

Use this form to claim the death benefit of a Prime Super member if you are a potential beneficiary or Legal Personal Representative

Please read this information before you complete the form

We will do what we can to make the claim process as easy as possible.

What is a death benefit?

A superannuation death benefit consists of:

- the super account balance, plus
- the insurance benefit, where applicable.

The steps in the death benefit claim process are:

1. Notify us of the member's death by phone on 1800 675 839 or email primeclaims@aas.com.au.
2. We will then write to you, and any other beneficiaries, requesting information needed to assess the death claim. We will provide you with a case manager to support you through the claims process and keep you updated on the status of your claim.
3. All beneficiaries must complete this form and provide supporting documents, as outlined in the covering letter attached to this form.
4. Claims will be assessed by the Trustee and, if applicable, the Fund's insurer.
5. We will write to you to notify you of the Trustee's decision, after the assessment of your claim. The Trustee allows 28 days from the date of this letter for other claims or objections to be made.
6. If there are any objections to the Trustee's decision, the Trustee will review the objections, and the information provided to support the objection.
7. When all claimants have accepted the Trustee's decision, the claim will be paid.

Who can claim a superannuation death benefit?

Superannuation law and the Fund's Trust Deed stipulate that the Trustee can only pay a death benefit to the deceased member's dependants and/or the Estate, via their Legal Personal Representative (such as the executor or administrator).

If a dependant or Legal Personal Representative can't be found, the Trustee may pay the benefit to another person.

The Trustee has a duty to make sure all dependants and potential beneficiaries are contacted and given the opportunity to be considered for payment of the death benefit.

Who is a Legal Personal Representative?

Generally, this is the person managing various tasks on behalf of the deceased Estate either as the:

- executor, if there is a Will, or
- administrator, if the deceased died intestate (without a Will)

The administrator is granted Letters of Administration by the relevant state or territory court. Probate is issued by the relevant court certifying the Will is valid. The Trustee may request probate or Letters of Administration from the Legal Personal Representative.

Who is a dependant?

Under super law, a dependant includes the following:

- Spouse or de facto: A legally married spouse or de facto partner (including same-sex partners). De facto partners are where two people live together on a genuine domestic basis.
- Child (of any age): A child including an adult child, adopted child, or stepchild at the time of the member's death.
- Financial dependant: Any person who relied on the member either partially or fully for financial support leading up to and at the time of the member's death. You may be required to provide evidence of the financial dependency such as joint bank account and utility bills in joint names, if claiming as a financial dependant.
- Interdependency relationship: There are four conditions that must generally be met to be considered as an interdependent:
 - Two people may have an interdependent relationship if:
 - > they have a close personal relationship; and
 - > they live together; and
 - > one or each of them provides the other with financial support; and
 - > one or each of them provides the other with domestic support and personal care.

An interdependent relationship may also exist where there is a close personal relationship between two people who do not satisfy other criteria because either or both of them suffer from a physical, intellectual or psychiatric disability.

Note: to be a dependant, the above criteria must be met and must have been current at the time of death

What if there are no dependants or Legal Personal Representative?

The Trustee can only consider paying a benefit to another person if attempts to locate dependants or a Legal Personal Representative are unsuccessful. These people can include parents or siblings.

Tax on death benefits

The tax treatment on death benefits depends on several factors. Visit ato.gov.au to learn about tax and other considerations when receiving a death benefit payment.

Defacto partners or financial dependants

If you are claiming as a de-facto partner or financial dependant, you need to provide evidence such as a joint bank account statement, mortgage or lease agreement in both names, utility bills in joint names, child support payments.

Disclosure of your relationship details

The Trustee is required to inform all potential beneficiaries of the proposed payment. This means that your personal details and relationship with the deceased member may be disclosed to other claimants. This information may also be disclosed to the Fund's legal advisors and the Australian Financial Complaints Authority.

Please complete all sections of this form. If you are completing a printed copy, please use a pen and write in BLOCK letters. Print 'X' to mark boxes where applicable.

Before you submit the form, please refer to the checklist at the end to make sure you have provided all the required information.

