Direct Debit Request form for after tax contributions

ness super
powering your **financial future**

Please complete and return this form to: NESS Super, Locked Bag 20, Parramatta NSW 2124
Complete in pen using CAPITAL letters or type directly into this form and print it out.
This request must be signed and dated.

Website: www.nesssuper.com.au
Email: nessadmin@aas.com.au
Freecall: 1800 022 067

Direct Debits are not available on all accounts. Check your financial institution allows direct debits from your account before sending in this form.

1. Member details (Please complete in full)

Member number (This can be found on your Member Statement)

Mr/Mrs/Ms/Miss

Surname

Given names

Date of birth (ddmmyyyy)
D D M M Y Y Y Y

Tax File Number (see section 2)

Male/Female

Telephone (daytime)

Mobile

Email

Residential address

Street number

Street name

Suburb/Town

State

Postcode

Postal address (if different to residential address)

PO Box

Suburb/Town

State

Postcode

2. Tax File Number (TFN) Details

Under the Superannuation Industry [Supervision] Act 1993, your superannuation fund is authorised to collect your TFN, which can only be used for lawful purposes.

The Trustee of NESS Super may disclose your TFN to another superannuation provider when your benefits are being transferred, unless you request in writing that your TFN not be disclosed to any other superannuation provider.

It is not an offence not to quote your TFN. However if you **do not** provide your TFN, we will not be able to accept your member voluntary contributions (i.e this direct debit request cannot be processed).

Please call 1800 022 067 to check if you have previously provided it.

Please turnover

3. Debit details

Amount to be debited monthly (see section 4)

$ ___,___.___ deducted on the 20th of each month

Bank/financial institution name

Name of account to be debited

BSB number

Account number

Deductions to commence (mmyyyy)

M M Y Y Y Y

This form must be received at least 7 working days before the 20th of the month you select deductions to commence.
Deductions will be made monthly on or around the 20th of each month.

4. Maximum amount of after-tax contributions

From 1 July 2014, the Government imposed an annual cap of $180,000, or $540,000 per three-year period for members aged under 65.

If you are 64 or more in the financial year in which the contribution is made, there is a cap of $180,000 in any financial year.

If your after-tax contributions exceed the cap in any one year we will, generally, accept them but the Australian Tax Office will levy tax at the highest marginal rate (plus medicare levy) on the excess amount over the cap.

If you are aged over 75 you are not permitted to make after-tax contributions to your superannuation fund.

5. Authorisation and declaration (You must sign and date this form)

Privacy

When your personal details are provided to NESS Super they are securely stored and are accessible only to authorised personnel for the purposes of maintaining your account, including your death and disablement insurance arrangements. If you wish to view our privacy statement please go to www.nesssuper.com.au

Authorisation and Declaration

- I declare that I am under age 65, or am aged 65 to 74 and have been in paid employment for at least 40 hours in a period of no more than 30 consecutive days during the financial year, and I understand that if I don't meet this condition, all contributions must be refunded to me after adjustments for fees and investment returns.
- I understand that if I do not provide my TFN to NESS Super, my direct debit request will not proceed as NESS Super is prohibited by government legislation from accepting voluntary contributions if it does not have my TFN.
- I consent to the use and disclosure of my personal information to implement my direct debit request
- I understand that I must complete a *Notice of Intent to Claim a tax deduction (S290-170) form* if I intend to claim a tax deduction on any of these contributions. (For self employed members – contact 1800 022 067 for information.)

Until I give further notice in writing, I authorise NESS Super to debit my account at the financial institution identified on this page, the monthly amount authorised by me above and agree to meet any bank charges resulting from my use of the direct debit system.

I understand and acknowledge that

- I have read the following page 'Direct Debit Service Agreement'.

Signature of member

Dated (ddmmyyyy)

D D M M Y Y Y Y

Print full name of member

Signature of co-account holder (if applicable)

Dated (ddmmyyyy)

D D M M Y Y Y Y

Print full name of co-account holder

Save form Print form Clear form

Please turn over

Direct Debit Service Agreement

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Email: nessadmin@aas.com.au
Freecall: 1800 022 067

Please read the important information below.

Agreement

1. Authorisation to debit your account

1.1 By signing the Direct Debit Request (DDR) you are authorising us to arrange for the debit of funds from your bank* account on a monthly basis.

1.2 The nominated amount will be debited from your account on the 20th of each month ('debit day'), or on the next business day if the debit day falls on a non-banking day (weekend or public holiday).

1.3 We will only arrange for funds to be debited from your account as authorised in the direct debit request.

* throughout this agreement, "bank" can be taken to mean other financial institutions.

2. Changes made by NESS Super

2.1 We may vary this agreement or the direct debit request at any time by giving you at least 14 days notice.

3. Changes made by you

3.1 You may change, defer or cancel your direct debit by advising us in writing at least 5 business days before the next debit day.

3.2 You may dispute a debit made from your account if you believe there has been an error by notifying us in writing. We will respond to your dispute within 5 business days. If we are unable to resolve the dispute, you may lodge a formal complaint with your financial institution.

3.3 You may contact us on 1800 022 067 for assistance regarding changes to your direct debit request.

4. Your account

4.1 You should check that your bank account accepts direct debits (some accounts don't).

4.2 Check your account number is correct (refer to your bank statement or contact your bank).

4.3 You should advise us if your account has been transferred, closed or any details have changed.

5. Your responsibilities

5.1 You should make sure that there are sufficient cleared funds in your bank account on the debit day.

5.2 We will make a debit in accordance with your direct debit request on the debit day. If there are insufficient funds available on the debit day, if your bank dishonours the debit, we may pass any fees and costs incurred by NESS Super to you.

5.3 You should check your account statement to verify the amounts debited from your account.

6. Confidentiality

6.1 We will keep information contained on your direct debit request confidential. We will make reasonable efforts to keep your information secure from unauthorised use, modification, reproduction or disclosure.

6.2 We will only disclose your information to the extent specifically required by law, or only for the purpose of this agreement.

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