

# Transfer to Another Super Fund

## When to use this form

Use this form if you want to transfer all or part of your QSuper account to another super fund, including a self-managed super fund (SMSF).

If you've started working for a new employer, it's important to know that you can keep your QSuper account. For more information, visit [qsuper.qld.gov.au/changingjobs](http://qsuper.qld.gov.au/changingjobs) or call us on **1300 360 750**.

If you would like your employer contributions to go to another super fund, please ensure that you have arranged this with your employer before submitting this form.

Please complete in **BLOCK** letters, in blue or black ink.

## 1 Personal details

Client number

Your client number can be found on your annual statement or by logging in to Member Online.

Title

First name/s

Last name

Previous name<sup>1</sup> (if we know you by another name)

Date of birth (dd/mm/yyyy)

Home phone number

Mobile phone number

Work phone number

Email address

Residential address

State

Postcode

Postal address

As above

State

Postcode

## 2 Full or partial transfer

### Option 1 – Full transfer and close account

I want to transfer all funds from my QSuper account. I understand this will cancel my membership including any insurance cover. **Proceed to section 3.**

### Option 2 – Partial transfer and keep account

I want to keep my QSuper account open. (You must keep a minimum balance of \$6,000 in the account.)

#### Partial amount to transfer

Please tell us how much money you want to transfer out of your QSuper account.

I want to transfer the following amount:

\$

Account to take funds from:

Accumulation account: **Accumulation account number** (if you have multiple accounts):

Income account: **Income account number** (if you have multiple accounts):

Defined Benefit account

Deferred Retirement Benefit account (DRB) (please also complete section 3)

If you do not specify an account number, we will decide which account to transfer from.

### **!** Defined Benefit or DRB

If you are transferring from a Defined Benefit or Deferred Retirement Benefit account, you will need to complete additional documentation.

For more information, see the Defined Benefit Account Guide at [qsuper.qld.gov.au/guides](http://qsuper.qld.gov.au/guides) or call us on **1300 360 750**.

<sup>1</sup> We cannot process a transfer if the name on the form is different to the name on our records. If your name has changed and you work for a Queensland Government or default employer, let your payroll office know and they will let us know. Otherwise, please send us a certified copy of either a marriage certificate or other legal change of name document.



Part of Australian Retirement Trust

Australian Retirement Trust Pty Ltd (ABN 88 010 720 840, AFSL 228975) is the trustee of Australian Retirement Trust (ABN 60 905 115 063).

### 3 Opt out of your Deferred Retirement Benefit (optional)

Only complete this section if you have a Deferred Retirement Benefit. **If not, proceed to section 4.**

I do not want the Deferred Retirement Benefit and I want the Trustee to transfer the discounted value of the funds out of this account.

I understand that if I choose this option and close my Deferred Retirement Benefit account, I can't reopen it. I also understand that if I'm under age 55 when leaving the Deferred Retirement Benefit, the amount transferred will be a discounted amount, as explained in the Defined Benefit Account Guide.

**We recommend you speak with a financial adviser before choosing to close your Deferred Retirement Benefit account. The Deferred Retirement Benefit account is very different to the Accumulation account and isn't easily comparable.**

### 4 Fund to transfer your money to

Please select the type of superannuation fund you're transferring to and provide us with the necessary account information.

#### Transfer to an approved registered super fund

Fund name

Product name

Client/account number

Fund phone number

Fund USI/SPIN

Fund ABN

The fund **Unique Superannuation Identifier (USI)** can be found on the other fund's website and might be called a SPIN. **We may not be able to process your request without this.**

OR

#### Transfer to a self-managed super fund (SMSF)

Self-managed super fund (SMSF) name



Australian business number (ABN)

Electronic service address (ESA)

Branch (BSB) number

Account number

Please attach to this form a **copy of a bank statement for the SMSF account** listed above, no older than 6 months.

To proceed with this request, the name of the bank account provided must match the details for your registered SMSF at the Australian Taxation Office (ATO).

