Pension Application Form Acclaim

Acclaim Core Pension



Before signing this Member Application Form, please ensure that you have read the latest Acclaim Core Super & Pension Product Disclosure Statement (PDS) and the current Additional Information Booklet (AIB), available from www.acclaimwealth.com.au or on request by phoning 1300 264 264. A reference to the 'member' in this form is a reference to the applicant for a pension from the Fund. Any application is subject to acceptance by the Trustee.

Note: A copy of member's ID (driver's license, passport or equivalent) is required to be submitted with this form.

Section 1: Per	sonal detai	ls (all fields	are ma	ndatory	')				
Surname:						Salutati	on:		
Given name(s):									
Date of birth:				Gender	:				
Postal address:									
Suburb:				State:			Postcode:		
Residential address:									
Suburb:				State:			Postcode:		
Telephone (BH):		(/	AH):			Mobile:			
Email address:									
Would you like your us	sername and pa	ssword for online c	iccess auto	matically e	mailed to this e	mail?		Yes	No
I would like to receive	electronic corres	oondence from the	e Fund, whe	ere applicat	ole, to the email	address	provided.	Yes	No
Tax file number:	To be submitted	d via online portal	ONLY Se	ee the PDS a	nd AIB for impor	tant info	rmation abo	out the TF	-N declaration
Please note: If you are Citizenship details:	e under the age								
(Please tick one of the following)			ıstralian citi:		I am a permanent resident of Australia I hold a Subclass 405 or Subclass 410 tempora				
		I am a Nev	v Zealand c	citizen	I hold a Sul	oclass 40	05 or Subclo	uss 410 te	emporary visc
Section 2: Typ	e of pensio	n							
Please select the pension you are applying for: Account Based Pension (proceed to Section 3.1) Transition to Retirement Pension (proceed to Section 3.2)									
Section 3: Elig	ibility								
3.1 Account based p (Please tick one of the		I am aged 65 or over				I have reached my preservation age and am permanently retired			
`	3,	I am aged 60 permanently terminated a arrangement	retired and n employm	l have	I am permar		,	k	
3.2 Transition to retire (Please tick to confirm									

Se	ection 4: Funding your pe	nsion						
How	will you be funding your pension? Please	e tick all applicable s	ources.					
	I would like to use funds from my Acc	olaim Core Super ac	cumulation acc	ount.Ac	count number	ər:		
	How much money do you want to tro	ansfer to your pensic	on account?	Full k	balance			
				Parti	al balance, p	lease s	pecify:	
	If you are applying for a Transition to accumulation account.	Retirement Pension	n you will need to	o mainto	ain a minimu	m bala	nce of \$6,000 in	your
	I would like to transfer funds from and	other superannuatic	on provider.					
	Will this rollover include off-market tran	nsfer of shares?	Yes - Please sp	ecify ap	proximate val	lue: \$		N
	If you are transferring funds from an available on our website www.accle	•	on provider you i	must co	mplete a <i>Rec</i>	quest to	Transfer form w	nich is
	I would like to make an additional vo Yes – Please complete a <i>Member Vo</i>	•		vailable (on our websit	e <u>www.</u>	acclaimwealth.c	com.au.
	If you are aged between 65 and 74 on our website www.acclaimwealth		a Work Test or W	Vork Test	Exemption D	eclarat	ion form which i	s available
If no	one of the above options apply to you, ple	ease call us on 1300 :	264 264.					
Se	ection 5: Pension paymen	nt options						
Plec	ase be advised that I wish for my pensi	on payments to con	mmence in the m	nonth of:	:			
l no	minate pension payments to be:	Monthly	Quarterly		Half-yearly		Yearly	
Ino	minate pension payments to be:	Minimum amount*	Maximum amount*		Actual amount:	\$		per annum per month
right	naximum amount can only be specified for to adjust your nominated pension paymen nge. For up to date information about the m	nt so that government s	standards are met. I	From time	e to time, the mi	inimum (amount prescribed	
Se	ection 6: Banking details ((for pension p	payments)					
	ase provide your banking details if you ague to you.	would like your cash	n payment depo	sited dire	ectly into you	r accol	unt, otherwise we	will post a
	ase note that the account must be he	ld in your name or j	ointly in your na	me.				
	ase also supply with your application about the supplication about the supplication and supplication are supplied to the supplication and supplied the supplied to the supplie			s the na	ime of the ac	count I	nolder, BSB and	account

