

Additional investments

Your adviser can process this request online.

We respect your privacy and handle your information in accordance with our Privacy Policy, available at investinfo.com.au/premiumchoice

We can only accept your request if the form is correctly completed.

1. Your account details

Account number

Date of birth (DD/MM/YYYY) (if applicable)

Account name

Contact telephone (business hours)

Email

2. Your additional investment details

Please select your account type and fill in the details requested.

Investment accounts

Amount

Please go to **Question 3**.

Super accounts

Please complete contribution details below.

For more information on super contribution types and your eligibility to contribute, please go to **page 6**.

Amount	Type	Rollover source
\$	Employer <input type="checkbox"/> Personal <input type="checkbox"/> Salary Sacrifice <input type="checkbox"/> Spouse <input type="checkbox"/> Rollover <input type="checkbox"/>	
\$	Employer <input type="checkbox"/> Personal <input type="checkbox"/> Salary Sacrifice <input type="checkbox"/> Spouse <input type="checkbox"/> Rollover <input type="checkbox"/>	
\$	Employer <input type="checkbox"/> Personal <input type="checkbox"/> Salary Sacrifice <input type="checkbox"/> Spouse <input type="checkbox"/> Rollover <input type="checkbox"/>	
\$	Employer <input type="checkbox"/> Personal <input type="checkbox"/> Salary Sacrifice <input type="checkbox"/> Spouse <input type="checkbox"/> Rollover <input type="checkbox"/>	

2. Your additional investment details (super investors only) continued

If any of your personal contributions are being made from the:

- sale of a small business which qualifies for Capital Gains Tax concessions, or
- proceeds of certain personal injury settlements, or
- proceeds of selling your house for a Downsizer contribution,

you need to send us an election form for tax purposes before or at the time the contribution is made. The election forms can be found at ato.gov.au. Speak to your financial adviser for more information.

Personal contributions are recorded as non-concessional contributions unless you provide us with a valid '**Notice of intent to claim or vary a deduction for personal super contributions**' notice stating that you intend to claim them as a tax deduction. We will send you an acknowledgment so that you can claim the deduction.

From 1 July 2022, members aged 67 or older who wish to claim a tax deduction for a personal super contribution must meet the work test (or be eligible for the work test exemption). Information on the work test requirement and other eligibility to claim a tax deduction for personal super contributions can be found at ato.gov.au or speak to your financial adviser or registered tax agent.

Is your investment a rollover?

No Please go to **Question 3**.

Yes Please complete the details below.

You'll also have to complete the **Consolidate your super** form on **page 7**. We won't be able to process your rollover, unless we receive this form.

Who do you want to initiate your rollover?

PremiumChoice Your financial adviser

Where no selection is made, we'll assume you or your financial adviser are arranging the rollover.

Please go to **Question 5**.

3. Your payment options

How do you want to pay for your additional investment?

Direct Debit Please go to **Question 4** and provide your bank details.

Cheque Please make your cheque payable to your PremiumChoice product name, and print your full name, address, account number and the type of contribution on the back of the cheque.

We won't be able to accept your cheque unless the payee details are correct.

Please go to **Question 5**.

4. Bank details

Please provide your bank account details below.

Name of bank

Name of account holder(s)

BSB

Account number

Please read and complete the **Direct debit request** on the following page.

4. Bank details continued

Direct Debit Request

As the holder of the above account, I request Navigator Australia Limited for Investment accounts or NULIS Nominees (Australia) Limited for Super accounts, to draw money from my account. I acknowledge this direct debit arrangement is governed by the Direct Debit Request Service Agreement set out at investinfo.com.au/premiumchoice

I consent to the agreement being made available at investinfo.com.au/premiumchoice, as well as to the terms and conditions of the agreement.

Signature of bank account holders

Must be signed by all bank account holders if different to signatory in **Section 7**.

Full name (please print)

Full name (please print)

Signature

X		Date (DD/MM/YY)
		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Signature

X		Date (DD/MM/YY)
		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Please go to **Question 5**.

5. Investment options

Pay the total amount to your Cash Account

Please go to **Section 7**.

Use your existing additional investment allocation

Please go to **Section 7**.

Use specified investment options

Please complete the table below.

To add investments into an account in the Core Investment List, 100% of the investments selected must be on the **Core Investment List**.

If you're investing in a term deposit the interest rate which applies will be the rate available when your transaction is processed.

If you don't select any of the above options or if any of the investments you've selected are no longer available, we'll invest your funds in your Cash Account, until you tell us where you want the funds invested.

If there is an existing Auto re-weighting facility and the investment options nominated in the table below aren't in line with your current allocation, we'll cancel the Automatic re-weighting facility.

