

# Integrity's Here for You Super Plan Enduring Rollover Authority Request

## Completing this form

By completing this form, you are authorising the Trustee to transfer part of your balance from your nominated superannuation account to Integrity's Here for You Super Plan (Integrity's Super Plan). Each year, the amount of the transfer will be equal to the premium necessary for your cover within Integrity Super Plan. Please ensure your nominated superannuation account has a sufficient account balance to pay for your insurance premiums and to continue to meet any minimum balance requirements of that fund. Only rollovers from taxed sources can be used to pay for your premiums within Integrity's Super Plan.

To make completing this form easier, you don't need to print it – simply save a copy to your computer, type in your responses and email the completed form back to us at [hello@integritylife.com.au](mailto:hello@integritylife.com.au)

Questions? If you have any questions in relation to this form, please don't hesitate to contact us on 1300 54 33 66 or email us at [hello@integritylife.com.au](mailto:hello@integritylife.com.au)

## Plan details

Integrity's Super Plan Policy Number:

Diversa Trustees Limited (Trustee) ABN 49 006 421 638, AFSL 235153. RSE Licence L0000635

Integrity's Here for You Super Plan (Integrity's Super Plan) a division of the Smartsave 'Member's Choice' Superannuation Master Plan (Fund), ABN 43 905 581 638 RSE R1001341

Integrity Life Australia Limited (Insurer) ABN 83 089 981 073, AFSL 245492

DDH Graham Limited (Administrator) ABN 28 010 639 219, AFSL 226319

## Member's details

Title		First name	
Additional names		Last name	
Previous last name*		Date of birth	
Member Number		Tax File Number	

\*If you've changed your last name since you established your nominated superannuation fund, please include your previous last name.

Under the Superannuation Industry (Supervision) Act 1993, your super fund is authorised to collect your TFN, which will only be used for lawful purposes. Your TFN will be used for identification purposes and will be disclosed to your other super provider, unless you request in writing that it's not disclosed. If we're unable to identify you, we may request additional information.

Residential address					
	Suburb		State	NSW	Postcode

## Fund details

Please provide the details of your nominated superannuation fund from which partial rollovers or transfers will be made to Integrity's Super Plan on an ongoing basis. Please note, only rollovers from taxed sources can be used to pay for your premiums within Integrity's Super Plan.

Refer to your last benefit statement from your nominated fund to help you complete these details.

Fund name		ABN or ACN	
Unique Super Identifier		Member number	

## Authority and declaration

By submitting this Enduring Rollover Authority Request form to the Trustee, I am making the following statements:

- I have been provided with a copy of Integrity's Here for You Super Plan Product Disclosure Statement (PDS) by my financial adviser and have read and understood the important information about Integrity's Here for You Super Plan contained within it.
  - I have read the important information in Integrity's Here for You Super Plan PDS about my tax file number (TFN) and consent to providing my TFN for lawful purposes, including finding my superannuation benefits, providing information to the ATO, and providing information to another superannuation fund in order to transfer benefits.
  - I authorise the Trustee to act on my behalf in arranging the transfer for payment of my insurance premiums.
  - I request and consent to the ongoing annual transfer of an amount equal to my insurance premiums in Integrity's Super Plan from my nominated superannuation fund to Integrity's Super Plan.
  - I acknowledge that only rollovers from taxed sources can be used to pay for premiums within Integrity's Super Plan.
  - This authority continues until the earliest of the following:
    - o Cover within Integrity's Super Plan ends;
    - o I request in writing for this enduring rollover authority to cease;
    - o I request in writing for this enduring rollover authority to be replaced; and
    - o Integrity's Super Plan otherwise ends in accordance with the terms and conditions of Integrity's Here for You Super Plan PDS.
  - I authorise the administrator of Integrity's Super Plan, DDH Graham Limited ABN 28 010 639 219, AFSL 226319, or its delegate, to contact my nominated superannuation fund to obtain details relevant to transferring part of my account balance for the payment of Integrity's Super Plan insurance premium where required.
- I understand that I need to ensure my nominated superannuation fund has a sufficient account balance to pay insurance premiums within Integrity's Super Plan.
- I understand that the trustee of my nominated superannuation fund is discharged from any further liability in respect of any account balance transferred to the Integrity's Super Plan.
  - I understand that my nominated superannuation fund may have minimum balance requirements that may need to be met.
  - I understand that transfer fees (if any) and/or exit fees from my nominated superannuation fund may be deducted from my remaining account balance (subject to legislative restrictions).
  - I acknowledge that my insurance premiums will remain unpaid if there are insufficient funds/balances in my nominated superannuation fund and that my insurance cover will lapse. I understand that I must contact Integrity immediately if I'm notified that the transfer has been unsuccessful.
  - I agree that if Integrity's Super Plan is transferred to another superannuation fund, or if the trustee changes at any time, then this enduring rollover authority applies to authorise any new trustee, to arrange the transfer of part of my account balance from my nominated superannuation fund, into Integrity's Super Plan, for the payment of my insurance premiums.
  - I elect for the Fund trustee to take out the insurance policies I have applied for through Integrity's Here for You Super Plan, even if:
    - o my Fund account balance is less than \$6,000; or
    - o I am under the age of 25 years or other prescribed age (where applicable).

I/we agree to the terms and conditions of the Rollover Authority Agreement.

Signature		Date	
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## Acknowledgement

Please note that any election to maintain insurance cover will incur the ongoing payment of insurance premiums under your enduring rollover authority. You acknowledge that your insurance premiums will remain unpaid if there are insufficient funds/balances in your nominated superannuation fund and, if so, your insurance cover will lapse in accordance with the terms of the Integrity's Here for You Super Plan Product Disclosure Statement (PDS) relating to the coverage in question. You should therefore consider the PDS, which can be downloaded here: <https://diversa.com.au/trustee/Smartsave>

Integrity Life (Integrity) is a registered business name of Integrity Life Australia Limited Pty Ltd ABN 83 089 981 073, AFSL 245492. Integrity's Here for You Super Plan (Integrity's Super Plan) is issued by Diversa Trustees Limited (Trustee) ABN 49 006 421 638, AFSL 235153, RSE Licence L0000635 as Trustee of the Smartsave 'Member's Choice' Superannuation Master Plan ABN 43 905 581 638 RSE R1001341 (Fund), of which Integrity's Super Plan is a division. DDH Graham Limited ABN 28 010 639 219, AFSL 226319 provides administration services in relation to Integrity's Super **Plan on behalf of Diversa.**

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