Request to transfer

Use this form to roll over money from a non-Cbus super fund (your FROM fund) into the Cbus Super Income Stream. If you have more accounts to transfer please contact us for additional forms, or photocopy this one. Each form must have your original signature on it.

Please use black or blue pen and CAPITAL letters. Use an X in boxes where required.

OPTIONAL:
This form is not required for existing Cbus Super or Media Super members who are transferring an amount from their Cbus Super or Media Super account.

Step 1: Member details

Title
☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Date of birth
D D / M M / Y Y Y Y

Gender
☐ Male ☐ Female

Given name(s)

Family name

Other/previous names

Home phone
( )

Work phone
( )

Mobile

Tax file number

Under the *Superannuation Industry (Supervision) Act 1993*, you are not obliged to disclose your tax file number, but we cannot process this request without it. Visit cbussuper.com.au/tfn for details.

Current residential address

Suburb/town

State

Postcode

Previous residential address

If you know that the address held by your FROM fund is different to your current residential address, please give details below.

Suburb/town

State

Postcode

Step 2: FROM fund details

This is the fund you are transferring out of. If you have multiple account numbers with this fund, you must complete a separate form for each account you wish to transfer.

Fund name

Fund member number

Fund address

Suburb/town

State

Postcode

Fund phone number
( )

Unique Superannuation Identifier (USI)

Australian Business Number (ABN)

If you are transferring from a self-managed super fund, you must provide the ABN.

Is this a self-managed super fund (SMSF)?

☐ **No** > Go to **step 3.**

☐ **Yes** > Provide the Electronic Service Address (ESA) below:

Step 3: Rollover details

I hereby instruct you to rollover/transfer the value shown below to my Cbus Super Income Stream:

☐ The whole balance of my superannuation account.

☐ The following amount $, , . or percentage % of my account balance

Step 4: Cbus Super Fund details

Fund name	**CBUS SUPER INCOME STREAM**
Administrator	**Australian Administration Services Pty Limited (AAS)**
Fund address	**Locked Bag 5056 Parramatta NSW 2124**
Fund phone number	**1300 361 784**
Australian Business Number (ABN)	**75 493 363 262**
USI	**75493363262001**

Step 5: Authorisation

By signing this request form, I am making the following statements:

- I declare I have fully read this form and the information completed is true and correct.
- I acknowledge that I had the opportunity to ask my FROM fund for information about any fees or charges that may apply to this request, or any other information about the effect this transfer may have on my benefits (including insurance cover), and do not require any further information.
- I discharge the superannuation provider of my FROM fund of all further liability in respect of the benefits paid and transferred to the Cbus Super Income Stream.
- I authorise my FROM fund to release information relating to this rollover to Cbus Super.
- I consent to the transfer of superannuation as described above and authorise the superannuation provider of each fund to give effect to this transfer.
- **If I return this form by email**, I acknowledge and declare that I have read and accepted the terms and conditions of the *Request to transfer* and I acknowledge that if I have not applied my physical or electronic signature:
  - If Cbus Super is satisfied that this is a genuine application, Cbus Super will process the request.
  - In some cases, Cbus Super may request more information to be satisfied this is a genuine application.

Full name of applicant

Sign here:

Date
D D / M M / 2 0 Y Y

Privacy

Please refer to the *Privacy Policy* and *Personal Information Collection Statement* at **cbussuper.com.au/privacy** for details about how we collect and disclose personal information or call **1300 361 784** for a copy.

Please detach and send this form (along with your fully completed *Join Cbus Super Income* Stream form) to:
Cbus Super, Locked Bag 5056 PARRAMATTA NSW 2124
Or you can email your form to us at **cbusenq@cbussuper.com.au** .

Cbus Super
Locked Bag 5056
PARRAMATTA NSW 2124

1300 361 784
8am to 8pm (AEST/AEDT)
Monday to Friday

cbusenq@cbussuper.com.au
cbussuper.com.au
Log in to chat to us online

Visit us in person in Adelaide, Brisbane, Melbourne, Perth and Sydney.
Details: **cbussuper.com.au/contact**