

## apply for early release of super form

### Claim type A – Compassionate grounds

Members may apply to the Australian Prudential Regulation Authority (APRA) for release of their preserved or restricted non-preserved benefit given that it is required to:

- Pay for medical treatment (or medical transport) for yourself or a dependant; or
- Enable you to make a payment on a loan to prevent:
  - i. Foreclosure of a mortgage on your principal place of residence
  - ii. Exercise by the mortgagee of an express or statutory power of sale over your principal place of residence; or
- Modify your principal place of residence and/or vehicle to accommodate the special needs of yourself or a dependant, arising from severe disability; or
- Pay for expenses associated with your own or a dependant's palliative care; or
- Pay for expenses associated with a dependant's death, funeral or burial.

#### Instructions

- Tick box A in Section 1 and attach a certified copy of your proof of identification
- Complete all sections except Section 4
- Attach your original approval letter from APRA, or a certified copy
- Send the completed **Apply for early release of super form** to CareSuper

### Temporary residents

Temporary residents are not able to apply for early release of their benefits on the grounds listed in this form. Please call the CareSuperLine or visit [caresuper.com.au](http://caresuper.com.au) for further details.



Return this completed form to:

**CareSuper**  
GPO Box 1923  
Melbourne VIC 3001

For more information  
call the CareSuperLine

**1300 360 149**

### Claim type B – Financial hardship

#### Claim type 1 – for members aged less than 55 years and 39 weeks

Your application can only be considered if:

1. CareSuper can verify your eligibility through Centrelink's Customer Confirmation eService, using your Centrelink Reference Number, **or** you have received a letter from Centrelink (a Q230 letter) or the Department of Veterans' Affairs (DVA) stating that:
  - i. You have received Commonwealth income support payments for a continuous period of not less than 26 weeks; **and**
  - ii. You were in receipt of such payments on the date of the written evidence; **and**
2. You are unable to meet reasonable and immediate family living expenses. (With credit cards and loans, it is only the amount in arrears and the amount billed as the minimum amount due which can be considered an 'immediate' family living expense, not the total amount owing. Supporting copies of bills must be less than 3 months old.)

#### Claim type 2 – for members aged over 55 years and 39 weeks

Your application can only be considered if:

1. CareSuper can verify your eligibility through Centrelink's Customer Confirmation eService, using your Centrelink Reference Number, **or** you have received a letter from Centrelink or the Department of Veterans' Affairs (DVA) stating that you have received Commonwealth income support payments for a cumulative period of not less than 39 weeks since reaching the age of 55 years; **and**
2. You were not gainfully employed on a full-time or part-time basis on the date of your application for early release of your benefit.

**Important note:** In both of the above circumstances, a maximum amount of \$10,000 (before tax) can be released. You can only apply for a release of your benefits on these grounds once in any 12-month period.

**Please note:** the letter from Centrelink or the DVA is only valid for 21 days, and must be provided to CareSuper within that time period.

#### Instructions

- Tick box B in Section 1 and attached a certified copy of your proof of identification
- Complete all sections
- Attach your valid Q230 letter from Centrelink (or a certified copy), or provide your Centrelink Reference Number (CRN) in Section 4
- If you are applying under Claim type B please attach copies of outstanding credit card and other bills relating to living expenses
- Send the completed **Apply for early release of super form** and proof of identification to CareSuper Administration

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## Definitions

### Preserved benefits

These are benefits that are required to remain in the superannuation environment until a trigger event such as retirement from the workforce after reaching your retirement age, or eligibility for early release, occurs.

### Unrestricted non-preserved

These are benefits that are no longer restricted because a trigger event has occurred and therefore are payable to the member on request.

### Restricted non-preserved

Benefits that are restricted in the same way as preserved benefits. However, if you or your employer made a contribution on your behalf prior to 1 July 1999 and you cease working for that employer, then these benefits may become unrestricted non-preserved and may be able to be accessed.

### Complying fund

A superannuation fund that complies with the operating standards specified in the SIS legislation and is thereby eligible to receive concessional taxation treatment.

### Temporary residents

You also need to declare whether or not you were a temporary resident when applying to withdraw some or all of your superannuation. Temporary residents can only claim a cash payment of their superannuation after they have left Australia, or in special circumstances such as permanent or temporary incapacity.

# apply for early release of super

Complete all the required sections applicable to your claim. Please complete the form in blue or black pen and block letters.

Please tick (✓) one box only.

Please refer to the instructions on page 1 detailing how to complete this form.

## Section 1 – Select claim type



I would like to access my benefits on the grounds of:

**A Compassionate grounds**

I have an original letter of approval from APRA

**B Financial hardship**

I have a Centrelink Reference Number or a valid Q230 letter from Centrelink, and evidence of debt to the value of the amount I am claiming.