1 Your details

Surname	Given names	Title
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email		
<input type="text"/>		
Date of birth (DD/MM/YYYY)	Mobile number	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal address		
<input type="text"/>		
If you are making a claim for this benefit, then insert your nine digit TFN here:		
<input type="text"/>		
Relationship to the deceased member:		
<input type="checkbox"/> spouse	<input type="checkbox"/> child	<input type="checkbox"/> Legal Personal Representative
		<input type="checkbox"/> financial dependant

2 Deceased member details

Surname	Given names	Title
<input type="text"/>	<input type="text"/>	<input type="text"/>
Member number	Date of birth (DD/MM/YYYY)	Date of death (DD/MM/YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal address		
<input type="text"/>		
Gender	Insert nine digit TFN here:	
<input type="text"/>	<input type="text"/>	

Deceased member's relationship status at the time of death

	<input type="checkbox"/> Married	<input type="checkbox"/> Single	<input type="checkbox"/> De-facto	<input type="checkbox"/> Divorced	<input type="checkbox"/> Separated
Did the deceased member have a Will?	Yes	No	Don't know		
If Yes, has probate been received?	Yes	No	Don't know		
If the deceased did not leave a Will, has Letters of Administration been received?	Yes	No	Don't know		

If you answered Yes to any of the above, please provide a certified copy of the Will/ probate/ Letters of Administration.

3 Payment details (if the Trustee determines you are eligible to receive all or part of the death benefit)

EFT to an Australian bank account:

Please complete this section if you would like your benefit paid directly to your bank account. The nominated bank account must be in your name, or if it is a joint account, you must be one of the account holders. Payment can only be made to an Australian bank account. If you do not have an Australian bank account, we will pay by cheque.

Please attach a copy of your bank statement for this account.

Name of financial institution

Account holder's full name

BSB

Account number

4 Eligibility for your claim on the death benefit

1. Were you the spouse of the member at the date of death?

If you were the de-facto spouse, please provide proof of registration of your relationship under a law of a State or Territory, or **two** statutory declarations completed by two family members or friends verifying the member lived with you on a genuine domestic basis as a couple, including the nature and duration of the relationship.

Yes No

2. Were you financially dependent on the member at the date of death?

If you were financially dependent on the deceased member, please provide details and evidence of the financial support provided to you and whether the financial support was likely to continue?

Yes No

3. Are you claiming on behalf of the Estate?

If you tick yes, the death benefit will be paid to the Estate and not to you as an individual.

Yes No

4. Were you in an interdependency relationship* with the member at the date of death?

*An interdependency relationship does not generally apply in respect of housemates, parents, or children.

Yes No

If you answered yes, please answer the following questions and provide any evidence to support your claim:

Did you have a close personal relationship with the member?

Yes No

Were you living together?

Yes No

Did one or each of you provide the other with financial support?

Yes No

Did one or each of you provide the other with domestic support and personal care?

Yes No

Did you and the member share the ownership, use or acquisition of property?

Yes No

Did you and the member have a mutual commitment to a shared life?

Yes No

Did both of you care for and support your children (if any)?

Yes No

Was your relationship with the member publicly recognised?

Yes No

Did you and the member provide each other with emotional support?

Yes No

Was your relationship with the member merely for convenience?

Yes No

Did you and the member intend that your relationship would be permanent?

Yes No

Did either you or the member have a disability?

Yes No

5. Are you claiming the benefit on behalf of a minor child/ren?

If claiming on behalf of a child under 18, please provide evidence such as the child's birth certificate, child support payments etc.

Yes No

5 Complete this section if you DO NOT wish to claim the death benefit

By completing this section and signing the Statutory Declaration (section 8) you acknowledge that (i) you are waiving your right to be considered by the Trustee regarding the distribution of the death benefit and (ii) you release the Trustee from any obligation to include you in its determination and (iii) you have carefully considered your position and, if required, sought legal advice. Please tick the box below if you are not claiming the death benefit:

I am not claiming the death benefit

6 Personal details of other dependants and potential beneficiaries

Please provide details of any other person who should be considered in the payment of the benefit. These details can help the Trustee to finalise the payment.

