

Zurich Insurance-only Superannuation Plan

Membership application

You must become a member of the Zurich Insurance-only Superannuation Plan, a division of Brighter Super, ('Zurich Plan') to apply for a Zurich policy owned by the trustee of the Zurich Plan. You must also complete the tax file number notification section on this page.



The Zurich Insurance-only Superannuation Plan Product Disclosure Statement (PDS) must be provided to you with this form.

1. Member declaration

Read the following information and sign below to confirm your agreement.

I apply to join the Zurich Insurance-only Superannuation Plan, a division of Brighter Super. I understand that, in accordance with the conditions of the Trust Deed and Rules of Brighter Super (Fund) and relevant superannuation legislation:

- the trustee owns any policy taken out on my life
- I cannot use the Fund as collateral security, that is, for borrowing purposes
- benefits provided through the Fund are fully preserved until I have retired and attained my preservation age, or in circumstances allowed by superannuation legislation or the Australian Prudential Regulation Authority, as detailed in the Zurich Insurance-only Superannuation Plan Product Disclosure Statement (PDS)
- I have read and understood the Privacy Statement under the Privacy section of the Zurich Insurance-only Superannuation Plan PDS and the further information available at brightersuper.com.au/about-us/governance/reports-and-policies/privacy and consent to the collection and use of personal information and sensitive personal information about me in the manner described (including discussing any information obtained from me and any doctors or accountants with the financial adviser associated with this application)
- I can only make contributions to the Fund in accordance with the relevant legislation, as detailed in the Zurich Insurance-only Superannuation Plan PDS
- I apply to the trustee of the Fund, for membership of the Fund as set out in this Application form. Upon my Application being accepted I agree to comply with the rules governing the Fund, and
- the trustee may bill me directly for any liability arising under any government charges or imposts relating to my Fund membership or may deduct any such liability from an insured benefit that is or becomes payable to me.

I also certify that:

- I am eligible for membership of the Fund in accordance with the relevant legislation
- my decision to apply for membership of the Fund is based on the information in the current Zurich Insurance-only Superannuation Plan PDS and the current Zurich Wealth Protection PDS, Zurich Active PDS, as relevant to my application for membership, which has been provided to me
- I will notify the trustee in writing if I cease to be eligible for membership of the Fund
- I understand that my participation in the Fund will only commence after I have been advised in writing by the trustee that my Application has been accepted.

Applicant's signature 

Date / /

2. Tax file number notification

You must complete the Tax File Number (TFN) details below to become a member of the Zurich Plan. Failure to do so will mean that the trustee will be unable to accept your Membership application.

Read the important information regarding TFNs in the Zurich Insurance-only Superannuation Plan PDS before providing us with your TFN.

2.01 Fund details

Fund name **Brighter Super**

Fund address **GPO Box 264, Brisbane QLD 4001**

Fund phone number **1800 959 989**

2.02 Your details

Title	Surname	First name	Middle name
☐ Male ☐ Female	Date of birth / /	Membership number (if known)	
Residential address			State Postcode
Your tax file number - -			

Applicant's signature 

Date / /

3. Contribution type

Make a selection below to advise the source of payments. You must advise us of any change to your contribution type as it may affect how your contributions are reported to the ATO.

Even if you intend to pay by rollover, make a selection below to advise the source of any other contributions made.

- | | |
|---|--|
| ☐ Personal | ☐ Employer Additional |
| ☐ Self-employed | ☐ Employer Award |
| ☐ Spouse | ☐ Salary Sacrifice |
| ☐ Compulsory Employer (Superannuation Guarantee) | ☐ Other (specify) _____ |

Employer's full name _____

If your employer is making contributions on your behalf, only certain payment options will meet the ATO's data and payment standards for superannuation contributions (these are referred to as SuperStream compliant payment methods). Your employer should contact the ATO for more information. If you are paying by rollover, also complete section 4.

4. Rollover authority

Complete this section if you wish to rollover amounts from another superannuation fund ('transferring fund') to pay the premiums on your policy owned by the trustee of the Zurich Plan.

4.01 Transferring fund

Fund name _____

Unique Superannuation Identifier (USI)	ABN	
Address of fund	State	Postcode
Telephone number ()		
Account/Membership/Policy name	Account/Membership/Policy number	

4.02 Rollover instructions

- ☐ One-off (single) rollover
- ☐ Ongoing automatic yearly rollover

4.03 Rollover declaration

- I request and consent to Brighter Super Trustee ('Trustee') and the trustee of the transferring fund to transfer any benefits from the transferring fund to the Zurich Insurance-only Superannuation Plan as required to fund the premium amount payable under the policy, as quoted by Zurich Australia Limited ('Zurich').
- If the transferring fund has a minimum withdrawal amount which exceeds the premium amount payable, I authorise the transferring fund to transfer the minimum withdrawal amount and I authorise the Trustee to transfer any excess amount back to the transferring fund.
- If I have selected the 'ongoing automatic rollovers' option, I hereby make a repeating request each time my yearly premium becomes payable.
- I give the trustee of the transferring fund consent to provide any and all relevant information to the Trustee or its delegates.
- I authorise the Trustee or its delegates to provide any and all relevant information to the trustee of the transferring fund, including the tax file number I have previously provided. (Note: If you do not want your tax file number to be used, please contact the Trustee).
- I understand that the trustee of the transferring fund is discharged from any further liability in respect of any amount once benefits have been transferred.
- I approve the deduction of transfer fees (if any) from the benefits transferred (subject to legislative restrictions). • I authorise and direct the Trustee to request, from the transferring fund, any amounts payable under the Zurich policy in accordance with these instructions.
- I accept that Zurich or the Trustee will not be liable or responsible for any failed attempts to transfer money including where the transferring fund declines to transfer the amount.
- If this authority is for a new policy application, and the application does not proceed, I then authorise and request the Trustee to transfer the amounts back to the transferring fund (provided the transferring fund accepts).
- I accept that in the event the transferring fund does not accept a return of amounts for whatever reason, the money will be transferred to the Australian Taxation Office (ATO). Information about ATO-held super can be found at ato.gov.au.
- I am aware that I may ask the trustee of the transferring fund for any information I require in relation to the effect of the rollover/s on my entitlements in the transferring fund (including information on fees or insurance benefits) and, before any rollover, I have either asked them or I do not require such information.

Applicant's signature 

Date / /

The trustee of the Zurich Insurance-only Superannuation Plan, a division of Brighter Super ABN 23 053 121 564 ('Zurich Plan') is Brighter Super Trustee ABN 94 085 088 484 AFSL 230511. Zurich Australia Limited ABN 92 000 010 195 AFSL 232 510 is the issuer of the Zurich insurance policies to the trustee for the benefits provided from the Zurich Plan. The administrator of the Zurich Plan is Insurance & Superannuation Administration Services Pty Ltd ABN 31 058 682 876 PO Box 1305, South Melbourne, Vic 3205. Phone 1800 959 989.

Any questions? Call 131 551

Please return the completed form to us:

By post to, **Zurich Australia Limited, Customer Care, Locked Bag 994, North Sydney NSW 2059**, or

by email as a scanned attachment to, **client.service@zurich.com.au**

Save File

Print Form