

Superannuation Master Fund

Application Forms Booklet

1 August 2014

Super Accelerator



Issuer/trustee details: **netwealth** Investments Limited

Level 8/52 Collins Street Freecall 1800 888 223
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Fund details: **netwealth** Superannuation Master Fund ABN 94 573 747 704

netwealth[®]
Investment & Superannuation

This booklet contains application forms for **netwealth** Super Accelerator which is a product of the **netwealth** Superannuation Master Fund (referred to as '**netwealth** Superannuation' or '**netwealth** Super Fund').

This booklet accompanies the Product Disclosure Statement for Super Accelerator dated 31 January 2014 and is the Application Forms Booklet referred to in the Product Disclosure Statement.

Throughout this Application Forms Booklet and in all the forms contained in this booklet 'PDS' refers to the Product Disclosure Statement for Super Accelerator dated 31 January 2014.

Before completing the Application form contained in this booklet you should ensure that you have a copy of the current PDS for Super Accelerator.

Contact details

Head office

Level 8/52 Collins Street
MELBOURNE VIC 3000

Postal address

netwealth Investments Limited
PO Box 336
SOUTH MELBOURNE VIC 3205

Freecall 1800 888 223 (within Australia)

Phone 03 9655 1300

Fax 03 9655 1333

Email contact@netwealth.com.au

Website www.netwealth.com.au

How to contribute

Method	Payment	Other requirements
Cheque	Cheques should be made payable to: netwealth Investments Limited – Applications Account. Cheques should be crossed “not negotiable”.	Attach cheque to your application form.
Electronic funds transfer	Bank: ANZ BSB number: 013 993 Account no.: Last 9 digits of your netwealth account number Reference: A – Superannuation guarantee B – Salary sacrifice C – Personal contribution D – Spouse contribution	<p>Example: to make a salary sacrifice contribution for netwealth account number 0001040500 enter details as follows:</p> <p>BSB number: 013 993 Account no.: 001040500 Reference: B</p> <p>Note: Superannuation guarantee will be the default contribution type if no reference is provided.</p>
BPAY®	Biller codes: 156513: Superannuation Guarantee 156539: Salary Sacrifice 156505: Personal Contribution 156521: Spouse	Each client has a unique BPAY Customer Reference Number (CRN). This can be found on the netwealth website, on periodic statements or by contacting netwealth .
Direct debit	One-off direct debits or a regular contribution plan.	<p>Direct debit request – to request a one-off, regular or ad-hoc direct debit from your bank account:</p> <p>AND (if required)</p> <p>Regular contribution plan form – to commence a regular contribution plan.</p>

IMPORTANT: All contribution remittances must be sent to remittance@netwealth.com.au.

Please ensure you complete Step 5 of your application indicating the type of contribution.

It is important to follow these deposit instructions carefully, otherwise we may not be able to correctly allocate your contributions to your account.

® Registered to BPAY Pty Ltd ABN 69 079 137 518

Forms you need to complete

Personal Super	Page	
You must complete		
Application form - Client information	3	In all cases.
Optional		
Regular contribution plan instruction	15	If you wish to commence a regular contribution plan. You must also complete a Direct debit request.
Direct debit request	17	If you wish to make any contributions by direct debit from a bank account.
Binding death benefit direction	19	If you wish to make a binding death benefit direction.
Rollover/transfer request	21	If you wish to rollover a benefit from another fund.
Compliance letter	23	Give this to your employer if you want them to contribute to your netwealth superannuation account. A Standard Choice form is also available on our website.

Income Stream Service	Page	
You must complete		
Application form - Client information	3	In all cases.
Income stream instruction	13	If you are applying for an income stream.
TFN Declaration	25	If you are under age 60 and commencing an income stream.
Optional		
Direct debit request	17	If you wish to make a contribution from your bank account to commence your income stream.
Binding death benefit direction	19	If you wish to make a binding death benefit direction.
Rollover/transfer request	21	If you wish to rollover a benefit from another fund.

Please send all correspondence to:

netwealth Investments Limited
 Email contact@**netwealth**.com.au
 Fax 03 9655 1333
 Mail Reply Paid 336
 SOUTH MELBOURNE VIC 3205

netwealth Super Accelerator Application



NWNEWBSWAP

Please use **BLACK** pen and **BLOCK** letters.

This form may only be used if you have received a copy of the Product Disclosure Statement for Super Accelerator dated 31 January 2014.

Step 1. Choose the type of account you wish to open

(i) ☐ Super Accelerator Core **OR** ☐ Super Accelerator Plus**AND**(ii) ☐ Personal Super **AND/OR** ☐ Income Stream (you must also complete the Income stream instruction on page 13)

Step 2. Confirm if you are an existing netwealth client

Client name

Client number Account number

Step 3. Provide your personal details if you are a new client

Mr/Mrs/Miss/Ms/Dr/Other Family name

Given name(s)

Date of birth / / Sex ☐ Male ☐ Female

Residential address (mandatory)

Suburb/town

State Postcode Country (if not Australia)

Postal address (if different from above)

Suburb/town

State Postcode Country (if not Australia)

Phone Home () Work ()

Facsimile () Mobile

Email

Preferred communication method and online access

Please choose one of the following five options:

- ☐ I want to be able to transact online and receive communications electronically (you must provide an email address above).
- ☐ I want to be able to transact online and receive communications by post.
- ☐ I want browse only online access and to receive communications electronically (you must provide an email address above).
- ☐ I want browse only online access and to receive communications by post.
- ☐ I do not want online access and I want to receive communications by post.

If you have not ticked a box above and you have provided an email address then you elect to have browse only online access and to receive all communications electronically.

If you have online access you elect to receive your Annual Member Statement and to confirm transactions by accessing your online account, unless you choose the following:

- ☐ I request that my Annual Member Statements and monthly Confirmation Statements be sent to me.

Receiving communications electronically means by an email sent to your email address, an attachment to an email sent to your email address, or notification to you by email that the communication is available for you to access in your secure online account or on the public website.

Communications include all letters, statements, confirmations and other notices.

Client initial

Name of financial institution																								
Account name																								
BSB number				-				Account number																

[illegible][illegible]

- Client initial

Step 5. Provide details of your initial contributions - transfers, rollovers and contributions (continued)
(iii) Transfer from an existing netwealth Super Wrap account

This step only applies if you have an existing **netwealth** Super Wrap account.

☐ I wish to change my existing Super Wrap account to a Super Accelerator account.

Current account number

Please proceed to Step 14.

Step 6. Consider providing your tax file number (TFN)

Important note: Before providing your TFN, please ensure that you read the information below and the 'tax information' section of the PDS, which outlines important information regarding the collection of your TFN.

Tax file number - - OR ☐ I do not wish to provide my TFN

Important information about providing your tax file number (TFN)

Under the Superannuation Industry (Supervision) Act 1993, your superannuation fund is authorised to collect your TFN, which will only be used for lawful purposes.

These purposes may change in the future as a result of legislative change. **netwealth** may disclose your TFN to another superannuation provider, when your benefits are being transferred, unless you request **netwealth** in writing that your TFN not be disclosed to any other superannuation provider. It is not an offence not to quote your TFN. However giving your TFN to your superannuation fund will have the following advantages (which may not otherwise apply):

- your superannuation fund will be able to accept all types of contributions to your account/s,
- the tax on contributions to your superannuation account/s will not increase,
- other than the tax that may ordinarily apply, no additional tax will be deducted when you start drawing down your superannuation benefits, and
- it will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

The consequences of not quoting your TFN may change in the future as a result of legislative changes.

For more information, please contact **netwealth** or the ATO Superannuation infoline on 13 10 20.

