Guaranteed Annuities
Lifestream Guaranteed Income

Acenda Life

Superannuation benefit transfer request

Important information

Please note:

- Use this form to request another institution to transfer money from your super fund to a Lifestream Guaranteed Income annuity.
- Use BLACK or BLUE INK in CAPITAL LETTERS.
- You should contact your other super fund(s) to find out if there are any fees, charges or other consequences for transferring your super out of that fund, such as losing any insurance cover.
- Legislation limits the amount of superannuation monies that can be used to invest in a Lifestream Guaranteed Income annuity.
- We recommend you speak to a financial adviser or Tax Adviser before making a decision to transfer your benefit(s).

1. Personal details

(All fields must be completed)

Title

Given name(s)

Surname

Date of birth
D D M M Y Y Y Y

Gender
☐ Male ☐ Female

Residential address* (PO Box is not acceptable)

Suburb | State | Postcode

Country

If you know that the address held by your **From** fund is different to your current residential address, please give details below.

Postal address (if different to residential address)

Suburb | State | Postcode

Country

Mobile number | Alternate phone number

Email address

2. Super fund details

Please note: If you have more than two super accounts to transfer from you will need multiple copies of this form.

From:

Super fund name

Super fund address

Suburb | State | Postcode

Country

Membership or Account number

Australian business number (ABN)

Unique Superannuation Identifier (USI)

Electronic Service Address (self-managed super funds only)

Suburb | State | Postcode

Country

To:

Resolution Life Australasia Limited

ABN

84 079 300 379

Unique Superannuation Identifier (USI)

84 079 300 379 014

If relevant make cheques payable to **Resolution Life Australasia Limited**

Continued on next page.

2. Super fund details (continued)

Please note: If you have more than two super accounts to transfer from you will need multiple copies of this form.

From:

Super fund name

Super fund address

Suburb | State | Postcode

Country

Membership or Account number

Australian business number (ABN)

Unique Superannuation Identifier (USI)

Electronic Service Address (self-managed super funds only)

Suburb | State | Postcode

Country

To:

Resolution Life Australasia Limited

ABN

84 079 300 379

Unique Superannuation Identifier (USI)

84 079 300 379 014

If relevant make cheques payable to **Resolution Life Australasia Limited**

3. Declaration and acknowledgement

By signing this form I declare as follows:

- I declare I have fully read this form and the information completed is true and correct.
- I am aware I may ask my superannuation provider for information about fees or charges that may apply, or any other information about the effect this transfer may have on my benefits.
- I discharge the superannuation provider of my Australian super fund of all further liabilities in respect of the benefits paid and transferred to Resolution Life.
- I request and consent to the transfer of superannuation as described above and authorise the superannuation provider of each fund to give effect to this transfer.

Name (Print in CAPITAL LETTERS)

Member's signature

✗

Date

D D M M Y Y Y Y

Where to send this form

This form can be mailed to:

Acenda
Guaranteed Annuities (issued by Resolution Life)
GPO Box 3306
Sydney NSW 2001

Or scan and email form to **retirement@acenda.com.au**

If you're signing this form digitally, please make sure you attach a certificate of completion, otherwise, please print this form and sign it using a pen.

Contact phone number
135 722
between 9 am and 5 pm (AEST/AEDT), Monday to Friday, excluding public holidays.

What you need to know

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