### Providing identification – applicable to all claims

For security reasons, you must provide certified copies of identification documents. I have included with my claim a certified copy of:

#### A primary photographic identification document

- Driver's licence  
 Passport

OR

#### A primary non-photographic identification document

- Birth certificate  
 Citizenship certificate  
 Centrelink pension card

and

#### A secondary identification document

- Centrelink payment letter  
 Government or local council payment notice (less than one year old) clearly showing your name and residential address

Your name must be the same as shown on your proof of identity, or additional change of name documentation must also be provided.

### Change of name – if applicable

I have included a certified copy of one of these documents with my Early release of super form.

- Marriage certificate  
 Decree Absolute  
 Deed poll/change of name documentation

### Certification of documents

When certifying documents, please take the original documents and the copies to any one of the following persons for them to certify that they are true and correct copies of the originals. All pages need to be certified as true copies of the original by writing or stamping 'certified true copy'. The certification must include their signature, printed name, qualification (e.g. 'police officer'), date and contact telephone number.

Please note the certification needs to contain an original signature. Faxed copies of certified documents will not be accepted. CareSuper reserves the right to request additional certified identification documents where required. People who can certify your ID include:

- Teacher employed on a full-time basis at a school or tertiary education institution
- Healthcare professional such as medical practitioner, nurse, pharmacist, veterinary surgeon
- Officer with, or authorised representative of, a holder of an Australian financial services licence, with 2 or more continuous years of service
- Justice of the peace
- Police officer
- Legal practitioner
- Marriage celebrant
- Minister of religion
- Member of a professional accounting association

For a full list of people able to certify your ID, see the forms and publications page of [caresuper.com.au](http://caresuper.com.au).

## Section 2 – Your member details



CareSuper member number

Date of birth (DD/MM/YYYY)

 /  / 

Surname

Mr/Mrs/Ms/Miss/Dr

Given names

Residential address

State

Postcode

Postal address (optional)

State

Postcode

Country

Telephone (home)

Telephone (work)

Email

Name of last employer who contributed to CareSuper

Date you left your employer (DD/MM/YYYY)

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[See over >](#)

## Section 3 – Your Tax File Number (TFN)

→ I advise that my Tax File Number is:

### Declaration

- I agree to allow CareSuper to quote my TFN for legislatively approved superannuation and taxation purposes.
- I certify that to the best of my knowledge information given on this form is true and correct.
- I am aware that CareSuper is required by law to seek my TFN, properly safeguard it and only use it for legislatively approved superannuation and taxation purposes as specified in the Privacy Act 1988, the Superannuation Industry (Supervision) Act 1993 and the Income Tax Assessment Act 1936.
- I understand that I may advise the Trustee of CareSuper in writing if I wish to restrict the use of my TFN by not allowing it to be passed to another fund or Trustee.
- I understand that the lawful purpose may change in the future as a result of legislative change.
- I understand it is not an offence if I do not provide my TFN.

I understand the above statements.

## Section 4 – Financial hardship details

→ Note: Legislation limits claims to one per year, for a maximum of \$10,000 before tax.

### Centrelink requirements

To confirm whether you have met the requirements regarding Commonwealth income support payments, CareSuper can use Centrelink's Customer Confirmation eService (CCeS) as alternative to receiving your Q230 letter.

My Centrelink Reference Number (CRN) is:

By providing this number, I am giving consent to CareSuper and its administrator to confirm with Centrelink:

- that my name, date of birth and CRN details supplied in this application match Centrelink records; and
- whether I have a qualifying income support payment for the period required for the early release of my superannuation funds on the grounds of severe financial hardship.

OR

I attach a certified copy of my Q230 letter from Centrelink.

### General details

The following information will be used solely for determining whether you are experiencing severe financial hardship. This information will not be made available to any other person, except under an order of the Court.

Number of financial dependants (e.g. your partner and any children):

List the ages of your dependants:

What amount are you seeking to have released to relieve your current severe financial situation?

\$

Please provide the reason for the release of your benefit:

  
  

### Current total net weekly income

(Please provide evidence – e.g: payslips, bank statements etc.  
Please send copies as originals will not be returned).

Self	\$
Partner	\$
Dependants	\$
<b>Total</b>	<b>\$</b>

Have you also applied for an early release of your benefit from another fund?

Yes If yes, what was the amount released? \$

No



Return this completed form to:

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GPO Box 1923  
Melbourne VIC 3001

For more information call the CareSuperLine

1300 360 149

[See over >](#)

### Current total weekly expenses

In relation to you, your spouse and dependants, excludes any business expenses.