Account number:

Acclaim-Core_Pension-Application_Form_27072023

BSB:

Account name:

Section 7: Target market assessment

The target market determination (TMD) for the Fund can be found at www.acclaimwealth.com.au/product-documents and includes a description of who the product is appropriate for, based upon the characteristics of the product, and the likely investment objectives, financial situation and needs of the consumer that each product had been designed to meet.

Investment options available through the Fund will also have their own TMD. A consumer must refer to the TMD and relevant disclosure documents when deciding if these products are suitable for them.

Please answer the following questions so that we can meet our regulatory obligations to take reasonable steps to ensure our products are distributed in line with those TMDs.

which of the	ese investment goals	besi describes y	our primary inv	esimeni objective	,				
Capita	I growth C	Capital preservation	on	Capital guarante	ed	Income distribution	ı		
Which of the	Which of these statements best describes how long you expect to remain invested in this product and selected investment options?								
Short term (less than 2 years) Medium term (between 2 and 8 years)					ears)	Long term (more th	an 8 years)		
Which of the	ese statements best	describes your at	titude to investr	ment risk, ability to	bear loss, and ret	rurn?			
Low (U	Low (Unwilling to see a reduction in value of investment even in the short term. Risk of loss is low as is corresponding return.)								
	Medium (Unwilling to see a reduction in the value of investment in the medium term, willing to accept some risk in the short term compensated with a higher return.)								
	seeking a high returr higher return.)	n from investment	over the long t	erm, willing to see	a reduction in sh	ort to medium term	compensated		
You are	gh (Seeking to maxi willing to accept the willing to accept the decive the string to the series of t	ne risk that can de	erive from the u						
Which of the	ese statements best	describes how lor	ng you expect v	withdrawals to take	from the produc	et?			
Daily	Weekly	Mont	hly	Quarterly	Annually or l	onger			
Section	8: Beneficiar	ies							
The Fund pro	ovides the following	options for nomin	ating how you	r benefit should be	paid upon your	death.			
	ch account you hav on your behalf. Refe					ser cannot make a	beneficiary		
1. Non-bind	ing nomination - pl	ease complete th	e section belov	W.					
Please note that a non-binding nomination of beneficiary guides but does not bind the Trustee. You may revoke or change your nomination at any time by completing a <i>Change of Member Details</i> form available from www.acclaimwealth.com.au .									
							nge your		
nomination		oleting a <i>Change</i>	of Member De		e from <u>www.accl</u>		,		
nomination In the event	at any time by comp	oleting a <i>Change</i> pay my remainin	of Member De	etails form available	e from <u>www.acclo</u> or the fol	aimwealth.com.au.	,		
nomination In the event	at any time by comp of my death please	oleting a <i>Change</i> pay my remainin	of Member De	etails form available my estate	e from <u>www.acclo</u> or the fol	aimwealth.com.au.	dependants		
nomination In the event	at any time by comp of my death please	oleting a <i>Change</i> pay my remainin	of Member De	etails form available my estate	e from <u>www.acclo</u> or the fol	aimwealth.com.au.	dependants		
nomination In the event	at any time by comp of my death please	oleting a <i>Change</i> pay my remainin	of Member De	etails form available my estate	e from <u>www.acclo</u> or the fol	aimwealth.com.au.	dependants		
nomination In the event	at any time by comp of my death please	oleting a <i>Change</i> pay my remainin	of Member De	etails form available my estate	e from <u>www.acclo</u> or the fol	aimwealth.com.au.	dependants		
nomination In the event	at any time by comp of my death please	oleting a <i>Change</i> pay my remainin	of Member De	etails form available my estate	e from <u>www.acclo</u> or the fol	aimwealth.com.au.	dependants		
nomination of In the event Full name of Interest of I	at any time by comp of my death please	oleting a <i>Change</i> pay my remainin inated beneficiar	e of Member De g balance to: y	my estate Date of birth	or the fol	aimwealth.com.au. Iowing nominated cationship	dependants % of benefit		
nomination of In the event Full name of Interest of I	at any time by comp of my death please of non-binding nomi	pay my remaining the pay my remaining inated beneficiar	e of Member De g balance to: y	my estate Date of birth	or the fol	aimwealth.com.au. Iowing nominated cationship	dependants % of benefit		