Step 7. Reinvestment plan (optional)

You can choose to re-invest the net income on your account into managed funds. Once a month we will calculate the amount of income you have earned. We will then deduct expenses during the month to give us a monthly net income amount. This monthly net income amount will then be allocated in accordance with your instructions, as follows:

Option 1 ☐ Reinvest the following amounts:

- (a) Income earned less any expenses, plus
- (b) Regular contribution plan amounts made by direct debit

OR

Option 2 ☐ Reinvest the following amounts:

- (c) Income earned less any expenses, plus
- (d) Regular contribution plan amounts made by direct debit, plus
- (e) Employer contributions (Super Guarantee and Salary Sacrifice)

Important note: you must nominate the individual managed funds to apply reinvestment to at Step 9. If no selection is made, your monthly income will remain in your cash account.

Step 8. Dollar cost averaging (DCA) plan (optional)

☐ I wish to invest a regular monthly amount from my cash account into managed funds for a fixed or indefinite period of time.

Total amount to invest each month (minimum of \$100 per managed fund) \$, .

To begin in /

Number of months (leave blank if indefinite)

Important note: you must nominate the individual managed funds to apply DCA to in Step 9.

Client initial

Step 9. Investment instructions

Term deposits

Term deposit application forms are available online or from your financial adviser, or directly from us. Alternatively, you can transact online once you receive your login details.

Cash account

Please invest my initial rollovers/contributions in my cash account

☐

OR

Total Amount in cash account above minimum requirement (\$ or %¹)

¹ Please refer to the section of the PDS headed 'Minimum cash requirement' for more information.

Managed funds and other investments

If you have chosen Super Accelerator Core at Step 1 you may only select **netwealth** Global Specialist Series (GSS) funds in this section.

Fund name

APIR code

Reinvestment plan monthly² % DCA plan monthly³ \$ Initial amount to invest (\$ or %)⁴

Fund name

APIR code

Reinvestment plan monthly² % DCA plan monthly³ \$ Initial amount to invest (\$ or %)⁴

Fund name

APIR code

Reinvestment plan monthly² % DCA plan monthly³ \$ Initial amount to invest (\$ or %)⁴

Fund name

APIR code

Reinvestment plan monthly² % DCA plan monthly³ \$ Initial amount to invest (\$ or %)⁴

Fund name

APIR code

Reinvestment plan monthly² % DCA plan monthly³ \$ Initial amount to invest (\$ or %)⁴

² If a reinvestment plan is selected, percentage amounts must total 100% and Step 7 must be completed.

³ If a DCA plan is selected the amount for each managed fund must be at least \$100 and add up to the total amount shown at Step 8.

⁴ A minimum investment amount of \$100 applies to any managed fund.

Client initial

Managed funds and other investments (continued)[illegible]

2 If a reinvestment plan is selected, percentage amounts must total 100% and Step 7 must be completed.

3 If a DCA plan is selected the amount for each managed fund must be at least \$100 and add up to the total amount shown at Step 8.

4 A minimum investment amount of \$100 applies to any managed fund.

Client initial

Step 9. Investment instructions (continued)
ASX listed securities

Not available if you have chosen Super Accelerator Core at Step 1.

ASX code

Buy price (\$)¹

ASX code

Buy price (\$)¹

ASX code

Buy price (\$)¹

ASX code

Buy price (\$)¹

ASX code

Buy price (\$)¹

ASX code

Buy price (\$)¹

ASX code

Buy price (\$)¹

ASX code

Buy price (\$)¹

Name of security

Expiry date²

No. of shares

OR

Initial amount to invest (\$ or %)³

Name of security

Expiry date²

No. of shares

OR

Initial amount to invest (\$ or %)³

Name of security

Expiry date²

No. of shares

OR

Initial amount to invest (\$ or %)³

Name of security

Expiry date²

No. of shares

OR

Initial amount to invest (\$ or %)³

Name of security

Expiry date²

No. of shares

OR

Initial amount to invest (\$ or %)³

Name of security

Expiry date²

No. of shares

OR

Initial amount to invest (\$ or %)³

Name of security

Expiry date²

No. of shares

OR

Initial amount to invest (\$ or %)³

Name of security

Expiry date²

No. of shares

OR

Initial amount to invest (\$ or %)³

Total ASX listed securities amount (\$ or %)

Total investment instruction (\$ or %)

1 If no buy price is provided, securities will be purchased at market price. The buy price is the maximum bid price.

2 Maximum 60 days from the date the order is placed with the ASX.

3 Minimum buy amount of \$500 (plus brokerage) into any one security.

Client initial

Step 10. Select your auto sell down profile (optional)

In the event that the balance of your cash account falls below the minimum level required, **netwealth** will redeem assets via the monthly auto sell down process to top-up your cash account. You may select from one of three auto sell down profiles:

☐ Largest to smallest (default)

Units will be redeemed from your assets starting with your largest to smallest liquid managed fund holding, and then your largest to smallest ASX listed security holding, and then other investments (from largest to smallest), until the minimum cash requirement is met.

If you make no selection this is the profile that will apply.

OR

☐ Pro-rata

Units will be redeemed from liquid managed funds based on the proportion of your portfolio that they represent until the minimum cash requirement is met.

OR

☐ Rank

Units will be redeemed from liquid managed funds and/or ASX listed securities based on the ranking you select below, until the minimum cash requirement is met.

Rank	APIR/ASX code	Asset name
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

Client initial

Step 11. Nominate adviser and adviser fees

Adviser details

Individual authorised representative

To nominate an individual as 'your financial adviser' being the person entitled to adviser remuneration, you must complete both Part A and Part B.

The 'AFS licensee' nominated in Part A has to be the holder of an Australian Financial Services Licence that the adviser nominated in Part B (if any) is acting as a representative of.

Corporate authorised representative

To nominate a corporate authorised representative as 'your financial adviser' being the person entitled to adviser remuneration, you must complete both Part A and Part B, and also insert in Part B in the space provided for 'Adviser name' the name of the corporate authorised representative followed by your adviser's name (for example, Adviser name: ABC Pty Ltd – John Smith).

AFS licensee

To nominate an AFS licensee as 'your financial adviser' being the person entitled to adviser remuneration, you must complete Part A only, including the name of the individual adviser acting as the AFS licensee representative and leave Part B blank.

Part A

[illegible]

Part B

Adviser name																									
Adviser code							Adviser stamp:	<div> 100PercentInvesting (Adviser Services Pte Ltd) </div>																	

Adviser stamp:

100PercentInvesting
(Adviser Services Pty Ltd)

Email:
enquiry@100percentinvesting.com.au

www.100percentinvesting.com.au

AFSL: 439452

Adviser fees

Please provide the amount or rate of upfront and ongoing member advice fees that you agree with your adviser, including GST. You direct us to pay these amounts to your financial adviser. **netwealth** may be entitled to receive a Reduced Input Tax Credit (RITC) on these fees and the amount deducted from your account to pay these fees may be less than the amount shown on this form.

Upfront member advice fee (including GST)

Initial contributions/rollovers

Flat percentage rate

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

 %

This will apply to contributions/rollovers shown on this Application form.

AND/OR

Fixed dollar amount \$

This is a one-off fee.

Future contributions/rollovers

Flat percentage rate

	.				
--	---	--	--	--	--

 %

This will apply to future contributions/rollovers.

Regular contribution plan contributions

Flat percentage rate

	.				
--	---	--	--	--	--

 %

This will apply to all future contributions made by direct debit under a regular contribution plan.

Client initial

Ongoing member advice fee (including GST)

This is a percentage of the account balance.

OR

Tiered percentage rate

Account balance range

From	\$									0	0	to	\$							0	0					% p.a.
From	\$									0	0	to	\$							0	0					% p.a.
From	\$									0	0	to	\$							0	0					% p.a.
From	\$									0	0	to	balance											% p.a.		

