

# Application for Additional Investment and Features Form

Please complete this form using BLACK INK and print well within the boxes in CAPITAL LETTERS. Mark appropriate boxes with a cross like the following . Start at the left of each answer space and leave a gap between words.

## 1. Investor details (must be completed)

client number	<input type="text"/>	account number	<input type="text"/>
investor name	<input type="text"/>		
contact numbers* phone	<input type="text"/>	mobile	<input type="text"/>
email address*	<input type="text"/>		

\* If you provide these details we will update our records accordingly

## 2. Payment details (must be completed)

How will the contribution be made? NOTE: Cash is not accepted.

by direct debit	<input type="checkbox"/>	we will debit your bank account nominated in section 5 as bank account 1. I acknowledge and accept the terms and conditions of direct debit as explained in the Direct Debit Request Service Agreement which is available from <a href="http://www.perpetual.com.au/select-super-updates">www.perpetual.com.au/select-super-updates</a> .
by cheque	<input type="checkbox"/>	make cheque payable to <b>PIML – Select Super – [insert name of applicant]</b>
by rollover	<input type="checkbox"/>	make sure you complete and send a 'Transfer authority' form to your current superannuation provider

## 3. Contribution/rollover details

Please indicate below the amount of your contributions and/or rollover.

**Contribution limits:** Please refer to the 'Your Super Plan account' document for information about contribution limits. You should speak to your financial adviser about these limits when considering your situation. Contributions made in excess of the limits will attract additional tax.

### Initial one-off contributions

Contribution type	Amount	Further details
personal contribution	\$	If you are eligible and intend to claim a tax deduction on these contributions you will also need to complete section 5.
spouse contribution	\$	
CGT contribution	\$	You will also need to include a completed CGT cap election form (available from the ATO).
personal injury payment	\$	You will also need to include a completed contribution for personal injury form (available from the ATO).
COVID-19 re-contribution	\$	You will also need to include a completed Notice of re-contribution of COVID-19 Early Release amounts form (available from the ATO)
<b>Total</b>	<b>\$</b>	

### 3. Contribution/rollover details (continued)

#### Rollovers

If you are transferring from another super fund please provide the below details. You will also need to complete the 'Transfer authority' form for each rollover being requested.

Name of the previous institution	Policy /Account number	Approximate amount
		\$
		\$
		\$
		\$
		\$
<b>Total</b>		\$

#### Savings plan

Only complete this section if you would like to establish a savings plan to make regular contributions from a nominated bank account. You will also need to nominate a bank account in section 5, from which contributions will be deducted under the savings plan.

<b>Contribution type</b> If you are eligible and intend to claim a tax deduction on your Personal Contributions you will need to complete section 4.	personal <input type="checkbox"/> spouse <input type="checkbox"/>
<b>Amount</b>	\$
<b>Frequency</b>	monthly (default) <input type="checkbox"/> quarterly <input type="checkbox"/>
<b>Day</b>	10th <input type="checkbox"/> 20th <input type="checkbox"/>

### 4. Tax deduction for personal contributions

#### Tax deduction for your personal contributions (including one-off and savings plan contributions)

I am eligible and intend to claim a tax deduction for my personal contributions of:

\$  (one-off contribution)

\$  (per each savings plan amount)

This is your notice to us, to be effective from the later of the date of this application or the date that you become a member of the Super Plan, of the amount you intend to claim as a tax deduction in relation to Section 290-170 of the Income Tax Assessment Act 1997. We will deduct 15% contributions tax from this amount. This notice will be applicable for the current and future financial years (for contributions made under the savings plan) unless you notify us in writing of your intention to vary this notice. We will send you an acknowledgement of the amount you wish to claim as a tax deduction which you will need to retain for tax purposes for the current and future financial years (for contributions made under the savings plan).

## 5. Bank account details (if applicable)

By providing your bank account details in this section, you authorise the Trustee to use these details for all future transaction requests that you nominate.

### Bank account 1

Complete your bank account details in this section and indicate what you would like us to use these bank account details for

- applications
- savings plan
- withdrawals

financial institution

branch

BSB

account number

 - 

account name



signature of account holder A

signature of account holder B

date  /  /

### Bank account 2

**Only** complete your account details in this section if you would like us to debit a **different** bank account for your **savings plan**

financial institution

branch

BSB

account number

 - 

account name



signature of account holder A

signature of account holder B

date  /  /

I request and authorise Perpetual Investment Management Limited, Debit User Identification Number 187310 to arrange for any amount Perpetual Investment Management Limited may debit or charge me to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified above, subject to the terms and conditions of the Direct Debit Request Service Agreement which is available from [www.perpetual.com.au/select-super-updates](http://www.perpetual.com.au/select-super-updates).