Pull name of the second of the event of the	at any time by comp of my death please of non-binding nomi or non-binding nomi deneficiary nominati laimwealth.com.au.	pay my remaining a change pay my remaining inated beneficiar ion – you must continuation (including a deformation and expenses of the change in the continuation of the change is a continuation of the change in the change is a continuation of the change in the change is a continuation of the change is a continuation o	e of Member Deg balance to: Y mplete the Binacto spouse of	my estate Date of birth ding Nomination of the same or oppo	or the fol Relative Beneficiary form site sex) as a rever	aimwealth.com.au. Ilowing nominated of ationship In available from Persionary beneficiary	dependants % of benefit 100%		
2. Binding by www.acc 3. Reversion You can nor beneficiary at the date of Note: Where of binding in change from	of any time by composite of my death please of non-binding nomination of non-binding nomination of non-binding nomination of non-binding nomination of non-binding nominate your spouse of who can continue to	poleting a Change pay my remaining inated beneficiar inated beneficiar inated beneficiar ination (including a defector receive your perversionary beneficiary nomination acheficiary nomination page 2 marginal page 2 marginal page 3 marginal page	mplete the Bindacto spouse of nsion in the even	my estate Date of birth ding Nomination of the same or oppoent your death. The ue to receive your er or change a review.	or the fol Rela of Beneficiary form site sex) as a rever person you nome pension, you are persionary beneficiary beneficiary beneficiary.	aimwealth.com.au. Illowing nominated of ationship In available from Persionary beneficiary inate must qualify a unable to make are siary nomination (in	dependants % of benefit 100% y, that is, a as your 'spouse' nother type acluding a		
2. Binding by www.acc 3. Reversion You can nor beneficiary at the date of Note: Where of binding in change from	of my death please of my death please of non-binding nominate laimwealth.com.au. wary beneficiary nonminate your spouse of your death. You nominate a revomination linked to a reversionary ber	poleting a Change pay my remaining inated beneficiar inated beneficiar inated beneficiar ination (including a defector receive your perversionary beneficiary nomination acheficiary nomination page 2 marginal page 2 marginal page 3 marginal page	mplete the Binacto spouse of nsion in the evectory to continuction to a bindin	my estate Date of birth ding Nomination of the same or oppoent your death. The ue to receive your er or change a review.	or the fol Rela of Beneficiary form site sex) as a reverous person you nome pension, you are ensionary beneficiary formulations.	aimwealth.com.au. Illowing nominated of ationship In available from Persionary beneficiary inate must qualify a unable to make are siary nomination (in	dependants % of benefit 100% y, that is, a as your 'spouse' nother type acluding a		

Section 9: Investment choice

Please direct us as to the proportion of your initial investment and rollover that you would like invested in each investment option. These proportions will also apply to any further contributions or rollovers received for you.

Please note: • Please refer to the AIB for further information regarding the available Investment Options.

If no allocation has been nominated, AMG Cash option (the pension product's default option) will apply.

AMG Investment Options	Allocation %
AMG Index Diversified Options	
AMG Index Conservative	
AMG Index Balanced	
AMG Index Growth	
AMG Index High Growth	
AMG Index Sector Options	
AMG Index Fixed Interest	
AMG Index Listed Property	
AMG Index Australian Equities	
AMG Index International Equities	
Other Options	
AMG Cash	
	TOTAL 100%

Section 10: Identity verification

To make payments to you from your pension account we must verify your identity; you can supply us with an original certified copy of your photographic identification document via post, or you can submit with this form a scanned non-certified colour copy of your photographic identification. The Australian government's document verification service (DVS) has made the 'card number' a mandatory field to verify Australian drivers' licences. The card number is a unique number attributed to a driver's licence in Australia. If you are supplying a driver's licence as your form of identification, please provide both the front and back of your licence to ensure we can verify your identity.