AND/OR

Fixed dollar amount (select one fee option only)

\$, . paid each month \$, . paid each quarter
 \$, . paid each half year \$, . paid each year
 Commencing /

Annual indexation of fixed dollar amount (select one option only)

☐ None ☐ CPI ☐ a fixed rate of %
☐ the lesser of CPI¹ and % ☐ the higher of CPI¹ and %

With indexation to first occur on (select one date only)

31 Mar Y Y 30 Jun Y Y 30 Sep Y Y 31 Dec Y Y

1 CPI will be calculated as the rate of increase in the All Groups Consumer Price Index for Australian capital cities published by the Australian Bureau of Statistics for the 12 months to the end of the calendar quarter immediately preceding the date of increase.

Ongoing member advice fee - listed securities (including GST)

Flat rate

						%	Can be 0% to 2.2% of the share trade amount (including GST).
--	--	--	--	--	--	---	--

OR

\$

		.				.	0	0
--	--	---	--	--	--	---	---	---

 For each share trade.

OR

Specific amount which is the greater of

							%	Can be 0% to 2.2% of the share trade amount (including GST).
--	--	--	--	--	--	--	---	--

AND

\$

		,				.	0	0
--	--	---	--	--	--	---	---	---

 For each share trade.

Important note: a standard brokerage fee of \$20 per share trade will also be charged by **netwealth**.

Step 12. Automatic adviser representative nomination

I nominate my financial adviser as my adviser representative who will be empowered to act on my behalf on matters relating to my account. Unless I inform **netwealth** in writing that I do not want my financial adviser to be my adviser representative (either by ticking the box below or by advising **netwealth** in writing), my financial adviser may authorise officers or employees of the financial adviser to give **netwealth** instructions in relation to my account. If my financial adviser changes dealer group, the financial adviser is authorised to continue as my adviser representative so long as the new dealer group is registered by **netwealth**. I have noted the important warning regarding adviser representatives in the PDS.

I confirm and agree to the release of **netwealth** from liability in relation to actions by my adviser representative as described in the PDS.

Tick this box only if you do not wish your financial adviser to have authority to act as adviser representative.

☐ I do **NOT** wish my financial adviser to be my adviser representative.

Client initial

Step 13. smart enabled® authority (optional)

Your account can only be **smart** enabled® if your financial adviser is your adviser representative and has been accredited by **netwealth** to use **smart** enabled®.

☐ I want my account to be **smart** enabled®

Step 14. Declaration and signature

Product Disclosure Statement and Trust Deed

1. I apply to invest the amount outlined in Step 5 in the Fund and confirm that I have read the Product Disclosure Statement for Super Accelerator dated 31 January 2014 (the PDS), including the Information Guides, which form part of the PDS.
2. If I have obtained a copy of the PDS electronically I confirm that I have personally received the PDS or a print-out of it, accompanied by this Application form, prior to applying to become a member, and I understand that it is important to read the PDS before applying. I am aware that I may download and save a copy for my future reference and that a paper copy of the PDS is available free of charge on request.
3. I agree to be bound by the provisions of the trust deed of the **netwealth** Superannuation Master Fund.
4. I expressly agree to all of the things set out in the section of the PDS called 'Things you agree to when you apply to become a member of the Fund'.
5. If I have specified any adviser fees in Step 11 of this form, I authorise and direct **netwealth** to deduct the fee from my cash account and to pay the full amount to my financial adviser as consideration for financial product advice.

Anti Money Laundering and Counter-Terrorism Financing

6. I acknowledge that **netwealth** is bound by laws about the prevention of money laundering and the financing of terrorism, including the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF laws) and I represent and agree with **netwealth** that:
- (a) I am not applying to invest in the Fund under an assumed name;
 - (b) any money used by me to invest in the Fund is not derived from or related to any criminal activities;
 - (c) any proceeds of my investments will not be used in relation to any criminal activities;
 - (d) if **netwealth** asks, I will provide all additional information **netwealth** reasonably requires for the purposes of AML/CTF laws (including the source of funds used to invest);
 - (e) **netwealth** may obtain information about me from third parties if **netwealth** believes this is necessary to comply with AML/CTF law; and
 - (f) in order to comply with AML/CTF laws **netwealth** may be required to take action, including:
 - delaying or refusing the processing of any contribution or benefit payment, or
 - disclosing information that **netwealth** holds about me to **netwealth**'s related bodies corporate or service providers, or relevant regulators of AML/CTF laws (whether in or outside of Australia).

Contributions

7. I am eligible to contribute or have contributions made on my behalf to the Fund and will advise **netwealth** and cease making contributions to the Fund if I cease to be eligible to contribute under superannuation law.

(The following declaration, 8, applies only if you are between the age of 65 and 75 and are making personal contributions to the Fund).

8. I declare that I have been gainfully employed for at least 40 hours in a period of not more than 30 consecutive days in the current financial year.

Declaration

9. I represent to **netwealth** that all the details given in this application are true and correct.

Important note: Before you sign this Application form, **netwealth** or your financial adviser is obliged to give you a current Product Disclosure Statement for Super Accelerator (which contains important information about the Fund). The Product Disclosure Statement and Information Guides will help you understand the product and decide if it is appropriate to your needs.

Name

[illegible]

Signature

--

Date

D	D
---	---

 /

M	M
---	---

 /

Y	Y
---	---

Important note: It is recommended that you also initial each page to confirm the information you have provided and that you retain a copy of the completed form. This is for your own records. **netwealth** may accept at its discretion applications that have not been initialed on each page.

Step 3. Select a pension payment frequency

Pension payment frequency (please tick one box) ☐ Monthly ☐ Quarterly ☐ Half yearly ☐ Yearly

Month pension to commence / (payments are made on or about the 15th of each month)

If you are investing between 1 June and 30 June, you can defer the commencement of your payments until next financial year.

Note: If you are under age 60, please complete the TFN declaration on page 25.

Step 4. Consider a reversionary pensioner nomination

Please provide reversionary pensioner details if you wish to nominate a reversionary pensioner. A reversionary pensioner must be nominated at the commencement and must be a superannuation dependant and a tax dependant.

Name

Address

Date of birth / /

Relationship ☐ Spouse/de facto ☐ Child ☐ Interdependent ☐ Financial dependant

If you wish to make a binding death benefit direction instead of a reversionary pensioner nomination, please complete the Binding death benefit direction form.

Step 5. Read and sign this declaration

1. I have read and understood the Product Disclosure Statement for Super Accelerator.
2. I have completed the personal details in the Application form and signed the Declaration.
3. I declare that all details given in this form are true and correct.

Important note: Before you sign this instruction form, **netwealth** or your financial adviser is obliged to give you a current Product Disclosure Statement for Super Accelerator which contains important information about the Fund. The Product Disclosure Statement and the Information Guides will help you understand the product and decide if it is appropriate to your needs.

Name

Signature

Date / /

Important note: It is recommended that you also initial each page to confirm the information you have provided and that you retain a copy of the completed form. This is for your own records. **netwealth** may accept at its discretion instructions that have not been initialed on each page.

Step 6. Once completed please send to us

Email contact@netwealth.com.au

Mail **netwealth** Investments Limited

Fax (03) 9655 1333

Reply Paid 336
SOUTH MELBOURNE VIC 3205

If you have any questions please contact your adviser or call us on Freecall 1800 888 223.

netwealth Super Accelerator

Regular contribution plan instruction



Please use **BLACK** pen and **BLOCK** letters.

This form may only be used if you have received a copy of the PDS for Super Accelerator dated 31 January 2014.

Step 1. Provide your account details

Client name

[illegible]

Step 2. Consider a regular contribution plan

A regular contribution plan offers you a convenient way to top-up your superannuation on a monthly basis by direct debit.

How much would you like to contribute each month? \$, . (minimum of \$100 per month)

When would you like your regular contribution plan to begin? Date

M	M
---	---

 /

Y	Y
---	---

Concessional contributions

Superannuation guarantee contributions (employer)	\$,				.	0	0
---	----	--	--	--	---	--	--	--	---	---	---

Salary sacrifice contributions (employer)	\$,				.	0	0
---	----	--	--	--	---	--	--	--	---	---	---

Non-concessional contributions

Member after-tax contributions (personal)*	\$,			.	0	0
--	----	--	--	--	---	--	--	---	---	---

Spouse contributions (personal)	\$,			.	0	0
---------------------------------	----	--	--	--	---	--	--	---	---	---

Total of all regular monthly contributions	\$,			.	0	0
---	----	--	--	--	---	--	--	---	---	---

Please note: You must also complete a Direct debit request to enable us to debit your bank account.