Reinvestment of earnings is only relevant to managed funds.

If you have more investment options, please attach a separate list.

APIR/ASX code	Investment name	Percentage	Reinvest earnings
		%	<input type="checkbox"/> Yes
		%	<input type="checkbox"/> Yes
		%	<input type="checkbox"/> Yes
		%	<input type="checkbox"/> Yes
		%	<input type="checkbox"/> Yes
		%	<input type="checkbox"/> Yes
		%	<input type="checkbox"/> Yes
		%	<input type="checkbox"/> Yes
		%	<input type="checkbox"/> Yes
Allocation must equal 100%		%	

Please go to **Section 6**.

6. Investment suitability

To assess which investment options are right for you, please refer to the relevant disclosure documents for each investment option selected for investment objectives and timeframes, and risk measures. Please respond to the following questions for all investment products you've selected, excluding Shares:

The investments I've selected have a risk measure that I'm prepared to accept

Yes No

I'm aware of the minimum suggested investment timeframe

Yes No

There may be a delay processing your application if responses aren't provided, while we contact you for more information. If we don't receive a response we'll proceed with your application with the understanding that your responses are 'Yes'.

7. Your agreement and declaration

I agree:

- If I have invested into an illiquid investment option, or an investment option I have has become illiquid, PremiumChoice may take longer than 30 days to transfer out of the investment option, and
- If the Core Investment List has been selected but an option outside the Core Investment List is held, I accept that we will pay the administration fees applicable to the full Investment List.

Before making this request I have considered the information in the relevant **disclosure document or Annual Report available for the** investment options I have selected. I have also reviewed the information in the relevant **How to Guide or Annual Report** about the management of my account. These documents are available at investinfo.com.au/premiumchoice or by **contacting us**.

Term Deposits

I understand Term Deposits are invested for a fixed term. Early withdrawals are only permitted in extreme circumstances, which could result in a reduction in the interest rate.

If signed under Power of Attorney: Attorneys must attach a certified copy of the Power of Attorney and identification for themselves (go to investinfo.com.au/premiumchoice to download the relevant identification form) if not already supplied. The attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her Power of Attorney.

Power of Attorney documents can't be accepted by fax or email.

Signature of Investor one or Attorney

Full name (please print)

Signature

X	Date (DD/MM/YY)					

Signature of Investor two (if applicable) or Attorney

Full name (please print)

Signature

X	Date (DD/MM/YY)					

8. Send us your form

Please mail, email or fax your completed, signed and dated form to:

PremiumChoice Client Services
GPO Box 1610
Melbourne VIC 3001

Email: premiumchoice@investinfo.com.au
Fax number: (03) 9869 1595

If you have any questions, please speak with your financial adviser, call us on **1300 880 054** Monday to Friday between 8 am and 6 pm (AEST/AEDT) or visit investinfo.com.au/premiumchoice

9. Financial adviser details

Was Personal Advice provided for this transaction?

Yes No

If you don't answer this question we'll assume the answer is 'No'.

Name of the financial adviser

Adviser number

Contact telephone number (business hours)

Fax number

Email

Super contribution types and your eligibility to contribute

If you need more information about super contribution types, caps and your eligibility, please speak to your financial adviser or see the relevant **Product Disclosure Statement** or **How to Guide** at investinfo.com.au/premiumchoice

You are eligible to contribute where:

You are under 75 years of age[†].

You are aged 75 or older and the contributions are compulsory employer only[#].

Caps applying to contributions made to your super each year

If these contribution amounts are exceeded, you may be liable to pay additional tax, or have an amount refunded to you through the ATO.

A concessional contributions cap applies to employer contributions (including salary sacrifice) and personal contributions which you claim as a tax deduction. The cap for the 2022/2023 financial year is:

- All ages – \$27,500* per annum

* You may also be able to make “catch up” concessional contributions if your total super balance is less than \$500,000 on 30 June of the previous financial year by utilising your unused concessional contributions cap since 2018-19. Unused concessional contributions from those years can be carried forward for up to 5 years.

A non-concessional contributions cap applies to your personal after-tax contributions and spouse contributions made for you.

The cap for the 2022/2023 financial year is:

- \$110,000 annually if you are aged less than 75. You may be eligible to contribute up to \$330,000 under the bring forward arrangement[^].
- No cap applicable if you are aged 75 or over as non-concessional contributions cannot be accepted[#],
- The Cap is Nil if you have total super balance greater than or equal to \$1.7m at the end of the previous financial year.

