

# **Application form**

## **Personal superannuation**

Before you sign this application form, the Trustee or your Adviser is obliged to give you a Product Disclosure Statement (PDS), which is a summary of important information relating to Enterprise Plan. The PDS will help you to understand the product and decide if it is appropriate to your needs.

Please complete this form in BLOCK LETTERS.

Questions? Contact us on 1800 816 575 or service@supermanagers.com.au.

Personal details	
Member number  - Given name(s)	Date of birth / / /
Gurname	
	Occupation
Address	
	State Postcode
Phone (home) Phone (work)	Mobile
Email	
Company details	
Employment details  lame of employer	Phone number
earrie or employer	Thore number
ddress	
State Postcode	
nate Posicode	
mail	
ncome per annum Full time/0	Casual (No of Hours Date joined employer/
refer to the Insurance Guide for a definition of per week)	Only required if commencement of employment of Insurance
s	
Notification of toy file number	
Notification of tax file number	
is not an offence not to provide your tax file number (TFN). Ho perannuation contributions and any benefit received in cash wiley. I agree to provide my TFN.	
FN	
Request for internet access	
llows you to view online your account balance, personal details	s. investment returns, download forms, etc.)
Yes, I would like to access my superannuation details on	·

5 Lost or unclaime	d superannuation		
superannuation mon	ey held by the ATO or o	ny personal information provided (including TFN) other superannuation funds, to the extent the law rch, as well as providing transfer documents.	
TFN			
Member signature		Date /	/
6 Insurance benefit	:s		
Automatic insurance cover (For details - refer to the PD			
Insurance Options			
I wish to apply for	nsurance cover within n	ny superannuation membership in Enterprise Pla	ın.
Lump sum death and	TPD	Income protection	
Yes No		Yes No	
		ce Application and Variation form, and a persona Publications www.enterpriseplan.com.au.	al health statement which are
·		ervice@supermanagers.com.au.	
7 Initial contributio	n/rollover details		
Please choose one or more	options as applicable.		
My employer will b	e making superannuatio	on guarantee (SG) contributions to my Member a	ccount.
		or member voluntary contribution on my behalf.	
I will be making a p	personal contribution/rol	lover as detailed below	
Personal contribution	\$	Are you claiming a tax deduction?	Yes No
Rollover (estimated)	\$	Number of funds	Yes No
Other contribution	\$	Have you requested these transfer/ rollovers from the relevant institution?	Yes No
Total	\$		
	eplan.com.au or you can	n for each fund from which benefits are to be tran complete the Roll-In form via the Member Onlin n and Password.	
If you have not already requ for each superannuation fur	nested the transfer/rollow and (contact us for help o	ver, please complete a rollover your superannuat r download from the Fund's website.	ion into Enterprise Plan form
Do you wish to transfer a be	enefit from another fund	to Enterprise Plan?	Yes No
If yes, please complete a Refrom the Plan's website at e		nd from which benefits are to be transferred. This	s form can be downloaded
8 Nomination of be	neficiaries		
In the event of your death, obenefit?	do you wish to nominate	one or more beneficiaries to receive the	Yes No

### **Non-binding nomination**

n the event of my death	, please pay my	superannuation	benefit to my	estate/dependants as	detailed below.
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Please pay my benefit to my estate **OR** Please pay my benefit as nominated as follows

Surname	First name	Relationship	% of benefit
			%
			%
			%
			%
		To	otal %

This nomination is not binding on the Trustee although the Trustee will have regard to any nomination(s) made when deciding how your death benefit should be paid. You may change your nomination(s) at any time by writing to us.

#### Nomination of beneficiary - binding

If you would like to make a nomination that is binding on the Trustee, please complete the Nomination of Beneficiary form. The Nomination of Beneficiary Factsheet at <a href="www.enterpriseplan.com.au">www.enterpriseplan.com.au</a> provides further information or contact us on 1800 816 575 or download the form from enterpriseplan.com.au.

#### 9 Your investments

This section of the application should be used to advise the Trustee of your chosen investment options within Enterprise Plan Personal Product. You can select as many investment options as you wish but they must add up to a total of 100% of the amount invested. Please refer to the Enterprise Plan Personal Product PDS and Investment Guide or your financial adviser for further information about investment options.

**Please note:** If you wish to join the Personal Product from 1 July 2017, you must make an investment choice when you complete and submit your application form. If you do not make an investment choice, the Trustee will reject your application and refund your monies.

I wish to invest in one or more of the following investment options (please tick the appropriate investment(s) and indicate either a percentage or your investments OR a dollar value).