We will debit your bank account on the 15th of each month or the next business day if the 15th day is not a business day.

* If you wish to claim a tax deduction for some or all of your contributions, you will need to submit a completed 'ATO Notice of intent to claim a tax deduction for super contributions' form for each contribution you intend to claim as a tax deduction (available on the **netwealth** website). Alternatively, you will have the opportunity to claim a tax deduction for your personal contribution at the end of the financial year when **netwealth** sends you a Section 290.170 Notice, provided you have not by that time commenced a pension or transferred your benefit out of the Fund..

Step 3. Read and sign this declaration

1. I have read and understood the Product Disclosure Statement for Super Accelerator.
2. I have completed the Application form and signed the Declaration.
3. I declare that all details given in this form are true and correct.

Important note: Before you sign this instruction form, **netwealth** or your financial adviser is obliged to give you a current Product Disclosure Statement for Super Accelerator which contains important information about the Fund. The Product Disclosure Statement and the Information Guides will help you understand the product and decide if it is appropriate to your needs.

Name

[illegible]

Signature

--	--

Date / /

Step 4. Once completed please send to us

Email contact@netwealth.com.au

Mail **netwealth** Investments Limited

Fax (03) 9655 1333

Reply Paid 336
SOUTH MELBOURNE VIC 3205

If you have any questions please contact your adviser or call us on Freecall 1800 888 223.

This form may only be used if you have received a copy of the PDS for Super Accelerator dated 31 January 2014.

Client name

[illegible]

A regular contribution plan. First debit may be made in

M	M
---	---

 /

Y	Y
---	---

 and at monthly intervals after that

A once-only amount of	\$,				.	0	0
-----------------------	----	--	--	--	---	--	--	--	---	---	---

☐ Any amount advised, from time to time, by me to **netwealth**

Financial institution name

[illegible]

Financial institution account holder

[illegible]

ACN/ABN of account holder

[illegible]

BSB number

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

Account number

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

Name and capacity

[illegible][illegible]

--

Signature

Date / /

Name and capacity

[illegible][illegible]

--

Signature

Date / /

If signing for a company, sign and print full name and capacity for signing (e.g. Director).

Email contact@netwealth.com.au

Mail **netwealth** Investments Limited
Reply Paid 336
SOUTH MELBOURNE VIC 3205

Fax (03) 9655 1333

If you have any questions please contact your adviser or call us on Freecall 1800 888 223.

netwealth Investments Limited ABN 85 090 569 109 AFSL 230975, **netwealth** Superannuation Master Fund ABN 94 573 747 704.

Client Service Agreement – Direct debit

Definitions

account means the account held at **your financial institution** from which we are authorised to arrange for funds to be debited.

agreement means this Client Service Agreement between **you** and **us** with regard to direct debit arrangements.

non-business day means a Saturday or a Sunday or a public holiday listed throughout Australia.

debit day means the day that payment by **you** to **us** is due.

direct debit request means the direct debit request between **us** and **you**.

us or **we** means **netwealth** Investments Limited (the debit user) you have authorised by signing a **direct debit request**.

you means the customer who signed the **direct debit request**.

your financial institution is the financial institution where **you** hold the **account** that **you** have authorised **us** to arrange to debit.

Drawing arrangements

We will only arrange for funds to be debited from your account as authorised in the direct debit request.

Where the debit date falls on a non-business day, we will draw the amount on the next business day.

We will not change any details of drawings arrangements without giving you at least fourteen (14) days' written notice.

We reserve the right to cancel the direct debit arrangements if three or more drawings are returned unpaid by your nominated financial institution and to arrange with you an alternate payment method.

We will keep all information pertaining to your nominated account at the financial institution, private and confidential.

Your rights

You may terminate your direct debit arrangement at any time by giving written notice directly to us. Notice to us should be received by us at least two (2) business days prior to the due date.

You may stop a debit to your account under your direct debit arrangement by giving written notice directly to us. Notice given to us should be received by us at least two (2) business days prior to the due date.

You may request a change to the drawing amount by contacting us and advising your requirements no less than two (2) business days prior to the due date.

Where you consider that a drawing has been initiated incorrectly (outside your direct debit arrangement) you may take the matter up directly with us, or lodge a direct debit claim through your nominated financial institution.

Your responsibilities

It is your responsibility to ensure that sufficient funds are available in the nominated account to meet a drawing on its due date.

It is your responsibility to ensure that the authorisation given to draw on the nominated account is identical to the account signing instruction held by the financial institution where the account is based.

It is your responsibility to advise us if the account nominated by you to receive the direct debit arrangement is transferred or closed.

It is your responsibility to advise us of a suitable alternate payment method if you wish to amend your direct debit arrangement (where necessary).

All changes or queries regarding this agreement or your direct debit arrangement should be directed to our investor services team on 1800 888 223 or in writing to:

netwealth Investments Limited
PO Box 336
SOUTH MELBOURNE VIC 3205

Step 3. Read and sign this declaration and have it witnessed

I declare that:

- If I have given a binding death benefit direction, I accept and understand the conditions relating to binding death benefit directions, and
- I acknowledge that, where a fixed term direction has been elected, the direction will cease to have effect after the nominated fixed term (shown above from the date this form is receipted by **netwealth**) unless I update it prior to this time.

Name

[illegible]

--

Signature

Date

D	D
---	---

 /

M	M
---	---

 /

Y	Y
---	---

You must have your direction witnessed by two persons over the age of 18 and not named as dependants or legal personal representatives. If the witness details are not completed your direction will not be considered binding on netwealth and benefits will be paid to your legal personal representative.

Each witness declares the applicant signed and dated this binding death benefit direction in the presence of the witness, that the witness is over 18 years of age and the witness is not a nominated dependant.

Witness name

[illegible]

Witness address

[illegible][illegible]

--	--

Signature

Date

D	D
---	---

 /

M	M
---	---

 /

Y	Y
---	---

Witness name

[illegible]

Witness address

[illegible][illegible]

--

Signature

Date

D	D
---	---

 /

M	M
---	---

 /

Y	Y
---	---

Important note: It is recommended that you also initial each page to confirm the information you have provided and that you retain a copy of the completed form. This is for your own records. **netwealth** may accept at its discretion instructions that have not been initialed on each page.

netwealth Superannuation Rollover/transfer request



Please use **BLACK** pen and **BLOCK** letters.

This form may only be used if you have received a copy of the PDS for Super Accelerator dated 31 January 2014.

How to complete this form

1. Please complete all sections of this form and sign it.
2. Please complete a different form for each transfer (this form may be photocopied).
3. If no TFN is provided or you are transferring from a Self Managed Super Fund then you must provide certified photographic documentary evidence of your identity. This may include your driver's licence or passport/birth certificate.
Some funds may require more information. For further assistance please contact **netwealth** on 1800 888 223.

Step 1. Provide your netwealth account to rollover to

netwealth account number (if known)

Step 2. Provide your personal details

Mr/Mrs/Miss/Ms/Dr/Other Family name*

Given name(s)

Date of birth / / Sex ☐ Male ☐ Female

Tax file number - -

Under the Superannuation Industry (Supervision) Act 1993, you are not obliged to disclose your tax file number, but there may be financial consequences if you do not.

* Please attach certified documentary evidence if your name has changed (i.e. marriage certificate, deed poll, etc).