#### **Transferring to SMSF**

We can't process your transfer to your SMSF if you have not provided an electronic service address (ESA) for your SMSF. For more information on this requirement, visit [ato.gov.au/Super/Self-managed-super-funds/Setting-up/Get-an-electronic-service-address/](https://ato.gov.au/Super/Self-managed-super-funds/Setting-up/Get-an-electronic-service-address/)

## 5 Proving your identity

If you are transferring your funds to a SMSF, you are required to prove your identity by completing this section of the form. **If not, proceed to section 6.**

You can prove your identity by either:

### Option 1 – Electronic identification

(not available for people currently living overseas)

To prove your identity electronically, please provide us with your driver's licence or passport number.

From here, we will provide your name, address, and date of birth to a credit reporting agency (CRA) to check if your personal information matches your credit information file with the CRA. This will allow us to verify you under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 before making your payment. It doesn't give us access to other information about you, our request won't be recorded on your credit information file, and the CRA can't use it for anything else. If we cannot identify you in this way, we will write to you advising the name of the CRA and another way to verify your identity.

**I confirm that I am authorised to provide the personal details presented and I consent to my information being checked with the document issuer or official record holder.**

Driver's licence number

State of issue



If using your driver's licence as proof of identity, please also give us your driver's licence card number, which is different to your licence number.

Driver's licence card number

OR

Passport number

Previous name



Country of birth

OR

### Option 2 – Certified identification

You can post, email, or fax us certified copies of your identification document as explained in the Proving Your Identity factsheet on our website.

## 6 Declaration and authorisation

- I am the person named on this form or have a power of attorney to act on the member's behalf.
- The information I have given on this form is true and correct.
- If I am transferring my benefit to a self-managed superannuation fund (SMSF), I confirm I am a member, trustee, director, or a corporate trustee of the SMSF.
- I understand the Trustee has no further legal responsibility for the benefits that are transferred to the other fund or if I have chosen to permanently opt out.
- I understand my insurance will be cancelled if I am transferring my entire balance to another fund.
- I understand that any insurance I already hold or receive as a result of submitting an application for an Accumulation account will be cancelled in certain circumstances.<sup>2</sup>
- I understand that the transfer may be delayed if the Trustee does not hold my Tax File Number (TFN) on file.
- I ask for and give my permission to transfer my super as described above, and I give permission to the super provider of each fund to process this transfer.

Name

Signature

(Please sign in blue or black pen – We do not accept electronic signatures on this form.)

Date signed (dd/mm/yyyy)

<sup>2</sup> There are various circumstances when cover will end. See the *Insurance Guide* at [qsuper.qld.gov.au/pds](http://qsuper.qld.gov.au/pds)

## 7 Checklist

- If you are transferring to a SMSF** and in section 5, you selected Option 2 – Certified identification, please make sure you attach certified copies of your proof of identification documents. For more information, please read the identity section of our website or read our Proving Your Identity factsheet at [qsuper.qld.gov.au/factsheets](https://qsuper.qld.gov.au/factsheets)
- If you are signing as a power of attorney** and you haven't already done so, you'll need to attach a certified copy of your power of attorney documentation. You must also attach certified copies of your and the member's identification documents.
- If you are selecting a rollover to your SMSF,** you will need to attach a copy of your bank statement.
- If you have not previously provided your Tax File Number (TFN)** and wish to supply this, please update via Member Online or by completing the Tax File Number notification form available on our website. To protect your privacy, please do not write your TFN on this form.

### Where to send this form

Please send your completed form to us by:

Post

QSuper  
GPO Box 200  
Brisbane QLD 4001

Email

[qsuper@qsuper.qld.gov.au](mailto:qsuper@qsuper.qld.gov.au)

### Transfer processing timeframes

We will process your transfer request within 3 business days, once all the required information has been received.

#### Member Centres

Visit [qsuper.qld.gov.au/membercentres](https://qsuper.qld.gov.au/membercentres) for locations

#### Member Services team

**Phone** 1300 360 750  
**Overseas** +61 7 3239 1004  
Monday to Friday 8.00am – 6.00pm (AEST)

**Postal address** GPO Box 200, Brisbane QLD 4001  
**Email** [qsuper@qsuper.qld.gov.au](mailto:qsuper@qsuper.qld.gov.au)  
**Fax** 1300 242 070  
**Website** [qsuper.qld.gov.au](https://qsuper.qld.gov.au)

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