



# Spouse (or spouse and children) of a deceased pensioner

## Benefit application form and information

This form is to be completed by persons who consider that they satisfy the definition of a spouse as outlined on **page 2**.

Once the application has been completed it should be forwarded to:

PSS  
Pensions Administration Section  
PO Box 22  
Belconnen ACT 2616

The PSS pays death benefits to a spouse and any eligible children of a deceased member of the scheme.

## Who is a spouse?\*

For the purposes of the *PSS Rules*, a **spouse** is a person who had a marital or couple relationship with a member or a pensioner at the time of their death.

A marital or couple relationship is a relationship between a member or pensioner and a person of the same sex or opposite sex who lived together as husband and wife or partners in a permanent and bona fide domestic relationship for a continuous period of at least three years at the date of death.

To prove eligibility for a spouse benefit you will need to provide the following evidence:

- > a marriage certificate
- > a registered relationship certificate  
or
- > statutory declarations from at least two independent persons having knowledge of the domestic relationship and the length of that relationship.

If the relationship had existed for less than three continuous years at the member or pensioner's death, eligibility can still be determined where ARIA is satisfied that the person ordinarily lived with the member or pensioner as husband and wife or partners.

In making an assessment of eligibility, ARIA may consider the following factors:

- > financial dependence
- > whether you were legally married
- > whether you were in a registered relationship
- > whether you and your partner in the relationship had a child who was:
  - > born of your relationship
  - > adopted by you during the relationship  
or
  - > where the child is a child of both of you within the meaning of the *Family Law Act 1975*
- > joint ownership of property
- > any other evidence ARIA may consider relevant

Where you previously had a marital or couple relationship but the relationship finished before the date of death, a spouse benefit may still be payable to you if:

- > at the time of the deceased person's death, you were legally married to the deceased person  
and
- > you were wholly or substantially dependent upon the deceased person at the time of the deceased person's death.

A pro-rated reversionary pension is payable for spouse and children of a deceased pensioner where a marital or couple relationship started after the deceased became a pensioner and reached age 60 and the relationship had existed for less than three years at the date of the pensioner's death.

## Who is a child?\*

For the purposes of the *PSS Rules*, a **child**, in relation to a pensioner who has died, is a child (including an adopted child, an ex-nuptial child, a step-child, a child within the meaning of the *Family Law Act 1975* or any other person whom ARIA determines is to be treated as a child) of the pensioner.

The meaning of child in the *Family Law Act 1975* includes children:

- > born to a woman as the result of an artificial conception procedure while that woman was married to, or was a de facto partner of, another person (whether of the same sex or opposite sex)  
and
- > who are children of a person because of an order of a state or territory court made under a state or territory law prescribed for the purposes of section 60HB of the *Family Law Act 1975*, giving effect to a surrogacy agreement.

## Who is an eligible child?\*

An **eligible child**, is a child of the deceased member or pensioner (including an adopted child, an ex-nuptial child, a step-child, a child of the former member within the meaning of the *Family Law Act 1975* or any other person whom ARIA determines is to be treated as a child of the member) who:

- > has not reached age 16  
or
- > is age 16 or more but less than age 25  
and
- > is receiving full-time education at a school, college or university  
and
- > is not ordinarily employed or self-employed  
and
- > immediately before the death of the pensioner:
  - > ordinarily lived with the pensioner
  - > was, in the opinion of ARIA, wholly or substantially dependent upon the pensioner  
or
  - > where the child is born, after the death of the pensioner, and would have, in the opinion of ARIA, ordinarily lived with, or been wholly or substantially dependent on, the pensioner if the child had been born before the death of the pensioner.

## Who is a partially dependent child?\*

A **partially dependent child** is a child of the deceased member or pensioner (including an adopted child, an ex-nuptial child, a step-child, a child of the deceased member within the meaning of the *Family Law Act 1975* or any other person whom ARIA determines is to be treated as a child of the member) who:

- > is not an eligible child and
- > is aged less than 16, or is aged 16 or more but less than age 25 and
  - > is receiving a full-time education at a school, college or university and
  - > is not ordinarily employed or self-employed and
- > in respect of whom, immediately before the death of the pensioner:
  - > the deceased pensioner was voluntarily making, or required by a court to make, regular maintenance payments or
  - > in the opinion of ARIA, the pensioner would have been voluntarily making, or required by a court to make, such payments if the child had been born before the death of the pensioner.