Step 3. Provide your contact details

Residential address (mandatory)

Suburb/town

State Postcode Country (if not Australia)

Phone Home () Work ()

Facsimile () Mobile

Email

Step 4. Provide details of the fund you are transferring from

Fund name

Australian Business Number (ABN)

Unique Super Identifier (USI)

Postal address

Suburb/town

State Postcode Country (if not Australia)

Member number

Contact phone number

Contact email

Full rollover/transfer ☐ **OR** Partial rollover/transfer amount \$

If you have more than one account to transfer from this fund, please complete a separate form for each account.

Client initial

Step 5. Details of the fund you are transferring to

netwealth Superannuation Master Fund

PO Box 336 SOUTH MELBOURNE VIC 3205

ABN 94 573 747 704

Freecall 1800 888 223

Contact email contact@netwealth.com.au

SFN 509956025

RSE Registration R1000184

SPIN/USI Product

NET0017AU Super Accelerator Personal Super

NET0018AU Super Accelerator Employer Sponsored Super

NET0021AU Super Accelerator Standard Income Stream

NET0019AU Super Accelerator Transition to Retirement Income Stream

NET0020AU Super Accelerator Term Allocated Pension

Step 6. Consider your insurance options

It is important that you complete this step. If no selection is made this rollover/transfer will NOT be actioned by us until we receive your instructions.

Do you have insurance arrangements in place with your existing fund?

☐ Yes ☐ No If yes, please tick one of the following:

☐ **netwealth** is to process this rollover/transfer immediately on receiving this form. I understand that my existing insurance arrangements will cease.

netwealth is to hold this form until new insurance arrangements with **netwealth** have been accepted.

Step 7. Read and sign this declaration

1. I authorise the transfer of my benefits from the fund shown in Step 4 (previous fund) to the **netwealth** Superannuation Master Fund, a complying superannuation fund for the purposes of the *Superannuation Industry (Supervision) Act 1993*.
2. I discharge the trustee of my previous superannuation fund from any further liability to pay a benefit to me in respect of those benefits that have been correctly transferred.
3. I acknowledge that the transfer of my benefits from my previous fund may be delayed due to circumstances beyond the control of **netwealth** Investments Limited.
4. I consent to the deduction of any applicable fees from my benefit as a result of the transfer. (If you are not aware of the fees that may apply, you should contact your fund for further information.)
5. **I authorise the trustee of my previous superannuation fund to provide netwealth Investments Limited with all relevant details of my membership and any other relevant information required by law to effect this transfer and to forward a payment for the transfer.**

Important note: Before you sign this Application form, **netwealth** or your financial adviser is obliged to give you a current Product Disclosure Statement for Super Accelerator which contains important information about the Fund. The Product Disclosure Statement and Information Guides will help you understand the product and decide if it is appropriate to your needs.

Name _____

[illegible]

Signature

Date / /

Important note: It is recommended that you also initial each page to confirm the information you have provided and that you retain a copy of the completed form. This is for your own records. **netwealth** may accept at its discretion instructions that have not been initialed on each page.

Step 8. Provide any additional instructions

Please forward this form with your Application form (if applicable) to:

Email contact@netwealth.com.au

Fax 03 9655 1333

Mail Reply Paid 336 SOUTH MELBOURNE VIC 3205

(original form is required by mail if you are providing certified identification)

netwealth Superannuation

Compliance letter

31 January 2014

To whom it may concern

Re **netwealth Superannuation Master Fund ABN 94 573 747 704 SFN 5099 560 25, including netwealth Super Accelerator and netwealth Super Wrap**

SPIN/USI	Product
NET0102AU	Super Wrap Personal Super
NET0103AU	Super Wrap Employer Sponsored Super
NET0101AU	Super Wrap Standard Income Stream
NET0012AU	Super Wrap Transition to Retirement Income Stream
NET0104AU	Super Wrap Term Allocated Pension

SPIN/USI	Product
NET0017AU	Super Accelerator Personal Super
NET0018AU	Super Accelerator Employer Sponsored Super
NET0021AU	Super Accelerator Standard Income Stream
NET0019AU	Super Accelerator Transition to Retirement Income Stream
NET0020AU	Super Accelerator Term Allocated Pension

netwealth Investments Ltd
 ABN 85 090 569 109
 AFSL 230975
 Level 8/52 Collins Street
 MELBOURNE VIC 3000
PO Box 336
SOUTH MELBOURNE VIC 3205
 Freecall: 1800 888 223
 Ph: +61 3 9655 1300
 Fax: +61 3 9655 1333
 Email: contact@netwealth.com.au

As trustee of the above mentioned superannuation fund (Fund), **netwealth** Investments Limited confirms that:

- The Fund is a resident regulated superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 (SIS).
- The Fund will accept all types of personal contributions and will accept employer contributions where the member has completed a Standard choice form nominating the Fund.
- The Fund is able to receive preserved benefits and will preserve these in accordance with SIS.
- The Fund is not subject to a direction under section 63 of SIS.

Contributions can be accepted by the Fund in the following ways:

Method	Payment	Other requirements
Cheque	Cheques should be made payable to: netwealth Investments Limited – Applications Account. Cheques should be crossed 'not negotiable'.	Attach details of the type of contribution to cheque OR Attach an Additional contribution form to your cheque.
Electronic funds transfer	Bank: ANZ BSB number: 013 993 Account no: Last 9 digits of your netwealth account number Reference: A – Superannuation Guarantee B – Salary Sacrifice C – Personal Contribution D – Spouse Contribution	Example: to make a Salary Sacrifice contribution for netwealth account number 0001040500 enter details as follows: BSB: 013 993 Account no: 001040500 Reference: B Note: Superannuation Guarantee will be the default contribution type if no reference is provided.
BPAY®	Biller Codes: 156513: Superannuation Guarantee 156505: Personal Contribution Each client has a unique BPAY Customer Reference Number (CRN). This can be found on the Client details report on the netwealth website, on periodic statements or by contacting netwealth .	156539: Salary Sacrifice 156521: Spouse
Direct debit	One-off direct debits or a regular contribution plan.	Direct debit request – to request a one-off, regular or ad-hoc direct debit from your bank account; AND (if required) Regular contribution plan form – to commence a regular contribution plan.

IMPORTANT: All contribution remittances must be sent to remittance@netwealth.com.au.

If you have any further queries, please contact us via email at contact@netwealth.com.au or Freecall 1800 888 223.

Yours sincerely



Bruce Freeman
Director

netwealth Investments Limited

® Registered to BPAY Pty Ltd ABN 69 079 137 518

Tax file number declaration

The information you provide in this declaration will enable your payer to work out how much tax to withhold from payments made to you.

⊖ Do not use this form if you are a beneficiary wanting to provide your tax file number to the trustee of a **closely held trust**. For more information visit www.ato.gov.au/trustsandtfnwithholding

⚠ You must provide all information requested on this form. Providing the wrong information may lead to incorrect amounts of tax being withheld from payments made to you.

⚠ TERMS WE USE

- **payer** – we are referring to the business or individual making payments under the pay as you go (PAYG) withholding system.
- **payee** – we are referring to the individual being paid.

WHEN SHOULD YOU USE THIS FORM?

You should complete this form before you start to receive payments from a new payer. For example, when you receive:

- payments for work and services as an employee, company director or office holder
- payments under return-to-work schemes
- payments under labour hire arrangements or other specified payments
- benefit and compensation payments
- superannuation benefits.

The information you provide on this form is used to determine the amount of tax to be withheld from payments made to you. For example, whether you:

- claim the tax-free threshold
- are an Australian resident for tax purposes
- have a Higher Education Loan Program (HELP) debt
- have a Financial Supplement debt.

⚠ You do not need to complete this form if you have reached age 60 and commenced a superannuation benefit that does not include an untaxed element for that benefit.

WHERE CAN YOU FIND YOUR TFN?

You will find your tax file number (TFN) on:

- your income tax notice of assessment
- certain correspondence sent to you by the Australian Taxation Office (ATO)
- a payment summary issued to you by your payer.

