

# Beneficiary nomination form

## Existing policy update

Policy number	Policy number
Policy number	Policy number

## Information on nominating a beneficiary

Your account balance is paid to your beneficiaries or your estate in the event of your death. However, the law restricts who can be a beneficiary.

## Who can you nominate?

Under superannuation law, you can nominate:

#### Individuals

- your spouse or de-facto spouse, including same sex partners
- · children including step and adopted children
- individuals who are financially dependent on you at the time of your death
- someone in an interdependency relationship to you. This is a close personal relationship between two people who live together,
  where one or both of them provide for the financial and domestic support and personal care of the other. This type of
  relationship may still exist if there is a close personal relationship but the other requirements are not satisfied because of some
  physical, intellectual or psychiatric disability.

#### Legal representative (your estate)

• your legal representative (either the executor under your will or a person(s) granted letters of administration for your estate if you die without having left a valid will)

#### Types of nominations

- a non-lapsing binding nomination which is binding on the Trustee ensures your account balance is paid as you have directed as long as the nomination is and remains valid.
- a non binding nomination subject to Trustee discretion the Trustee will decide who receives your account balance and will consider your preferred beneficiaries.
- no nomination the Trustee will decide who receives your account balance.

The Trustee

Equity Trustees Superannuation Limited ABN 50 055 641 757 AFSL 229757

The Fund Smart Future Trust ABN 68 964 712 340 The Insurer

Nippon Life Insurance Australia and New Zealand Limited ABN 90 000 000 402 AFSL 230694



Insurance is issued by the Insurer. The Insurer is part of the Nippon Life Group.

Before you complete this form please read the beneficiary section of the relevant Product Disclosure Statement (PDS). The PDS that are relevant to you are:

For Acenda Insurance and Acenda Insurance (Super) – Acenda Insurance and Acenda Insurance (Super) Product Disclosure Statement (Insurance PDS), issued by the insurer, Nippon Life Insurance Australia and New Zealand Limited.

**For Acenda Insurance (Super)** – please also read the Smart Future Trust - Retail Insurance in Super: for Acenda Insurance Super Product Disclosure Statement (Super PDS) issued by the trustee, Equity Trustees Superannuation Limited.

1. Your personal details					
Please select your product:					
Acenda Insurance Acenda Insurance (Super)					
	First name				
Mr Mrs Miss Ms Other					
Middle name	Last name				
Date of birth (DD/MM/YYYY) Email					
2. Your nomination details – Acenda Insurance only  Nomination of Beneficiary – Acenda Insurance – must be nominated by the Policy Owner  Note: For Acenda Insurance, nominations cannot be made by trustees of a trust or a self-managed super fund.					
Do you wish to make a beneficiary nomination? (This nomination only applies to your death benefit)					
Yes Please complete the details below					
No The death benefit will be paid to the Policy Owner	(s) for Acenda Insurance.				

## **Beneficiary nomination for Acenda Insurance**

Complete this section to nominate who you wish the death benefit to be paid to. This is only available for insurance taken out for non-business purposes. Leave this section blank if you wish the death benefit to be paid to the Policy Owner(s).

Please nominate your preferred beneficiary/beneficiaries and the portion you would like each to receive. You may nominate up to six beneficiaries, including your Legal Personal Representative (Estate of the Life to be Insured).

Name and address of beneficiary		Date of birth	Relationship to you	Portion of total benefit*
1				%
2				%
3				%
4				%
5				%

## 2. Your nomination details - Acenda Insurance only continued

6				%
	* The sum of each of your portions of the total benefit must equal 100% and up to two decimal places can be nominated for each position.			100%

## 3. Your agreement and declaration – Acenda Insurance only

- I have read and understood the information provided to me in the Insurance PDS on beneficiary nominations
- I understand I should review my nomination regularly and as my circumstances change (eg marriage breakdown, birth of a child, or my benefit being affected by a payment split) to ensure my nomination is always up to date.

Signature of Policy Owner 1		Signature of Policy Owner 4	
X	Date (DD/MM/YYYY)	X	Date (DD/MM/YYYY)
Signature of Policy Owner 2		Signature of Policy Owner 5	
X	Date (DD/MM/YYYY)	X	Date (DD/MM/YYYY)
Signature of Policy Owner 3		Signature of Policy Owner 6	
V	Date (DD/MM/YYYY)	V	Date (DD/MM/YYYY)
^		^	

## 4. Your nomination details – Acenda Insurance (Super)

#### Nomination of beneficiary - Acenda Insurance (Super) - must be nominated by the Life Insured

#### Non-Binding death benefit nomination

Complete this section if you wish to indicate to the Trustee your preferred beneficiary/beneficiaries of your death benefit. It is the Trustee's ultimate decision to whom the benefits will be paid and in what portions. Your nomination will be taken into account by the Trustee. The Trustee will ultimately be restricted to paying the death benefits to your dependants and/or your legal personal representative (estate). It is important that you read the beneficiaries section of the Super PDS about making nominations before completing this section.