\* These descriptions paraphrase the definitions in the *PSS Rules* and the *Family Law Act 1975*.

## Spouse of a pensioner

Tables 1 and 2 show the basic rate of spouse pension.

If the deceased was a pensioner at the time of death, spouse's pension is payable at the deceased pensioner's full rate for seven paydays.

This additional amount is made up of the difference between what the late pensioner was receiving and what the spouse is entitled to receive for six full paydays and part of the fortnight in which the pensioner passed away. We pay the spouse this additional amount as a lump sum with their first payment.

Following this, pension is payable at the rate of 67% of the deceased's pension and is increased by 11% for each eligible child, up to 100% of the deceased's pension, where there are three or more eligible children.

| No. of eligible children | Pension % |
|--------------------------|-----------|
| None                     | 67        |
| One                      | 78        |
| Two                      | 89        |
| Three or more            | 100       |

## Reduced pension option

For age and early age retirees, legislation effective from 1 July 2003 introduced a reduced pension option at the rate of 93% of the retiree's initial pension entitlement. The effect of this reduction is to increase the reversionary benefit payable to an eligible spouse from 67% to 85% of the pension paid at the time of the pensioner's death.

Where an election for a reduced pension option was made at the time of retirement, the rate of pension payable to an eligible spouse will increase as follows:

Table 2: Increased spouse pension rate

| No. of eligible children      | Pension % |
|-------------------------------|-----------|
| Spouse and no children        | 85        |
| Spouse and 1 child            | 97        |
| Spouse and 2 or more children | 108       |

*Note: the maximum rate of 108% is equal to 100% of the benefit that would have been payable to the pensioner if an election for a reduced rate of initial pension had not been made.*

## Pension information

### When is the pension paid?

Pension is payable from the day after the date of death. It is calculated on the basis of a 14 day fortnight.

### Who pays the pension?

We first establish entitlement to pension. Payment is made by ComSuper on behalf of ARIA.

### Method of payment

Pension is paid by direct credit to an approved financial institution (bank, building society, credit union) of your choice, within Australia. If at any time, after the pension starts, you wish to change the institution to which the pension is being credited, you will need to contact us by calling 1300 001 777. This must be done at least one week before payday to ensure payment to your new account.

### Tax File Number (TFN) requirements

In accordance with the *Taxation Laws Amendment (Tax File Numbers) Act 1988*, we are required to deduct PAYG tax at the top marginal rate plus the Medicare levy from benefits if a person does not provide a TFN.

If you have not been issued a TFN you should lodge an **Australian Taxation Office Application/Enquiry** form at the Australian Taxation Office (ATO). Forms are available at [www.ato.gov.au](http://www.ato.gov.au) or all ATO branches. You must provide proof of identity at the time you lodge the form.

## Tax File Number Declaration form

The information you provide on this form will determine how much tax is deducted from your pension. Please note, you can only claim the tax free threshold against one source of income.

## Pension increases

The legislation provides for bi-annual increases based on upward movements in the Consumer Price Index (CPI). These increases are paid on the first payday in January and July each year.

## When does the pension stop?

Pension is payable for your lifetime.

## Children's pension

The amount of pension payable to a spouse is increased for each eligible child with the maximum rate being payable where there are three or more eligible children.

Pension payable in respect of a child will stop upon the child reaching age 16 unless the child remains in full-time education in which case payment will continue until either full-time education stops or the student reaches age 25, whichever occurs first.

## Full-time study details

For children over age 16 but less than age 25 to be regarded as eligible children, we need to establish that they are full-time students.

Students are reviewed at the beginning of each academic year to ensure they have continued full-time study. If a student stops full-time study during the academic year you must advise us immediately to avoid any overpayment of pension.

## Privacy

ARIA and its administrator, ComSuper are collecting the information on this form for the following reasons:

- > to confirm your identity
- > to assess your eligibility for payment of the benefit
- > to pay your benefit
- > to contact you.

ARIA and ComSuper are committed to protecting any personal information we hold about you. Your information will not be used for any other purpose or disclosed to another party unless:

- > you authorise us to do so
- > the disclosure is authorised by law. This may include disclosing your personal information to other government agencies that have specific legislative authority to collect this information as required by policy and legislation. We will not disclose your personal information to these agencies unless it is lawful to do so.