Expense item	Amount per week
Rent/board	\$
Home loan repayments (provide documentary evidence)	\$
Personal loan repayments (provide documentary evidence)	\$
Credit card repayments (provide documentary evidence)	\$
Food	\$
Electricity	\$
Gas	\$
Telephone	\$
Car	
• Fuel	\$
• Registration	\$
• Insurance	\$
• Loan/lease/rental (provide documentary evidence)	\$
Clothing	\$
Rates & water	\$
House insurance	\$
Education	\$
Medical and dental	\$
Other weekly expenses (please specify below)	
	\$
	\$
	\$
<b>Total weekly expenses</b>	<b>\$</b>

### Personal arrears

Details of any overdue bills or loan repayments, exclude any business arrears. Note: CareSuper can only release an amount sufficient to clear these arrears, not future debts.

Overdue item	Amount arrears
Mortgage arrears (provide documentary evidence)	\$
Credit card arrears (provide documentary evidence)	\$
Family court settlement (provide documentary evidence)	\$
Other loans/expenses (provide documentary evidence – specify below)	\$
	\$
	\$
	\$
<b>Total arrears</b>	<b>\$</b>

Please note that tax at the rate of 21.5% will be deducted from the amount released.

Please attach evidence of expenses and personal arrears, including outstanding credit card and other bills relating to expenses.

The full completion of Section 4 is vital to the prompt processing of your claim. Should you not be able to complete a part of Section 4, please note by adding N/A in the relevant section/s. Please return the completed **Early release of super** form, signed and dated, along with your other documentation.

## Section 5 – Payment method



Deduct my payment from each investment option in proportion to the value of my total investment options with CareSuper at the time of payment.

Deduct my payment from the following investment options in the proportions I have requested. Please nominate the percentage (%) of the withdrawal you would like taken from each option. Take care that your proportions add up to 100%.

#### Managed options:

Capital Guaranteed   
  Capital Stable   
  Conservative Balanced  
 Balanced (default)   
  Sustainable Balanced   
  Alternative Growth   
  Growth

#### Asset Class options:

Capital Secure   
  Direct Property   
  Australian Shares  
 Fixed Interest   
  Overseas Shares   
  ASX 200

[See over >](#)

Complete this section if you would like your benefit paid into your bank account electronically.

## Section 6 – Electronic funds transfer (EFT) details

➔ I would like my net benefit payment (i.e. less any applicable tax) to be paid to me electronically. My nominated bank account details are as follows:

Account Name:

Name of Bank or Financial Institution:

Branch:

BSB Number:

 - 

Account Number:

Please provide a copy of your bank statement so we can verify that the details you have provided are correct.

Please provide evidence of your residency status.

This must be completed by all applicants.

## Section 7 – Evidence of residency status

➔ Please tick (✓) the box that applies to you:

- I am an Australian citizen, New Zealand citizen or permanent resident of Australia; or
- I am a temporary resident and one of the following applies:
- I have left Australia and I am not an Australian citizen, New Zealand citizen or permanent resident of Australia
  - I hold a Subclass 405 (Investor) or Subclass 410 (Retirement) visa, or
  - I wish to claim a payment on the grounds of permanent incapacity, temporary incapacity or terminal illness or this application to withdraw super is on behalf of a deceased member. If any of these circumstances apply, please contact the CareSuperLine on 1300 360 149.

You must sign and date this form before returning it to CareSuper.

## Section 8 – Authorisation

I authorise CareSuper to process my benefit request in accordance with my instructions.

Where the full balance of my account is to be paid from CareSuper, I authorise the termination of my membership and I release the Trustee from any further liability to me, my dependants or my Legal Personal Representative in respect of my membership in CareSuper.

I confirm that I have read the information regarding Tax File Numbers and declare that the information supplied by me on this form is true and correct.

### Privacy

In completing this benefit payment request form:

I confirm that I have received and read CareSuper's Privacy Policy Statement. I understand how CareSuper intends to handle my personal information and that my personal information will only be used for the purposes specified.

I consent to the use and disclosure of my personal information for the purpose of transferring or withdrawing my superannuation benefits.

If you have any questions about your rights under the privacy legislation, please call the CareSuperLine on 1300 360 149.

### Proof of identity

Under the Anti-Money Laundering and Counter Terrorism Financing Act 2006 superannuation funds are required to identify, monitor and mitigate the risk that the fund may be used for the laundering of money or the financing of terrorism.

To meet these requirements CareSuper reserves the right to request further information to verify your proof of identity before making any cash payment.

### Payment instruction checklist

Please ensure you have correctly completed the attached form before returning it to CareSuper.

Have you:

- Provided certified proof of identification
- Selected your reason for payment in Section 1
- Provided your member details in Section 2
- Confirmed your Tax File Number in Section 3
- Provided all relevant supporting documentation (where applicable)
- Provided information on your residency status in Section 7
- Read and signed Section 8

➔ Member's signature

Date (DD/MM/YYYY)

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