If you withdrew some of your super in 2019/20 or 2020/21 under the COVID-19 early release of super under compassionate grounds, you may be able to re-contribute this amount. The re-contribution will not be assessed against your non-concessional cap. To find out more and to complete the ATO election form, please visit ato.gov.au

You should consider your contribution caps and seek further advice from your financial or tax adviser where needed.

For further information, please visit investinfo.com.au/premiumchoice

Contribution Type	
Personal or Self employed	Contributions you can make as an employee or as a self-employed person (eg. sole trader). If you are eligible and intend claiming a tax deduction, please complete the Notice of intent to claim or vary a deduction for super contributions, found at investinfo.com.au/premiumchoice
Employer Compulsory	Contributions required to be paid under the Super guarantee laws, a certified award or a registered workplace agreement.
Employer Voluntary	Contributions made by employers over and above their Super guarantee laws, a certified award or a registered workplace agreement.
Salary Sacrifice	Contributions paid into your account from your pre-tax earnings under an agreement between you and your employer.
Spouse	These are amounts paid into your account by your spouse.
Capital Gains Tax Cap (CGT Cap contributions)	Contributions from the proceeds of the sale of a small business. A CGT Cap Election Form needs to be provided to us before or at the time the contribution is made. The eligibility, election form and instructions can be found at ato.gov.au
Other third party	Contributions made for the member by relatives, friends and third parties (ie insurance companies or government agencies)
Personal Injury	A Contribution for Personal Injury Form needs to be provided to us before or at the time the contribution is made. The eligibility, election form and instructions can be found at ato.gov.au
Downsizer Contribution	A contribution from the sale of your home. The ATO Downsizer Contribution Form needs to be provided to us before or at the time the contribution is made. The eligibility, election form and instructions can be found at ato.gov.au

This does not apply for members who are applying and eligible for a Downsizer contribution. Please find more information at ato.gov.au

† For a member turning 75, contributions must be received no later than 28 days after the end of the month they turn 75.

[^] The non-concessional contributions cap amount that you can bring forward and whether you have a two or three year bring forward period depends on a number of factors including your total super balance, age and previous non-concessional contributions made. Your total super balance is determined at the end of 30 June of the previous financial year in which the contributions that triggered the bring-forward were made. For more information, visit ato.gov.au or speak with your financial adviser.

Consolidate your super

Request to transfer super benefits between funds

If you'd like to change your future employer super contributions to be paid to PremiumChoice, please complete the Fund nomination form which can be found at investinfo.com.au/premium-choice/public/product_info

* **Mandatory fields.**

1. Your personal details

PremiumChoice account number (if known)

Contact telephone number* (business hours)

Title

Mr Mrs Miss Ms Other

First name*

Middle name(s)

Family name*

Other/Previous names

Date of birth (DD/MM/YYYY)*

Email

Gender*

Male Female

Tax File Number (TFN)

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 is not disclosed. If your other super fund is unable to identify you they may request additional information.

2. Your residential address details

Current address* (we can't accept a PO Box)

Unit number

Street number

Street name

Suburb

State

Postcode

Country

Previous address (if known)

Unit number

Street number

Street name

Suburb

State

Postcode

Country

3. Your other super fund details

Please provide the details of the super fund you want to transfer to your PremiumChoice fund.

Fund name*

Product name*

Membership or account number*

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Unique Super Identifier (USI) (if known)

Electronic Service Address (ESA)#

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

Fund Australian Business Number (ABN)#

How much would you like to transfer from the above fund?*

My total account balance, or

A partial amount \$

Mandatory field for Self Managed Super Fund transfers only

4. Your PremiumChoice fund details

Please transfer my super to

PremiumChoice Retirement Service

Product name

Unique Super Identifier (USI) (if known)

5. Your 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 have considered if I'll be giving up any benefits or if any fees will apply by transferring my super to PremiumChoice
- I consent to my TFN being disclosed for the purposes of transferring my super to PremiumChoice
- I discharge the trustee of my other super fund of all further liability in respect of the benefits paid and transferred to PremiumChoice
- I authorise my adviser/trustee representative to enquire about this transfer, and
- I request and consent to the transfer of super as described above and authorise the super provider of each fund to give effect to this transfer.

Name (please print in capital letters)

Signature*

	Date (DD/MM/YY)			

6. Send us your form

Please mail, email or fax your completed, signed and dated form to:

PremiumChoice Client Services

GPO Box 1610

Melbourne VIC 3001

Email: premiumchoice@investinfo.com.au

Fax number: (03) 9869 1595

If you have any questions, please speak with your financial adviser, call us on **1300 880 054** Monday to Friday between 8 am and 6 pm (AEST/AEDT) or visit investinfo.com.au/premiumchoice