## Where can I get more information?

**EMAIL** members@pss.gov.au

**PHONE** 1300 000 377

**FAX** 02 6272 9613

**MAIL** PSS  
PO Box 22  
Belconnen ACT 2616

**WEB** www.pss.gov.au

When contacting us, please remember to quote the reference number of the deceased.

## How to complete this application

Most questions are self-explanatory. However additional information regarding important or optional questions is provided hereunder.

### Section A. About the deceased

This segment provides primary identification details to ensure the correct records are used to calculate your benefit.

### Section B. Your details

This segment provides necessary details about yourself to enable benefits to be paid in your name. If you will be receiving a pension it is important that you keep us informed of any changes of postal address, residential address or name.

### Section C. Payment details

This segment lets you tell us where to pay your pension.

The account must be an Australian account held in your name only or jointly between you and one other person (excluding the deceased). Joint accounts held with your late spouse are sometimes frozen by the bank and may not be able to be used. Please check with the bank before providing details of a joint account with the deceased.

### Section D. Relationship details

The details you provide here will help us to establish your eligibility for spouse's benefits. Be sure to include a copy of your marriage certificate or a registered relationship certificate. If you cannot locate your certificate, contact births deaths and marriages in the state you were married or registered your relationship to organise a certificate.

## Section E. Details of children

You need to advise if there are any children who could be regarded as eligible children. Remember to include copies of full birth certificates for each child under your care with this application.

## Section G. Identification requirements

To protect against fraud, money laundering, terrorism financing and safeguard your benefit, we need you to provide documentation to prove your identity before we can process your benefit request.

You need to provide certified copies of four identifying documents listed in **Section G** on the application form. The person certifying the documents must attest that the documents are true copies, and that you are the valid holder of the identification.

We will store copies of identification electronically in a secure environment and securely destroy the paper copies. We will use all copies only for the purpose of confirming your identity.

If you are providing copies of bills or statements, you should black out any personal financial information or details of transactions in order to protect your privacy.

## Section H. Declaration

Be sure to sign the declaration to avoid delay in your payment.

## Section I. Attachments

Please ensure relevant documents are included.

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Australian  
Reward  
Investment  
Alliance

# Spouse and children of a pensioner

## Benefit application form

### Hints for using this form

- > Read the explanatory notes and each section of the form carefully before filling it in.
- > Use capital letters and a black or blue pen, and tick boxes for your answers as appropriate.
- > Ensure this application is signed.

### SECTION A - About the deceased

Reference number

Surname

Given name/s

Date of death  DAY /  MONTH /  YEAR

Date of birth  DAY /  MONTH /  YEAR

### SECTION B - Your details

Title (please tick one)  Mr  Ms  Mrs  Miss  Other

Surname

Given name/s

Date of birth  DAY /  MONTH /  YEAR

Postal address

STATE  POSTCODE

Residential address

STATE  POSTCODE

Contact phone number

Email address



## SECTION D - Relationship details

Were you legally married to the deceased at the time of death?

Yes (Answer questions A & B)     No (Answer questions C to H)

### A. Date of marriage

| DAY |  | MONTH |  | YEAR |  |
|-----|--|-------|--|------|--|
|     |  |       |  |      |  |

include a copy of your marriage certificate

**Note:** If the period between the date of marriage and the date of death is **less than three years**, please provide details of the date the relationship started at **Item C to H** inclusive to support your claim and provide relevant evidence.

### B. Were you living with the deceased at the time of death?

Yes     No  
 Was the separation due to illness?  
 Yes     No

**Note:** Please be aware that where you have answered YES to the question 'was the separation due to illness' the rules of the *Superannuation Act 1990* require that you provide a letter from the treating physician attesting to the illness suffered by the deceased or spouse, confirming that this was the reason for hospitalisation or nursing home care.

Until this confirmation is received payment of your benefit may be delayed.

Provide date of last hospital admission (if applicable)

| DAY |  | MONTH |  | YEAR |  |
|-----|--|-------|--|------|--|
|     |  |       |  |      |  |

to

| DAY |  | MONTH |  | YEAR |  |
|-----|--|-------|--|------|--|
|     |  |       |  |      |  |

Had action been taken in the Family Court to dissolve the marriage?

Yes     No

Were you wholly or substantially dependent upon the deceased at the time of the death?