If you have a registered tax agent, they may also be able to tell you your TFN.

- If you still can't find your TFN you can:
- phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday
 - visit your nearest ATO shopfront (phone **13 28 61** to make an appointment).

If you phone or visit us we need to know we are talking to the right person before we can discuss your tax affairs. We will ask for details only you, or someone you have authorised would know. An authorised contact is someone who you have previously told us can act on your behalf.

DO YOU NEED TO APPLY FOR A TFN?

If you don't have a TFN and want to provide a TFN to your payer you will need to complete and lodge a TFN application form. There are a range of forms available depending on your circumstances.

For more information see page 4.



Australian Government
Australian Taxation Office

OTHER FORMS YOU MAY NEED TO COMPLETE

You may need to complete the following forms:

- **Withholding declaration** (NAT 3093) if:
 - you want to claim entitlement to the senior Australians tax offset (question 9) or other tax offsets (question 10)
 - you want to advise your payer to adjust the amount withheld from payments made to you
 - you want to change information you previously provided in a *Tax file number declaration* (NAT 3092). For example:
 - advise your payer that you have become, or ceased to be, an Australian resident for tax purposes
 - claim, or discontinue claiming, the tax-free threshold
 - advise your payer of, or make changes to, your HELP or Financial Supplement repayment obligations
 - increase the rate or amount to be withheld
 - claim or vary your entitlement to zone, overseas forces, dependent spouse, special tax offset or senior Australians tax offset
- **Medicare levy variation declaration** (NAT 0929) if you qualify for a reduced rate of Medicare levy or are liable for the Medicare levy surcharge. You can vary the amount your payer withholds from your payments (see 'More information' on page 4)
- **Flood levy exemption declaration** (NAT 73797) if you are entitled to claim an exemption from paying the temporary flood and cyclone reconstruction levy (flood levy) applying to income for the 2011–12 year only (see 'More information' on page 4).

➤ For more information on the temporary flood and cyclone reconstruction levy visit www.ato.gov.au/floodlevy. The flood levy will only apply from 1 July 2011 to 30 June 2012.

SECTION A: TO BE COMPLETED BY THE PAYEE

Question 1

What is your tax file number (TFN)?

This question asks you to quote your TFN. If you need to find your TFN, refer to 'Where can you find your TFN?' on page 1.

● Your payer and the ATO are authorised by the *Taxation Administration Act 1953* to collect your TFN on this form. It is not an offence not to quote your TFN. However, your payer is required to withhold the top rate of tax plus the Medicare levy (or the top rate of tax if you are not an Australian resident for tax purposes) from all payments made to you if you do not provide your payer with a completed *Tax file number declaration* (NAT 3092) which quotes your TFN or claims an exemption from quoting your TFN.

You may claim an exemption from quoting your TFN.

Print ☒ in the appropriate box if you:

- have lodged a TFN application or enquiry form for individuals or made a phone or ATO shopfront enquiry to obtain your TFN. You now have 28 days to provide your TFN to your payer who must withhold at the standard rate during this time. After 28 days, if you have not given your TFN to your payer, they will withhold the top rate of tax plus the Medicare levy (or the top rate of tax if you are not an Australian resident for tax purposes) from future payments
- are claiming an exemption from quoting a TFN because you are:
 - under 18 years of age and do not earn enough to pay tax
 - an applicant or recipient of certain pensions, benefits or allowances from:
 - Centrelink – however you will need to quote your TFN if you receive Austudy, Newstart, sickness or parenting allowance
 - Department of Veterans' Affairs – a service pension under the *Veterans' Entitlement Act 1986*
 - the Military Rehabilitation and Compensation Commission.

Provision of your TFN to your superannuation fund

Your payer must quote your TFN to the superannuation fund to which contributions are being made on your behalf. If your superannuation fund does not have your TFN, we can provide it to them. After this is done:

- your superannuation fund can accept all types of contributions to your account (or accounts)
- additional tax will not be imposed on contributions as a result of failing to provide your TFN to your superannuation fund

- there will be no additional tax to be deducted when you start drawing down your superannuation benefits, other than the tax that may ordinarily apply
- you can trace different superannuation accounts in your name so that you receive all your superannuation when you retire.

Under the *Superannuation Industry (Supervision) Act 1993*, your superannuation fund is authorised to collect your TFN, which will only be used for purposes of the superannuation laws. The trustee of your superannuation fund may disclose your TFN to another superannuation provider if your benefits are being transferred. You may write to the trustee of your superannuation fund and ask them not to disclose your TFN to any other trustee.

For more information about privacy, see 'Privacy of information' on page 4.

Question 6

On what basis are you paid?

Check with your payer if you are not sure.

Question 7

Are you an Australian resident for tax purposes?

Generally, we consider you to be an Australian resident for tax purposes if you:

- have always lived in Australia or you have come to Australia and now live here permanently
- are an overseas student doing a course that takes more than six months to complete
- have been in Australia continuously for six months or more and for most of that time you worked in the one job and lived in the same place
- will be or have been in Australia for more than half of the financial year (unless your usual home is overseas and you do not intend to live in Australia).

If you go overseas temporarily and do not set up a permanent home in another country, you may continue to be treated as an Australian resident for tax purposes.

The criteria we use to determine residency are not the same as used by the Department of Immigration and Citizenship or Centrelink.

❗ FOREIGN RESIDENT TAX RATES ARE DIFFERENT

A higher rate of tax applies to foreign residents' taxable income and foreign residents are not entitled to a tax-free threshold.

You are not entitled to claim the tax-free threshold and tax offsets if you are not an Australian resident for tax purposes. However, there is an exception with zone or overseas forces tax offsets – see question 10.

➤ For more information on your entitlement:

- visit www.ato.gov.au/declarationguide
- phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday.

Answer 'NO' to this question if you are not an Australian resident for tax purposes. You must also answer 'NO' at questions 8, 9 and 10 (unless you are a foreign resident claiming a senior Australians, zone or overseas forces tax offset).

Question 8

Do you want to claim the tax-free threshold from this payer?

The tax-free threshold is the amount of income you can earn each year that is not taxed. It is available only to people who are Australian residents for tax purposes (that is, people who answered 'YES' at question 7).

❗ DO YOU HAVE MORE THAN ONE JOB OR PAYER?

You can claim the tax-free threshold from only one payer at a time, generally, from the payer you expect to pay you the most during the income year. To change the payer you are currently claiming the tax-free threshold from, you must complete a *Withholding declaration* (NAT 3093) to advise the payer you no longer want to claim it from them. If you are already claiming the tax-free threshold from Centrelink you cannot also claim it from another payer.

Answer 'YES' if you:

- are an Australian resident for tax purposes
- are not currently claiming the tax-free threshold from another payer
- want to claim the tax-free threshold.

! WITHHOLDING FOR LOW INCOME TAX OFFSET

If you answer 'YES' your payer will reduce your withholding to allow a claim for 70% of the low income tax offset amount where your payment is at the relevant level.

Answer 'NO' if you either:

- answered 'NO' to question 7
- have claimed the tax-free threshold from another payer, or
- do not wish to claim the tax-free threshold.

➤ For more information on your entitlement, which payer you should claim it from, or how to vary your withholding rate:

- visit www.ato.gov.au/declarationguide
- phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday.

Question 9

Do you want to claim the senior Australians tax offset by reducing the amount withheld from payments made to you?

⊖ CLAIM BENEFITS AND TAX OFFSETS WITH ONLY ONE PAYER

You are not entitled to reduce your withholding amounts, or claim the senior Australians tax offset with more than one payer at the same time.

If you receive income from more than one source and need help with this question, phone **1300 360 221** between 8.00am and 6.00pm, Monday to Friday.

How your income affects the amount of your tax offset

You must meet the eligibility conditions to receive the senior Australians tax offset. Your rebate income, not your taxable income, determines the amount, if any, of senior Australians tax offset you will receive.

