

# Zurich Insurance-only Superannuation Plan Rollover authority

(for one-off or ongoing automatic rollovers for insurance premiums only)

## Instructions page

Please read the important information on this sheet and keep a copy for your records and future reference.

## When to use this form

Complete this form to rollover amounts from another superannuation fund ('transferring fund') to pay the premiums for your Zurich Insurance-only Superannuation Plan.

## Important information regarding rollovers:

1. The rollover amount requested from the transferring fund will be the greater of the yearly premium payable on the policy and the minimum withdrawal amount set by the transferring fund.
2. The transferring fund must be a complying taxed fund (we do not accept rollovers from an untaxed fund) and your account with the transferring fund must have a sufficient balance (net of applicable fees or taxes) to support the rollover request.
3. Before you submit this form, please:
  - check that the USI and other details, including the fund name provided for the transferring fund are accurate. If the name differs to the insurance policy, please update either the fund or insurance policy to ensure the names match
  - check that you meet the transferring fund's requirements such as any minimum account balance, proof of identity documentation, rollover fees or rollover restrictions
  - contact the transferring fund if you require any information on the effect of the rollover on your fund entitlements in the transferring fund, including information about fees and the effect of the rollover on remaining insurance benefits (if any).
4. If the amount received is not equal to the amount requested, it will be returned to the transferring fund. If this happens, or if the rollover request is not successful for any other reason, an alternative payment is required otherwise your policy may lapse.
5. If you select a 'one off' rollover, it will only pay the current yearly premium payable.
6. If the minimum withdrawal amount set by the transferring fund is greater than the yearly premium payable, Zurich will transfer any excess amount back to the transferring fund.

## Further information regarding ongoing automatic rollovers:

1. You can make ongoing annual rollover requests automatically by selecting the 'ongoing automatic rollovers' option. We will notify you each year of the total yearly premium payable and then action the request.
2. If you wish to cancel or change this payment method, contact Zurich Customer Care on 131 551.
3. If the rollover request is not successful for any reason, an alternative payment is required otherwise your policy may lapse.
4. Each time a rollover is payable, please ensure the transferring fund has a sufficient account balance and contact your fund if you require any further information on the effect of the rollover on your fund entitlements in the transferring fund, including information about fees and the effect of the rollover on remaining insurance benefit (if any).

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1. Rollover required for (tick only one option below)

- New policy application  
 Existing policy

2. Rollover instructions (tick only one option below)

- One-off (single) rollover  
 Ongoing automatic rollovers

3. Transferring fund

Fund name \_\_\_\_\_

Unique Superannuation Identifier (USI) \_\_\_\_\_ ABN \_\_\_\_\_

Address of fund \_\_\_\_\_

\_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone number \_\_\_\_\_

Account/membership/policy name\* \_\_\_\_\_

Account/membership/policy number \_\_\_\_\_

4. Personal details

Zurich Insurance-only Superannuation Plan policy number (if known)

Title \_\_\_\_\_ Surname \_\_\_\_\_

Given names \_\_\_\_\_

Date of birth / /  Male  Female

Postal address \_\_\_\_\_

\_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Residential address (leave blank if the same as your mailing address) \_\_\_\_\_

\_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Contact details Work ( ) Home ( )

Mobile Email

**\*If your personal details have changed, you may need to contact the transferring fund and update their records before they action this authority. The name on the transferring fund must match the name on the insurance policy in order for the authority to be actioned.**

## 5. Applicant's authorisation

- I request and consent to Brighter Super Trustee ('Trustee') and the trustee of the transferring fund to transfer any benefits from the transferring fund to the Zurich Insurance-only Superannuation Plan as required to fund the premium amount payable under the policy, as quoted by Zurich Australia Limited ('Zurich').
- If the transferring fund has a minimum withdrawal amount which exceeds the premium amount payable, I authorise the transferring fund to transfer the minimum withdrawal amount and I authorise the Trustee to transfer any excess amount back to the transferring fund.
- If I have selected the 'ongoing automatic rollovers' option, I hereby make a repeating request each time my yearly premium becomes payable.
- I give the trustee of the transferring fund consent to provide any and all relevant information to the Trustee or its delegates.
- I authorise the Trustee or its delegates to provide any and all relevant information to the trustee of the transferring fund, including the tax file number I have previously provided. (Note: If you do not want your tax file number to be used, please contact the Trustee).
- I understand that the trustee of the transferring fund is discharged from any further liability in respect of any amount once benefits have been transferred.
- I approve the deduction of transfer fees (if any) from the benefits transferred (subject to legislative restrictions).
- I authorise and direct the Trustee to request, from the transferring fund, any amounts payable under the Zurich policy in accordance with these instructions.
- I accept that Zurich or the Trustee will not be liable or responsible for any failed attempts to transfer money including where the transferring fund declines to transfer the amount.
- If this authority is for a new policy application, and the application does not proceed, I then authorise and request the Trustee to transfer the amounts back to the transferring fund (provided the transferring fund accepts).
- I accept that in the event the transferring fund does not accept a return of amounts for whatever reason, the money will be transferred to the Australian Taxation Office (ATO). Information about ATO-held super can be found at ato.gov.au.
- I am aware that I may ask the trustee of the transferring fund for any information I require in relation to the effect of the rollover/s on my entitlements in the transferring fund (including information on fees or insurance benefits) and, before any rollover, I have either asked them or I do not require such information.

Name of applicant

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Member's signature

Date

X

/ /

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## Your Privacy

The Trustee is bound by the Privacy Act 1988 (Cth). In completing the forms or questions herein you will be providing us with your personal and, perhaps, sensitive information. The collection and management of this information is governed by the Privacy Act 1988. For a more detailed explanation of The Trustee's Privacy Policy please visit our website at [brightersuper.com.au/about-us/governance/reports-and-policies/privacy](http://brightersuper.com.au/about-us/governance/reports-and-policies/privacy)

## Trustee declaration

This letter confirms that the **Zurich Insurance-only Superannuation Plan** is part of Brighter Super ('Fund') (ABN 23 053 121 564). It is a registered, resident regulated superannuation fund as defined under Section 10(1) of the *Superannuation Industry (Supervision) Act 1993* ('the Act'). The trustee of Brighter Super is Brighter Super Trustee (ABN 94 085 088 484 AFSL 230511).

Brighter Super was established by a trust deed since 1995 and is able to accept transfers and rollovers from other Complying Superannuation Funds and such transfers and rollovers will be preserved in accordance with the Act (if required).

The Fund is not subject to a direction under Section 63 of the Act, nor does it expect to receive a direction under this Section.

### Fund Secretary and Director

For and on behalf of the trustee of Brighter Super, Brighter Super Trustee.

## Any questions? Call 131 551

Please return the completed form to us by post, to:

**Zurich Insurance-only Superannuation Plan**  
**C/- Zurich Australia Limited, Customer Care**  
**Locked Bag 994**  
**North Sydney NSW 2059**

or by email to [life.newbusiness@zurich.com.au](mailto:life.newbusiness@zurich.com.au)