Yes     No

Please include details of total fortnightly income and expenditure at the time of the death and attach any documents which support your claim

### C. Were you living with the deceased on a permanent and bona fide domestic basis at the time of death?

Yes     No

Please attach either: Statutory declarations completed by two persons outside your immediate family (preferably by professional or business people). The statutory declarations from these people will need to cover

- > Their name, address and occupation
- > Their relationship to both you and the deceased
- > How long they knew each of you respectively
- > Whether they considered you and the deceased to be in a marital or couple relationship at the time of death

or

- > a registered relationship certificate

Was the separation due to illness?

Yes     No

Please provide a letter from the treating physician attesting to the illness suffered by the deceased, confirming that this was the reason for hospitalisation or nursing home care.

When did you start living with the deceased?

| DAY |  | MONTH |  | YEAR |  |
|-----|--|-------|--|------|--|
|     |  |       |  |      |  |

### D. Did you hold any bank, credit union or building society accounts in joint names with the deceased?

Yes     No

Please provide evidence

### E. Did you have joint ownership with the deceased of a house which was your normal place of residence?

Yes     No

Please provide evidence

### F. Were there any children born or adopted during the relationship, or children of both of you within the meaning of the *Family Law Act 1975*?

Yes     No

Please provide evidence

### G. Did the relationship endure three years or more at the date of death?

Yes     No

Please provide evidence

### H. Were you wholly or substantially dependent upon the deceased at the time of the death?

Yes     No

Please include details of total fortnightly household income and expenditure at the time of death and attach any documents which support your claim

Further information that will assist the delegate in determining your eligibility for a spouse's benefit includes, but is not restricted to:

- > Certified copy of the deceased Will or Letters of Administration
- > Evidence of joint household accounts and utility bills e.g. electricity, phone, gas, etc
- > Anything else you may consider relevant



### Full-Time Study Details—for child over age 16

Please provide details of any full time students less than age 25 that may be regarded as eligible students and include copies of full birth certificates (not an extract). If duration of course is less than 12 months, please include dates of duration. If course is more than 12 months (e.g. four year uni course) only provide dates for current year. At the beginning of each year we send out an Annual Student Review confirming full time study. This will verify continuation of study.

|                                      |                               |
|--------------------------------------|-------------------------------|
| Name of Student                      | <input type="text"/>          |
| Name of School/College/University    | <input type="text"/>          |
| Address of School/College/University | <input type="text"/>          |
|                                      | <input type="text"/>          |
|                                      | STATE <input type="text"/>    |
|                                      | POSTCODE <input type="text"/> |
| Type of Course (e.g. HSC, Degree)    | <input type="text"/>          |
| Duration of Course                   | <input type="text"/>          |
| Stamp of School/College/University   | <input type="text"/>          |

**Signature of Principal/Registrar—I certify that this student is undertaking full-time study**

|                      |                      |
|----------------------|----------------------|
| SIGNATURE            | DATE                 |
| <input type="text"/> | DAY MONTH YEAR       |
|                      | <input type="text"/> |

If you have more than one child over age 16 please attach the same details as above for each additional child.

### Full-Time Study Details—for child over age 16

Please provide details of any full time students less than age 25 that may be regarded as eligible students and include copies of full birth certificates (not an extract). If duration of course is less than 12 months, please include dates of duration. If course is more than 12 months (e.g. four year uni course) only provide dates for current year. At the beginning of each year we send out an Annual Student Review confirming full time study. This will verify continuation of study.

|                                      |  |
|--------------------------------------|--|
| Name of Student                      | <input type="text"/>                                     |
| Name of School/College/University    | <input type="text"/>                                     |
| Address of School/College/University | <input type="text"/>                                     |
|                                      | <input type="text"/>                                     |
|                                      | <input type="text"/>                                     |
|                                      | STATE <input type="text"/> POSTCODE <input type="text"/> |
| Type of Course (e.g. HSC, Degree)    | <input type="text"/>                                     |
| Duration of Course                   | <input type="text"/>                                     |
| Stamp of School/College/University   | <input type="text"/>                                     |

**Signature of Principal/Registrar—I certify that this student is undertaking full-time study**

SIGNATURE

DATE

|                      |                      |   |                      |                      |                      |
|----------------------|----------------------|---|----------------------|----------------------|----------------------|
|                      | DAY                  |   | MONTH                |                      | YEAR                 |
| <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | /                    |
| <input type="text"/> | <input type="text"/> |   | <input type="text"/> | <input type="text"/> | <input type="text"/> |

If you have more than one child over age 16 please attach the same details as above for each additional child.

