



## Perpetual's DIY Super

Perpetual Superannuation Limited ABN 84 008 416 831 AFSL 225246 RSE L0003315  
Perpetual Trustee Company Limited ABN 42 000 001 007 AFSL 236643

This form can be used by members of the Self-Managed Super Fund Service and members of the Small APRA Fund Service.

# REQUEST TO WIND UP FUND

## 1. Fund details

superannuation  
fund name  
fund account  
number

## 2. Member details

title Mr Mrs Miss Ms other

first name(s)

last name

address

suburb

state

postcode

date of birth

Photo ID provided

## 3. Payment instructions

Are member benefits to be: a) Rolled over to another superannuation fund (Complete section 4)  
(Please tick) b) Paid out to member as lump sum (Complete section 5)

## 4. New superannuation fund details

name of rollover fund

mailing address

suburb

state

postcode

ABN of fund

Compliance letter attached

Unique Superannuation Identifier (USI) (if known)

cheque payee details  
(SMSF only)

direct deposit details bank name

account name

BSB number

account number

## 5. Lump sum paid to member

cheque payee details	
direct deposit details	bank name
account name	
BSB number	account number

### 5a. Eligibility for withdrawal

Perpetual is obliged to ensure that a 'condition of release' has been met in order to pay a superannuation benefit. This means we may require additional information from you in order to make a payment.

I am eligible to receive a benefit because (please select one of the following reasons for withdrawal):

I have reached the age of 65.

I am withdrawing an unrestricted non-preserved amount.

I am withdrawing an restricted non-preserved amount and have left an employer who was contributing to my superannuation.

I am transferring/rolling over to another super fund.  
Please provide the details in section 4 of the institution(s) to which you are rolling your money and a letter from the fund stating it is complying.

I retired after my preservation age (55-60, depending on your date of birth).  
This means you have ceased employment and have no intention of becoming gainfully employed in the future for 10 hours or more per week.

I retired after age 60.  
This means you have ceased gainful employment with an employer after turning 60. Please note that you can still be working.

I am withdrawing on compassionate grounds.  
Please attach letter of approval from APRA.

I am permanently incapacitated/disabled.  
Please attach relevant documents available from your adviser or Account Manager.

I am withdrawing on the grounds of financial hardship.  
Please attach Centrelink letter confirming receipt of payment as well as relevant documents available from your adviser or Account Manager.

I am terminally ill  
Please include two doctor certificates (one from a specialist) confirming that you suffer from an illness or injury that is likely to result in death within 24 months.

## 6. Redemption/in-specie transfer of assets

Instructions for fund assets:

sell all assets	transfer all assets	sell the following assets:	transfer the following asset:
		asset name	number of units

## 7. New registration details

The address below will be the registered address used for all fund assets. This information is used to transfer your fund's assets and must be completed.

name		
designation		
address		
suburb	state	postcode

**Note:** Designation is the Fund name. For example, ABC Pty Limited <My Family Super Fund>

If CHESS sponsored, please provide

PID number
HIN
broker name
If not CHESS sponsored, will be issuer sponsored

## 8. Insurance

<b>Policy 1:</b>
policy owner
policy number
insurance company

<b>Policy 2:</b>
policy owner
policy number
insurance company

**Do you wish to:**      a) cancel the above policy      b) transfer the ownership      (Complete the following)

name of new owner		
address of new owner		
suburb	state	postcode

## 9. Personal contributions made during the current financial year

Have you made any personal contributions into your fund during the current financial year?

If yes, please confirm the amount you wish to claim as deductible contribution by completing the attached Section 290-170 Notice.

## 10. Member/trustee instruction

I instruct Perpetual to commence the wind up of my DIY Super fund as detailed in this form (all fund members must sign below):

<b>Member 1:</b> name in full		
signature	<input type="text"/>	date
<b>Member 2:</b> name in full		
signature	<input type="text"/>	date
<b>Member 3:</b> name in full		
signature	<input type="text"/>	date
<b>Member 4:</b> name in full		
signature	<input type="text"/>	date