

ClearView Superannuation and Roll-Overs/ClearView Rollover Bond/ ClearView Pension Plan Withdrawal

Section A: Personal details

Account number

 : : : : : : :

Mr Mrs Miss Ms Other

Surname

Given name(s)

Residential address

 Postcode

Postal address (if different from above)

 Postcode

Daytime phone number

Mobile number

 ()

Email address

Date of birth / / Sex Male Female

Section B: Tax file number (if not previously supplied)

You are not required to provide your tax file number (TFN). Declining to quote your TFN is not an offence, however, if you do not provide your TFN you may pay more tax on your withdrawal than required.

Tax file number

 : : : : : : :

Section C: Financial Institution account details

Name and address of financial institution

 Postcode

BSB number

Account number

 : - : : : : : : : :

Account name

Please note: you will need to check with your financial institution that the account you have nominated above is able to accept electronic transfers.

Section D: Payment amount

Full withdrawal (your account will be closed)

OR

Partial withdrawal*

Amount

Payment selection**

\$ Gross Net

* If you have already provided complying Proof of Identity documents in the past five years, you need not resubmit this information with your partial withdrawal request.

If the expiry date on any of your Proof of Identity documentation previously provided has expired, you will need to resubmit current Proof of Identity information.

**If you do not make a selection, we will assume the amount selected is net of any taxes, where applicable.

Please specify the investment options to be withdrawn.

Investment Option

Amount

Aggressive	\$ <input type="text"/>
Assertive	\$ <input type="text"/>
Prudent	\$ <input type="text"/>
Cautious	\$ <input type="text"/>
Conservative	\$ <input type="text"/>
Guaranteed Cash	\$ <input type="text"/>
Australian Shares Growth	\$ <input type="text"/>
Diversified Growth	\$ <input type="text"/>
Diversified Balanced	\$ <input type="text"/>
Diversified Stable	\$ <input type="text"/>
Managed	\$ <input type="text"/>
Pre-Retirement	\$ <input type="text"/>
Managed Growth	\$ <input type="text"/>
Managed Income	\$ <input type="text"/>
Total	\$ <input type="text"/>

Note: Your withdrawal will be drawn proportionally across the taxable and tax-free components in your account.

Section E: Centrelink/Veteran's Affairs

Do you wish to receive a revised Retirement Income Streams/ Centrelink Veterans' Affairs Assessment Schedule?

Yes No

Section F: Proof of Identity*

I have attached a certified copy of my driver's licence or passport.

OR

I have attached certified copies of both:
Birth/Citizenship Certificate or Centrelink Pension Card
AND
Centrelink Payment letter or Government notice
(less than 1 year old) with name/address.

If you are unable to meet the above 'Proof of Identity' requirements please contact us on 132 977.

**If you have already provided complying Proof of Identity documents in the past five years, you need not resubmit this information with your partial withdrawal request.*

If the expiry date on any of your Proof of Identity documentation previously provided has expired, you will need to resubmit current Proof of Identity information.

Section G: Individuals declaration and signature

By signing this withdrawal form I am making the following statements:

- I have reached my preservation age and have retired, or have met another condition of release, entitling me to access my superannuation benefit; and

I understand:

- that if I do not provide all required information, my request will not be actioned;
- the effective date of my transaction will be based on the day ClearView receives all required information.

Signature

DATE / /

Our Privacy Policy

Further information on how we handle your personal information is explained in our Information Handling Policy including:

- how to contact us regarding Privacy;
- how to inform us to change your marketing consent; and
- how to access your personal information.

You can obtain a copy of our Information Handling Policy by calling us on 1800 265 744 or by visiting our website at clearview.com.au



This form can be posted (no stamp required) to:

ClearView
Client Administration
Reply Paid 4232
Sydney NSW 2001



If you have any questions about this form,
please call us on

132 977