If this application relates to an existing policy, then the nomination provided in this form overrides the existing nomination on file.

## Non-lapsing binding death benefit nomination

Complete this section if you wish to indicate to the Trustee who your death benefit MUST be paid to.

Your nominated beneficiary/beneficiaries must be a dependant(s) or your legal personal representative (estate). The Trustee will pay the benefits to your nominated beneficiaries and in the portions indicated providing that you satisfy the requirements in making this nomination and at the date of death, the beneficiaries are your dependants or legal personal representative (estate). It is important that you read the beneficiaries section of the Super PDS about making nominations before completing this section.

Complete the table on the next page for all beneficiary nominations for Acenda Insurance (Super). Please nominate your beneficiary/ beneficiaries and the portion you would like each to receive. You may nominate up to 6 beneficiaries.

To be valid, your nomination must also be witnessed, signed and dated by witnesses as required in section 5.

# 4. Your nomination details – Acenda Insurance (Super) continued

Plea	ase tick only one of the options below to indic	ate what type	of beneficiary nomin	ation you wo	ould like to make:
	Non-binding death benefit nomination		complete the table on ss signature is not req		go to section 5 to sign,
	Non-lapsing binding death benefit nomination		complete the table be and dated by the with		
Na	me and address of beneficiary	Date of birth	Date of birth Relationship to you		Portion of total benefit*
1			Spouse Child Financial depen Interdependence Other dependar Estate	y relationship	%
2			Spouse Child Financial depen Interdependence Other dependar Estate	y relationship	%
3			Spouse Child Financial depen Interdependence Other dependar Estate	y relationship	%
4			Spouse Child Financial depen Interdependence Other dependar Estate	y relationship	%
5			Spouse Child Financial depen Interdependence Other dependar Estate	y relationship	%
6			Spouse Child Financial depen Interdependence Other dependar Estate	y relationship	%
**	* The sum of each of your portions of the total benefit must equal 100% and up to two decimal places can be nominated for each position.  ** Please note: For non-lapsing binding nominations, the selection of 'Other dependant' is not valid. If you select a binding nomination and tick 'Other dependant', your nomination will not be valid.  ** Total 100%				

## 5. Your agreement and declaration – Acenda Insurance (Super)

Please complete this section when making a non-lapsing binding beneficiary nomination for Acenda Insurance (Super).

- · I request that the Trustee accept my beneficiary nomination for my Acenda Insurance (Super) policy.
- I have read and understood the information provided in the Super PDS on beneficiary nominations.
- I understand I should review my nomination regularly and as my circumstances change (eg marriage, marriage breakdown, birth of a child, or my benefit being affected by a payment split) to ensure my nomination is always up to date.

Signature o		

V	Date (DI	D/MM/YY	′)
^			
	1 1	-	

#### Witness declaration

Please complete this section when making a non-lapsing binding death benefit nomination for Acenda Insurance (Super). Must be signed and dated by two adult witnesses.

I declare that:

- I am over 18 years of age;
- I am not already a nominated beneficiary of the Life Insured and I am not one of the beneficiaries named above; and
- This form was signed and dated by the applicant in my presence.

Witness 1	witness 2
First name	First name
Middle name	Middle name
Last name	Last name
Signature(s) of the witness	Signature(s) of the witness
Date (DD/MM/YY)	Date (DD/MM/YY)
6. Check your nomination	
I have completed all sections 1 to 5 of the form (where	e applicable).
I have supplied the full name, relationship and date or	f birth of all beneficiaries in section 2 and/or 4.
The total of the percentages allocated to beneficiarie	s adds up to 100% in section 2 and/or 4.
If I have requested the non-lapsing binding nomination are over 18 years of age and not nominated as benefit	on, I have signed and dated my form in front of two witnesses who ciaries in section 4.

## Send us your form

Please return your completed, signed and dated form to:

Acenda - Operations PO Box 23455 Docklands VIC 3008

Email: enquiries.retail@acenda.com.au

If you have any questions, please speak with your financial adviser or call us on **13 65 25** between 8.30am and 6pm (AEST/AEDT), Monday to Friday.