## SECTION F - Tax File Number (TFN)

Under the *Superannuation Industry (Supervision) Act 1993*, your super fund is authorised to collect your TFN, which will only be used for lawful purposes.

These purposes may change in the future as a result of legislative change.

It is not an offence not to quote your TFN. However giving us your TFN will have the following advantages (which may not otherwise apply):

- > no additional tax will be deducted, other than the tax that may ordinarily apply
- and
- > it will make it much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

If you have already provided your TFN to us, you are under no obligation to provide it again in this application.

## SECTION G – Identification requirements

To protect against fraud, money laundering, terrorism financing and safeguard your benefit, we need you to provide documentation to prove your identity. Please be aware that under some circumstances we may request further information from you.

To do this, you will need to provide certified copies of **one** document from column A in the table below **AND** certified copies of **three** documents from column B.

| A  | B   |
|--|---|
| Passport (current or expired by less than two years)   | Medicare card   |
| Birth certificate or extract, issued by an Australian or foreign government (either in English or accompanied by an English translation prepared by an accredited translator)          | A current statement from a financial institution with the same address and name as on the application and not more than three months old. This statement must be the account that you are requesting payment into |
| Birth card issued by a state registry of births, deaths and marriages  | Copy of an electricity bill with the same address and name as on the application  |
| Australian citizenship certificate   | Copy of a telephone bill with the same address and name as on the application   |
| Current drivers licence or permit issued by state or territory or foreign government   | Copy of a gas bill with same address and name as on the application   |
| Current identification card issued to a public sector employee   | Copy of a rates bill with same address and name as on the application   |
| An identification card issued to a student at a tertiary education institution   | Valid credit card   |
| Pension or other social security benefit card  | A document from <b>column A</b> not yet provided  |
| Proof of age card issued by a state or territory, containing your photograph   | Copy of a tax return letter from the Australian Taxation Office with the same address and name as on the application  |
| A national identity card, containing your photograph, issued by a foreign government (either in English or accompanied by an English translation prepared by an accredited translator) | A letter from Centrelink or Department of Veterans' Affairs with the same address and name as on the application  |
| Citizenship certificate issued by a foreign country (either in English or accompanied by an English translation prepared by an accredited translator)                                  |   |

For example, you could provide a copy of your birth certificate (from Column A) and copies of your Medicare card, a phone bill and an electricity bill (from Column B).

If you are providing copies of bills or statements, you should black out any personal financial information or details of transactions in order to protect your privacy. We will store copies of identification electronically in a secure environment and securely destroy the paper copies. We will use all copies only for the purpose of confirming your identity.

All copies of documents provided must be certified as true and correct copies of the original by one of the following:

- > a legal practitioner enrolled on the roll of a supreme court or the high court of Australia
- > a judge or magistrate of a court
- > a chief executive officer of a Commonwealth court
- > a registrar or deputy registrar of a court
- > a Justice of the Peace (JP)
- > a notary public
- > a police officer
- > an agent or a permanent employee of the Australian Postal Corporation with two or more years of continuous service in an office supplying postal services to the public
- > an Australian consular officer or an Australian diplomatic officer
- > a finance company officer with two or more years of continuous service with one or more finance companies
- > a person employed by, or an authorised representative, of the holder of an Australian financial services licence with two or more continuous years of service
- > a member of the Institute of Chartered Accountants of Australia (ICA), Certified Practising Accountants (CPA Australia) or National Institute of Chartered Accountants (NIA) with two or more years of continuous membership.

The certifying authority also must confirm in writing that you are the valid holder of the identification that you are presenting and that any copies are true copies of the original.

The certification must include the name, address, occupation, phone number and registration number (if applicable) of the certifying authority.

## SECTION H - Declaration

I declare that the information supplied by me is true and correct to the best of my knowledge.

SIGNATURE

DATE

| DAY |  | MONTH |  | YEAR |  |
|-----|--|-------|--|------|--|
|     |  |       |  |      |  |

**Note:** You don't need a copy of the deceased's death certificate before lodging this application. The death certificate can be sent later.

## SECTION I - Attachments

If you have included some attachments with this application, please tick the appropriate box(es) where applicable to ensure the attachments are properly recorded.

- Marriage certificate
- Registered relationship certificate
- Letter from treating physician
- Statutory declaration(s)
- Child(ren)'s full birth certificate(s)
- Death certificate
- Certified copies of documents requested to prove your identity
- Other (please specify below)

END FORM