## 6. Features (must be completed)

Indicate which optional features you would like applied to your account		Frequency (if applicable)
<b>Auto-rebalancing</b> If no frequency is selected, quarterly will be assumed	yes <input type="checkbox"/>  no <input type="checkbox"/>	quarterly (default) <input type="checkbox"/> half-yearly <input type="checkbox"/> yearly <input type="checkbox"/>
<b>BPAY (additional investments)</b>	yes (default) <input type="checkbox"/> no <input type="checkbox"/>	n/a
<b>Investor Online Account Access</b> • you can access information about your account online	view & transact (default) <input type="checkbox"/> view only <input type="checkbox"/> no access <input type="checkbox"/>	n/a
<b>Adviser Online Account Access</b> Note: your adviser can access information about your account online	view & transact (default) <input type="checkbox"/> view only <input type="checkbox"/>	n/a

- For each optional feature you have elected, please ensure you have read and understood the relevant section in the 'Your Super Plan account' document available on our website for that optional facility.

## 7. Investment details

Please nominate the dollar amount or the portion of money you would like to invest in your selected Investment Options.

Investment options	Short code	Initial contributions	Savings plan (if applicable)	Investment strategy (additional applications & auto-rebalancing)
Conservative	SSCOST	\$ or %	\$	%
Diversified	SSDVST	\$ or %	\$	%
Balanced	SSBAST	\$ or %	\$	%
Growth	SSGRST	\$ or %	\$	%
High Growth	SSEQST	\$ or %	\$	%
Cash	SSCAST	\$ or %	\$	%
Australian Share	SSAEST	\$ or %	\$	%
International Share	SSINST	\$ or %	\$	%
<b>Total</b>		\$ or %	\$	100%

## 8. Declaration and signature (must be completed)

I declare and agree that:

- I have read and understood the Product Disclosure Statement (PDS) and any relevant incorporated material for Select Super Plan and confirm I accept this offer in Australia
- all of the information provided in my application is true and correct
- If I have received the PDS from the internet or other electronic means that I received it personally or a print out of it, accompanied by or attached to this application form
- I have read, understood and agree to be bound by, any additional restrictions in the PDS and any incorporated material and I agree to be bound by the provisions of the Trust Deed (as amended from time to time)
- If applicable, in the case of contributions, that I have read and understood the contribution eligibility rules in the PDS and that I am eligible to make or have contributions made for my benefit and will notify the Trustee if I am no longer eligible
- If I am claiming a personal tax deduction in relation to my contributions
  - I intend to claim the personal contributions stated as a tax deduction
  - I am a current member of Select Super
  - Select Super currently holds these contributions and has not begun to pay a superannuation income stream based in whole or part of these contributions
  - I have not included any of the contributions in an earlier valid notice.
- I declare that I am lodging this notice at the earlier of either:
  - before the end of the day that I lodged my income tax return for the income year in which the personal contributions were made, or
  - before the end of the income year following the year in which the contribution was made.
- I authorise the Trustee to quote my TFN or exemption to the Australian Taxation Office (ATO).
- I authorise the Trustee to obtain information from the ATO regarding my superannuation account in relation to my TFN, PAYG or other superannuation tax-related matters.
- I acknowledge that neither the Trustee, Perpetual Trustee Company Limited, nor any of their related entities, guarantees the repayment of capital or the performance of the Super Plan.
- If investing under the Savings Plan, I have read the Direct Debit Request Service Agreement and have completed sections 3 and 5.
- I acknowledge that:
  - I have read and understand the privacy disclosure as detailed in the PDS. I consent to my personal information being collected, held, used and disclosed in accordance with the privacy disclosure
  - The Trustee is required to provide information to the ATO regarding any superannuation account
  - The Trustee will hold personal information about me and will disclose this information to my financial adviser in relation to the investments described in this form. Where there is any change to this authority or relating to my financial adviser, I will notify the Trustee of the change
  - neither the Trustee, Perpetual Trustee Company Limited, nor any of their related entities, guarantees the repayment of capital or the performance of the Super Plan or any investment option.

signature of investor	<input type="text"/>	date	<input type="text"/>																
print name	<input type="text"/>																		

### Important notes:

- If signing under power of attorney, the attorney certifies that he or she has not received notice of revocation of that power. The power of attorney, or a certified copy, must be sent to us, if not previously provided.
- We have the absolute discretion to accept or reject any application.
- A business day is a working day for us in Sydney.

### Final checklist

Have you:

- Completed all sections of your application form?
- Signed your application form?

Please send your completed application form to:

**Reply Paid 4171**

**Perpetual Select Super Plan**

**GPO Box 4171, Sydney NSW 2001**

or email [superandpension@perpetual.com.au](mailto:superandpension@perpetual.com.au)