If you supply us with a scanned copy of your identification we also need to electronically verify your identity. If you do not want us to identify you electronically please supply us with original certified copies of your identification via post. If you have any questions around this process please contact us on 1300 264 264.

When you opt for electronic verification, the details of the documents you provide to us will be submitted to the DVS. The DVS is a national online system that allows organisations to compare an individual's identifying information with a government record. Information about their privacy policy is available from their website: http://www.dvs.gov.au.

If you would like to proceed with electronic verification please tick each of the consent boxes below:

You consent to us electronically verifying your identity; AND

You are authorised to provide the identification documents to us; AND

You understand that the details of the identification documents will be checked against the Australian government's document verification service.

Please note that we are unable to make any payment until your identity has been verified either by this method, or by receiving a certified original copy of your identification by post.

We are unable to electronically verify identity documents issued from overseas. If you only have foreign identity documents please send us a certified original copy of your documents, accompanied by a translation document from an accredited translator if necessary, via post. For more information around this please contact us on 1300 264 264.

Section 11: Member declaration

I make the following declarations and acknowledgements:

General

- I understand that I am bound by the provisions of the Trust Deed for the Fund dated 12 May 2000 as amended from time to time.
- I have been provided a copy and have read and understood the relevant PDS and have obtained, read and understood the current AIB including any terms and conditions and, any investments in the Fund (including the Fund's investment options).
- I acknowledge that I have read and understood the information about contributions contained in the AIB and that I have satisfied myself that any contributions made by me are consistent with the contribution rules prescribed by superannuation legislation.
- I agree to indemnify the Trustee against all losses, actions, liabilities, claims and expenses incurred by or on behalf of the Trustee, directly or indirectly, in relation to the Trustee (or a person acting on behalf of the Trustee including, but not limited to, the Trustee's directors, employees or service providers) acting upon the directions, instructions, requests and other communications given or transactions made by me.
- · The information I have provided in this form is true and correct.

Pension

- I understand that the pension I selected may not provide me with pension payments for the rest of my life, and that payments will cease once my account balance reduces to zero.
- I understand that if I commute my pension after joining (e.g. within a few years after joining) the value of my benefit may be less than I paid in.
- I understand that pension products are complex and that different taxation and social security implications may apply to my pension depending on my personal circumstances. I acknowledge that the Trustee cannot provide me with advice about this and that I should consult an appropriately qualified adviser for advice that relates to my personal circumstances.
- In relation to a pension commenced (and continuing to be paid) under transition to retirement rules, I understand that additional restrictions apply to such pensions and that the tax treatment of such pensions has significantly changed from 1 July 2017.

Personal information

- · I acknowledge that I have read and understood the Privacy Policy described in the AIB.
- · I acknowledge that I have read and understood the information about quotation of tax file numbers contained in the PDS and AlB.

Investment

- I understand that my account balance can rise and fall, and that neither the Trustee, nor any of its directors, Acclaim Management Group Limited, nor any of its directors, guarantee the performance of the Fund or its investment options.
- I acknowledge that the Trustee will invest my account in accordance with the selections made by myself in this form and (where applicable) in any *Investment Choice* form (as varied by me, from time to time) but that the Trustee reserves the right not to do so where necessary or appropriate without liability to the Trustee.
- I hereby direct the Trustee to invest my account balance as indicated above, based on the declarations and acknowledgements made in this form.
- Where I have selected (or select) an illiquid investment, I acknowledge and accept that a period of longer than 30 days may be required to facilitate redemption or switching requests due to the illiquid nature of the investment.

Member signature:	Date:	
member eignerere.	2 0 0 .	