Answer 'YES' if you are eligible and choose to receive the senior Australians tax offset. You can reduce the amount withheld from payments made to you during the year by completing a *Withholding declaration* (NAT 3093). If your payer does not have copies of the form, see 'More information, Products' on page 4.

Answer 'NO' if you are either:

- not eligible for the senior Australians tax offset
- already claiming the senior Australians tax offset with another payer, or
- eligible but want to claim your entitlement to the tax offset as a lump sum in your end-of-year income tax assessment.

➤ For more information on your eligibility to claim the tax offset or rebate income:

- visit www.ato.gov.au/declarationguide
- phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday.

Question 10

Do you want to claim a zone, overseas forces, dependent spouse or special tax offset by reducing the amount withheld from payments made to you?

⊖ CLAIM TAX OFFSETS WITH ONLY ONE PAYER

You are not entitled to claim tax offsets with more than one payer at the same time.

You may be eligible for:

- a zone tax offset if you live or work in certain remote or isolated areas of Australia
- an overseas forces tax offset if you serve overseas as a member of Australia's Defence Force or a United Nations armed force

- a dependent spouse tax offset

- a special tax offset for a dependent invalid relative, dependent parent, housekeeper caring for an invalid spouse or a dependent child-housekeeper.

Answer 'YES' to this question if you are eligible and choose to receive tax offsets by reducing the amount withheld from payments made to you from this payer. You also need to complete a *Withholding declaration* (NAT 3093).

Answer 'NO' to this question if you are not eligible for the tax offsets, choose to receive any of these tax offsets as an end-of-year lump sum through the tax system, or are already claiming the offset from another payer.

! FOREIGN RESIDENT

If you are not a resident of Australia for tax purposes, you are not entitled to claim a dependent spouse tax offset or a special tax offset. You may be entitled to claim the zone or overseas forces tax offset.

➤ For more information on your entitlement:

- visit www.ato.gov.au/declarationguide
- phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday.

Question 11

(a) Do you have an accumulated Higher Education Loan Program (HELP) debt?

Answer 'YES' if you have an accumulated HELP debt.

Answer 'NO' if you do not have an accumulated HELP debt, or you have repaid your HELP debt in full.

! You have a HELP debt if:

- the Australian Government lends you money under HECS-HELP, FEE-HELP, OS-HELP or VET FEE-HELP
- you have a debt from the previous Higher Education Contribution Scheme (HECS).

➤ For information on repaying your HELP debt:

- visit www.ato.gov.au/declarationguide
- phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday.

(b) Do you have an accumulated Financial Supplement debt?

Answer 'YES' if you have an accumulated Financial Supplement debt.

Answer 'NO' if you do not have an accumulated Financial Supplement debt, or you have repaid your Financial Supplement debt in full.

➤ For information on repaying your Financial Supplement debt:

- visit www.ato.gov.au/declarationguide
- phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday.

Have you repaid this debt?

When you have repaid your accumulated HELP or Financial Supplement debt, you must complete a *Withholding declaration* (NAT 3093) notifying your payer of the change in your circumstances.

! SIGN AND DATE THE DECLARATION

Make sure you have answered all the questions in Section A and signed and dated the declaration. Give your completed declaration to your payer.

SECTION B: TO BE COMPLETED BY THE PAYER

! Important information for payers. See the reverse side of the PAYER'S copy of the form.

➤ MORE INFORMATION

Internet

- Visit www.ato.gov.au/declarationguide for more information about residency, tax-free threshold, HELP, Financial Supplement debt or your entitlement to claim tax offsets.
- If you are a permanent migrant or temporary visitor to Australia apply for a TFN online at www.iar.ato.gov.au
- Visit www.abr.gov.au to apply for an Australian business number (ABN) online for sole traders, companies, partnerships, trusts and superannuation funds.
- Visit www.ato.gov.au/floodlevy for more information on the temporary flood and cyclone reconstruction levy.

Phone

- Payee – for more information phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday. If you want to vary your rate of withholding phone **1300 360 221** between 8.00am and 6.00pm, Monday to Friday.
- Payer – for more information phone **13 28 66** between 8.00am and 6.00pm, Monday to Friday.

If you do not speak English well and need help from the ATO, phone the Translating and Interpreting Service on **13 14 50**.

If you are deaf, or have a hearing or speech impairment, phone the ATO through the National Relay Service (NRS) on the numbers listed below:

- TTY users, phone **13 36 77** and ask for the ATO number you need (if you are calling from overseas, phone **+61 7 3815 7799**)
- Speak and Listen (speech-to-speech relay) users, phone **1300 555 727** and ask for the ATO number you need (if you are calling from overseas, phone **+61 7 3815 8000**)
- internet relay users, connect to the NRS on www.relayservice.com.au and ask for the ATO number you need.

If you would like further information about the National Relay Service, phone **1800 555 660** or email helpdesk@relayservice.com.au

If you phone we need to know we are talking to the right person before we can discuss your tax affairs. We will ask for details only you, or someone you have authorised, would know. An authorised contact is someone who you have previously told us can act on your behalf.

Products

We produce a number of products that may be useful to you.

You can get the following forms and publications from ATO shopfronts or our website at www.ato.gov.au/onlineordering or by phoning **1300 720 092**:

- *Withholding declaration* (NAT 3093)
- *Medicare levy variation declaration* (NAT 0929)
- *Withholding declaration – upwards variation* (NAT 5367)
- *Flood levy exemption declaration* (NAT 73797)
- *Repaying your HELP debt* (NAT 3913)
- *Tax file number – application or enquiry for individuals* (NAT 1432)
- *Tax file number – application or enquiry for individuals living outside Australia* (NAT 2628)
- *Tax file number – application or enquiry for Aboriginals or Torres Strait Islanders* (NAT 1589)

OUR COMMITMENT TO YOU

We are committed to providing you with accurate, consistent and clear information to help you understand your rights and entitlements and meet your obligations.

If you follow our information in this publication and it turns out to be incorrect, or it is misleading and you make a mistake as a result, we must still apply the law correctly. If that means you owe us money, we must ask you to pay it but we will not charge you a penalty. Also, if you acted reasonably and in good faith we will not charge you interest.

If you make an honest mistake in trying to follow our information in this publication and you owe us money as a result, we will not charge you a penalty. However, we will ask you to pay the money, and we may also charge you interest. If correcting the mistake means we owe you money, we will pay it to you. We will also pay you any interest you are entitled to.

If you feel that this publication does not fully cover your circumstances, or you are unsure how it applies to you, you can seek further assistance from us.

We regularly revise our publications to take account of any changes to the law, so make sure that you have the latest information. If you are unsure, you can check for more recent information on our website at www.ato.gov.au or contact us.

This publication was current at **July 2011**.

PRIVACY OF INFORMATION

We are authorised by the *Income Tax Assessment Act 1936* to ask for information on this declaration. We need this information to help us administer those laws.

Where we are authorised by law to do so, we may give this information to other government agencies. These agencies could include Centrelink, Australian Federal Police, Child Support Agency, Departments of Families, Housing, Community Services and Indigenous Affairs, Veterans' Affairs, and Education, Employment and Workplace Relations.

Only certain people and organisations can ask for your TFN. These include employers, some Australian Government agencies, including Child Support Agency, trustees for superannuation funds, payers under the PAYG system, higher education and vocational education and training (VET) providers and investment bodies such as banks. We are authorised by the *Taxation Administration Act 1953* to collect your TFN. You are not required by law to provide your TFN. However, quoting your TFN reduces the risk of administrative errors and having extra tax withheld.

If you need more information about how the tax laws protect your personal information, or have any concerns about how the ATO has handled your personal information, phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday.

WHAT TO DO IF YOU ARE CONCERNED ABOUT PRIVACY ISSUES

If you have privacy concerns visit the Privacy Commissioner's website at www.privacy.gov.au



Australian Government
Australian Taxation Office

www.ato.gov.au

Tax file number declaration

This declaration is NOT an application for a tax file number.