Relationship 1

Surname

Given names

Title

Email

Date of birth (DD/MM/YYYY)

Mobile number

Postal address

Relationship to the deceased member:

spouse

child

Legal Personal Representative

financial dependant

Relationship 2

Surname

Given names

Title

Email

Date of birth (DD/MM/YYYY)

Mobile number

Postal address

Relationship to the deceased member:

spouse

child

Legal Personal Representative

financial dependant

6 Personal details of other dependants and potential beneficiaries (continued)

Relationship 3

Surname Given names Title

Email

Date of birth (DD/MM/YYYY) Mobile number

Postal address

Relationship to the deceased member:
 spouse child Legal Personal Representative financial dependant

Relationship 4

Surname Given names Title

Email

Date of birth (DD/MM/YYYY) Mobile number

Postal address

Relationship to the deceased member:
 spouse child Legal Personal Representative financial dependant

7 Privacy of your personal information

Please note that the Trustee will provide an individual with access to all personal information held by the Fund about that individual, including information provided by you, unless the Trustee is of the opinion that providing access would not be reasonable in the circumstances or that providing access may pose a serious or imminent threat to the life or health of any individual.

Information about how the Fund collects, uses and discloses personal information, and your rights to access this information, can be found in the *Prime Super Privacy Statement* at primesuper.com.au or by contacting the Fund.

Under the *Superannuation Industry Supervision Act 1993*, Prime Super is authorised to collect your Tax File Number, which will only be used for lawful purposes. These purposes may change in the future as a result of legislative change.

8 Statutory Declaration - to be signed in the presence of an authorised witness**

To verify that the information you have provided in this form is true and correct you must complete this Statutory Declaration.

This Statutory Declaration must be signed in the presence of a witness.

Who can witness a Statutory Declaration

A Statutory Declaration under the *Statutory Declarations Act 1959* may be made before the people listed below:

1. A person who is currently licensed or registered under a law to practise in one of the following occupations:
 - chiropractor
 - dentist
 - legal practitioner
 - medical practitioner
 - nurse
 - optometrist
 - patent attorney
 - pharmacist
 - physiotherapist
 - psychologist
 - trade marks attorney
 - veterinary surgeon; or
2. A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described); or
3. A person who is in the following list:
 - agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
 - bank officer with five or more continuous years of service Finance company officer with five or more years of continuous service
 - Justice of the Peace
 - member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
 - notary public
 - permanent employee of the Australian Postal Corporation with five or more years of continuous service who is employed in an office supplying postal services to the public
 - police officer
 - teacher employed on a full-time basis at a school or tertiary education institution
 - any other person with authority in the State or Territory in which the declaration is made may also take the declaration.

I (full name)

of (address)

Suburb

State

Postcode

Occupation

Date of birth (DD/MM/YYYY)

Daytime telephone

Mobile

Email

I declare under the *Statutory Declarations Act 1959* that the information provided by me in this form is true and correct.

I understand that a person who intentionally makes a false statement in a Statutory Declaration is guilty of an offence under Section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

8 Statutory Declaration - to be signed in the presence of an authorised witness (continued)**

Signature of person making the declaration

(please sign here)

Date (DD/MM/YYYY)

Before me (signature of person before whom the Declaration is made – refer to the list above)

Date (DD/MM/YYYY)

Witness official number or stamp

Print name, qualifications and address of Witness

** To be signed before a magistrate, Justice of the Peace, Commissioner for Affidavits, Commissioner for Declarations, person for whom a statutory declaration may be made under the law of the State in which the declaration is made, or an Australian Consular Officer or an Australian Diplomatic Officer, as defined by section two of the Consular Fees Act 1955.

The following are also authorised to witness a Statutory Declaration:

Police officer, bank manager, medical practitioner, dentist, nurse, pharmacist

9 Checklist**Before you submit this form, please check you have:**

Fully completed and signed the form

Provided a certified copy of the full death certificate

Provided a certified copy of the deceased's proof of age document

If married, provided a certified copy of your marriage certificate

Provided a certified copy of the deceased's Will (if applicable)

Provided a certified copy of the Grant of Probate or Letters of Administration (if applicable)

Provided certified copies of the children's birth certificates (if any)

Provided a certified copy of your own identity documents

Return this form to us via by mail or email

mail: Prime Super
Reply Paid 85860
PARRAMATTA NSW 2124
No stamp required

email: primeclaims@aas.com.au
visit: primesuper.com.au
call: 1800 675 839