Tick	Investment option	Percentage (whole numbers only, no decimal places)	OR \$ Value
Risk ban	d 1 – Very low risk		
	Enterprise Plan Cash	%	\$
Risk ban	d 2 – Low risk		
	Enterprise Plan Diversified Fixed Interest	%	\$
Risk ban	d 3 – Low to medium risk		
	Enterprise Plan Conservative	%	\$
Risk ban	d 4 -		
Risk ban	d 5 – Medium to high risk		
	Enterprise Plan moderate	%	\$
Risk ban	d 6 – High risk		
	Enterprise Plan Balanced MySuperMyLife	%	\$
	Enterprise Plan Growth	%	\$
	Enterprise Plan Australian Shares	%	\$
	Enterprise Plan Aggressive	%	\$
	Enterprise Plan International Shares	%	\$
	Enterprise Plan Listed Property	%	\$
	TOTAL	100%	\$

#### 10 Declaration

- I hereby make application to join the Enterprise Plan and agree to be bound by the Trust Deed and rules of Enterprise Plan, as amended from time to time;
- I declare that all the information on this application is true and correct and that I have read and understand my Duty of Disclosure (refer to the Insurance Guide);;
- I consent to the Trustee supplying information to my Adviser (including electronic access through Enterprise Plan Administration) shown on this application form, his/her dealer group and/or the Promoter;
- I have received personally the PDS either as a printed document, an electronic document or a paper printout of the electronic document and this application was accompanied by, or attached to, the PDS at the same time I received this application form. I have read and understood the PDS; I agree to access the Information in the PDS prior to making decisions in relation to my Enterprise Plan Employer Super membership;
- I acknowledge that neither the Trustee, the Promoter, nor any of their subsidiaries nor their respective officers guarantees
  any particular rate of return, the capital invested nor the repayment of capital;
- I understand that my investment instructions will be processed after this form is accepted by the Trustee in accordance with
  the unit price applicable at that time and I understand that a buy/sell spread may apply to any investment options that I
  have selected:
- I understand that the Trustee reserves the right not to accept my request if, in its opinion, my investment instructions are not clear, and I understand that the Trustee can change the underlying fund managers or products in the investment options at any time;
- I agree to receive all information required or permitted to be given to me under SIS and the Corporations Act, including ongoing notifications, product disclosure statements and supplementary product disclosure statements (or the equivalent information) in respect of the investment options (Information):
  - where it is or may become permissible under the Corporations Act, via my Adviser appointed in writing or notice by email or other electronic communication (including online); or
  - directly; or by email (including emails containing a hypertext link); by other electronic communication (including online by accessing enterpriseplan.com.au); or by making an application to become an investor or by participating in Enterprise Plan Employer Super;
- I understand and accept that a period longer than 30 days may be required to rollover or transfer all or part of my withdrawal benefit where the investment options I have chosen are illiquid and that a list of illiquid investments, the nature and reason for the illiquidity and the estimated maximum redemption period is set out at the Plan's website enterpriseplan.com.au
- I acknowledge and have read the privacy policy (refer to the Member Guide) and understand by completing and returning the relevant forms, I agree to the Trustee using and disclosing my personal information as set out in the privacy policy. I acknowledge and understand that the Promoter may also use the information from time to time to provide me with news or offers about products or services that are offered by the Promoter. If you do not wish to receive this service, please indicate by ticking the box at the bottom of this form;
- I have read and understood the conditions of tax file number collection (refer to the Member Guide);
- I acknowledge that the Trustee cannot provide me with advice about my benefits, investments, insurance and any taxation
  implications that takes into account my personal circumstances and that I should speak to an appropriately qualified
  adviser if I require such advice: and
- I acknowledge that the Trustee may be required under taxation and superannuation legislation to deduct additional tax from
  my benefits and refuse or refund contributions made by me or on my behalf and, in doing so, may make any adjustments to
  my account it considers necessary or appropriate.

Signature		Date				
			/		/	
I do not wish	to receive news or offers about products and services by the Promoter.					
Please send	the completed form to: Enterprise Plan, PO Box 1282, Albury NSW 26	640				
Contact	us					
Phone:	1800 816 575					

Email: service@supermanagers.com.au Website: enterpriseplan.com.au

The information in this document has been prepared by OneVue Super Services Pty Ltd ABN (74 006 877 872), AFSL 246883 as the Fund Administrator. It is intended to provide you with general information only and does not take into account your personal objectives, financial situation and needs. Before making any decisions regarding your benefits in **Enterprise Plan sub Fund of the Executive Super Fund** ABN 60 998 717 367 (the Fund) it is important that you consider the current Product Disclosure Statement (PDS) relevant to your category of membership having regard to your own situation and needs. Copies of the various PDS' are available on the Enterprise Plan's website <a href="www.enterpriseplan.com.au">www.enterpriseplan.com.au</a>. You should consult a licensed or authorised financial adviser if you require advice that takes into account your personal circumstances.