- Use a black or blue pen and print clearly in BLOCK LETTERS.
- Print X in the appropriate boxes.
- Read all the Instructions before you complete this declaration.

ORIGINAL – ATO copy



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Section A: To be completed by the PAYEE

1 What is your tax file number (TFN)?

See Privacy of information on page 4 of the Instructions.

OR I have made a separate application/enquiry to the ATO for a new or existing TFN. ☐

OR I am claiming an exemption because I am under 18 years of age and do not earn enough to pay tax. ☐

OR I am claiming an exemption because I am in receipt of a pension, benefit or allowance. ☐

2 What is your name?

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐

Surname or family name

First given name

Other given names

3 If you have changed your name since you last dealt with the ATO, show your previous family name

4 What is your date of birth?

Day / Month / Year

5 What is your home address in Australia?

Suburb or town

State/territory

Postcode

6 On what basis are you paid? (Select only one.)

Full-time employment ☐ Part-time employment ☐ Labour hire ☐ Superannuation income stream ☐ Casual employment ☐

7 Are you an Australian resident for tax purposes?

Yes ☐ No ☐ You must answer No at question 8.

8 Do you want to claim the tax-free threshold from this payer?

Only claim the tax-free threshold from one payer.

If you have more than one source of income and currently claim the tax-free threshold from another payer, do not claim it now.

Yes ☐ No ☐ Answer No at questions 9 and 10 unless you are a foreign resident claiming a senior Australians, zone or overseas forces tax offset.

9 Do you want to claim the senior Australians tax offset by reducing the amount withheld from payments made to you?

Yes ☐ Complete a Withholding declaration (NAT 3093), but only if you are claiming the tax-free threshold from this payer. If you have more than one payer, see page 3 of the Instructions. No ☐

10 Do you want to claim a zone, overseas forces, dependent spouse or special tax offset by reducing the amount withheld from payments made to you?

Yes ☐ Complete a Withholding declaration (NAT 3093). No ☐

11 (a) Do you have an accumulated Higher Education Loan Program (HELP) debt?

Yes ☐ Your payer will withhold additional amounts to cover any compulsory repayments that may be raised on your notice of assessment. No ☐

(b) Do you have an accumulated Financial Supplement debt?

Yes ☐ Your payer will withhold additional amounts to cover any compulsory repayments that may be raised on your notice of assessment. No ☐

DECLARATION by payee: I declare that the information I have given is true and correct.

Signature

Date

Day

Month

Year

You MUST SIGN here

There are penalties for deliberately making a false or misleading statement.

Once Section A is completed and signed, give it to your payer.

Section B: To be completed by the PAYER (if you are not lodging online)

1 What is your Australian business number (ABN) or your withholding payer number?

Branch number (if applicable)

2 If you don't have an ABN or withholding payer number, have you applied for one?

Yes ☐ No ☐ See 'More information' on page 4 of the Instructions.

3 What is your registered business name or trading name (or your individual name if not in business)?

DECLARATION by payer: I declare that the information I have given is true and correct.

Signature of payer

Date

Day

Month

Year

There are penalties for deliberately making a false or misleading statement.

4 What is your business address?

Suburb or town

State/territory

Postcode

5 Who is your contact person?

Business phone number

6 If you no longer make payments to this payee, print X in this box ☐

Return the completed original ATO copy to:

For WA, SA, NT, VIC or TAS

Australian Taxation Office

PO Box 795

ALBURY NSW 2640

For NSW, QLD or ACT

Australian Taxation Office

PO Box 9004

PENRITH NSW 2740

IMPORTANT See reverse side of PAYER's copy for:

- payer obligations
- lodging online.

TAXPAYER-IN-CONFIDENCE (when completed)

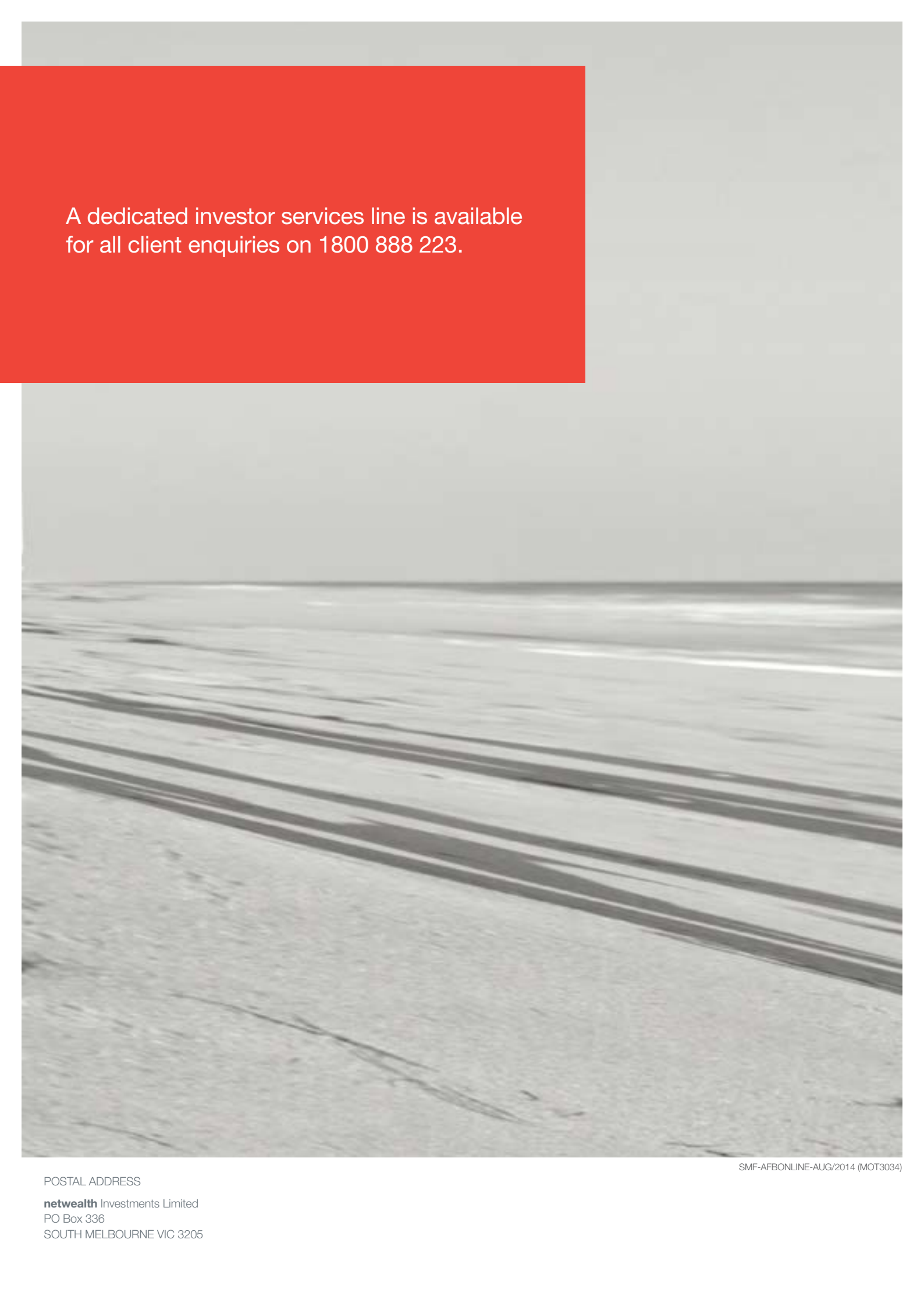
PRIVACY OF INFORMATION

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A dedicated investor services line is available
for all client enquiries on 1800 888 223.

POSTAL ADDRESS

netwealth Investments Limited
PO Box 336
SOUTH MELBOURNE VIC 3205

SMF-AFBONLINE-AUG/2014 (MOT3034)