are presenting, and any copies are true copies of the original.



IMPORTANT: The certification must include the name, signature, qualification and registration number of the certifying authority (if applicable), and the date of the certification.

The following sample of certifying authorities can certify your documents in Australia:

- Dentist
- Employee of a Commonwealth authority engaged on a permanent basis with five or more years of continuous service who is not specified elsewhere in this document
- Financial Adviser or Financial Planner
- Justice of the Peace (JP)
- Legal Practitioner
- Medical Practitioner
- Member of the Australian Defence Force who is:
 - an Officeror
- a Non-Commissioned Officer within the meaning of the *Defence Force Discipline Act 1982* with five or more years of continuous service
- or
- a Warrant Officer within the meaning of that Act
- Midwife
- Notary Public
- Nurse
- Occupational therapist
- Physiotherapist
- Psychologist

For a full list of certifying authorities refer to **Schedule 2** of the *Statutory Declarations Regulations 2018* available at legislation.gov.au

Please note:
We require a copy of both sides of your identification document.

How can I meet the identification requirements?

You only need to provide **one** document from the **Primary photographic identification** category. If you can't provide any **Primary photographic identification** you will need to provide **one** secondary identification document from List A AND **one** secondary identification document from List B. We can only accept documents that are listed below for identification purposes.

If the name we hold on file for you is different to the name on your identification, or two pieces of identification are in different names, please provide a certified copy of your **Marriage** or **Change of Name certification**.



If you would like us to use DVS to verify your identification, please provide authorisation below.



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I confirm that I am authorised to provide the personal details presented and I consent to the information being checked with the document issuer or official record holder via 3rd party systems for the purposes of confirming my identity.



You must provide a copy* of one of the following:

Primary photographic identification

DVS compatibility is shown as  or 




-  A current Australian Driver's Licence.
-  A current Australian Passport (or one which has expired within the last two years).
-  A current Australian Proof of Age card (issued under a State or Territory law).

If your documents are incompatible with DVS, don't forget to provide certified copies.




Secondary identification requirements

Only provide these documents if you're unable to provide one of the Primary photographic identification documents.

List A

-  Your Australian Birth Certificate or extract issued by a State or Territory.
Please note: Birth Certificate extracts and Birth Certificates issued before 1970 may not be verified by DVS.
-  Your Citizenship Certificate issued by the Commonwealth.
-  Your current Centrelink Pensioner Concession Card.

List B

-  Your notice issued by the Australian Taxation Office (ATO) within the last 12 months that shows your name, current residential address, and records an amount payable either to or from the ATO.
-  Your notice issued by a local council or utilities provider in the last three months showing the provision of services and current residential address. For example: rates notice, electricity or water bill.
-  Your notice issued by the Commonwealth or a State or Territory government within the last 12 months showing your name and current residential address, and the provision of a financial benefit. For example: a Centrelink letter.

Certifying your documents overseas

If you live overseas and need to have documents certified, it needs to be done by a person authorised as a notary public in a foreign country, or by a person who is on a list of persons before whom a statutory declaration may be made and who has a connection to Australia. **For example:** a doctor who is registered in Australia and working overseas, or an Australian Consular Officer. Refer to ag.gov.au and dfat.gov.au for more information. Documents provided in a foreign language must be accompanied by a certified translation completed by an accredited translator.

Persons residing overseas and foreign residents may need to contact us.

***Please don't send original documents. If your document is incompatible with DVS, or you do not wish for us to verify your ID through that service, please make sure you send us a certified copy of your documents.**



Declare and sign this form

I declare that:

- The information I have provided on this form is true and correct
- I understand my insurance cover may cease if I do not retain enough funds to pay my insurance premiums or if CSC is otherwise required by legislation to cancel my cover
- I have provided proof of identity documents to prove my identity, appropriately certified, or I have provided authority to CSC to verify those documents through DVS.
- I authorise the exchange of personal information with the Australian Tax Office for the purposes of verifying my SMSF
- I understand that if I am making a partial withdrawal only, a minimum of \$6,000 will be retained in my account



Sign

SIGNATURE

Date of declaration

D	D	/	M	M	/	Y	Y	Y	Y

You have now completed this form.

Please send your completed form and supporting documents by email to formsandapplications@adfsuper.gov.au or by post to:

ADF Super
Locked Bag 20116
Melbourne VIC 3001



Please note: If your documents are incompatible with DVS you must submit certified copies with your application via post.

End Form



Contact us via the details provided below.



Email
members@adfsuper.gov.au



Phone
1300 203 439



Fax
1300 204 314



Post
ADF Super
Locked Bag 20116
Melbourne VIC 3001



Web
csc.gov.au



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+61 2 4209 5401