



# Rollover Form

Use this form if you would like to roll money into the Incitec Pivot Employees Superannuation Fund ("IPE Super").

Complete this form and send it to your previous superannuation fund to let them know your details and where they should send your money. Complete a separate form for each rollover.

## To the super fund administrator

I request that you roll my superannuation from your fund, the name of which I've written in the box below, to IPE Super.

Previous super fund name:

Membership number:

## Personal details (please print)

Title (please tick):  Dr  Mr  Ms  Mrs  Miss

IPE Super membership number:

Given name:

Surname:

Home address:

  

---

Telephone:  
(Business hours)

 ( )

Date of birth:

## My current super fund

Name of fund:	Incitec Pivot Employees Superannuation Fund
Australian Business Number (ABN):	68 569 795 856
Unique Superannuation Identifier (USI):	68569795856001
Telephone Number:	1800 257 135
The cheque should be made payable to:	Incitec Pivot Employees Superannuation Fund



## Notice of complying status

The Incitec Pivot Employees Superannuation Fund is a complying superannuation fund and is able to accept rollovers from other complying funds. The Fund has not received a notice of non-compliance and is not subject to a direction under Section 63 of the Superannuation Industry (Supervision) Act. The Fund will observe any preservation requirements attached to the rollover.

**Cheques should be sent to:**

**The Fund Administrator  
IPE Super  
PO Box 1442  
Parramatta NSW 2124**

## Declaration

Please complete the form by signing and dating below:

- I authorise the transfer of my benefits from my previous fund to the Incitec Pivot Employees Superannuation Fund ("IPE Super").
- I authorise the transfer of any contributions to IPE Super that are still to be made by my previous employer, which may be received after benefits have been transferred. By giving this authorisation, I also permit the transfer of my relevant personal information.
- I understand that the Trustee of my previous fund is discharged from any further liability in respect of any amount once benefits have been transferred.
- I understand that in certain cases, my new fund may be required by law to deduct tax from the untaxed portion, if any, of the rollover.
- I have received and understood the Product Disclosure Statement (PDS) for IPE Super for my category of membership.
- I acknowledge that I have received and understood the summary of the *Privacy Policy* for IPE Super as set out in the PDS. I agree to the use and disclosure of my personal information as disclosed therein.

**Signature:**

**Date:**

**Keep a copy of this form and send the original form to your previous superannuation fund.**