



Orphan of a deceased member

Benefit application form and information

Before completing this benefit application form, you are advised to read the **PSS Product Disclosure Statement** at www.pss.gov.au or call **1300 000 377**.

This form is to be completed by persons who have care, control and custody of the child of a deceased member that they consider is either an eligible child or a partially dependent child. A separate form is required for each child. Eligible children over the age of 18 years may apply for a benefit in their own right.

The term 'orphan' refers to an eligible child or partially dependent child of a deceased member who does not have a spouse for the purposes of the *PSS Rules*.

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

PSS
PO Box 22
Belconnen ACT 2616

Who is a child?*

For the purposes of the *PSS Rules*, a **child**, in relation to a member 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 member.

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

Who is a partially dependent child?*

A **partially dependent child** is a child of the deceased member (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
- > in respect of whom, immediately before the death of the member:
 - > the deceased member was voluntarily making, or required by a court to make, regular maintenance payments
 - or
 - > in the opinion of ARIA, the member 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 member.

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

Explanatory notes

Introduction

The first part of the application form is intended to provide you with a quick reference to the superannuation rights that are available.

Before completing this benefit application form, you are advised to read the **PSS Product Disclosure Statement** at www.pss.gov.au or by calling 1300 000 377.

What you need to do

The benefit payable will be paid either as a lump sum or a pension. The deceased's employer will advise you which scheme you must select from and the benefit available.

Pension information

When is the pension paid – Pension is payable on and from the day after the date of the member's death. It is calculated on the basis of a 14 day fortnight and is paid on the alternate Thursday to public service paydays.

Pension increases – Increases are based on the upward movement of the Consumer Price Index (CPI) for the 12 months ended 31 March each year and is paid on the first pension payday in each January and July. There are proportionate adjustments if pensions have been paid for only part of the preceding year. PSS pension increases are applied to the full pension.

Partially dependent children's pension – The rate of pension will be an amount equal to the regular financial support provided before death occurred, or if a court order exists, the amount recorded in the order, up to the amount that could have been payable to an eligible child.

When does the pension stop – Pension will stop once the child reaches age 16 unless they are receiving full-time education, in which case payment will continue until either full-time education stops or the student reaches age 25, whichever occurs first. Student pensions are reviewed at the end of each year to establish continuing entitlement. Pension payable in respect of partially dependent children will stop earlier if ordered by the court.

Tax File Number (TFN)

In accordance with the *Taxation Laws Amendment (Tax File Numbers) Act 1988*, ComSuper is required to deduct PAYG tax at the top marginal tax rate including 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 with the Australian Taxation Office (ATO). Forms are available at www.ato.gov.au or all ATO branches. You must provide proof of identity at the time you lodge the form.

Lump sum information

PAYG payment summary – where applicable PAYG income tax will be calculated and deducted by us. A **PAYG payment summary** will be sent to the postal address shown on the application. This will give you the necessary information to complete the child's income tax assessment return.

Explanation of terms used

All benefits payable are, in most cases, made up of three components: a member component; a productivity component; and an employer component.

Member component – is the contributions the deceased paid to the scheme accumulated with Fund earnings.

Productivity component – is the fortnightly contribution made by the employer on the deceased's behalf and is accumulated with Fund earnings at the same rate as the member contributions.

Employer component – if the member contributed to the 1990 (PSS) scheme, the component forms part of the indexed pension or, if a limited benefits member, as part of the lump sum benefit accrual.

Limited benefits (1990 – PSS) – a member is normally informed that due to the state of their health on joining the scheme, the Board of Trustees declared them a limited benefits member. If that was the case and the date of death was within three years of joining the scheme then the benefit payable is a lump sum only.

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.

Summary of scheme benefits

Lump sum only, no pension – This benefit is only available if the deceased was a limited benefit member and provides for a lump sum only payment of the three components. If there are two or more eligible children the board will determine an appropriate break-up.

Pension only, no lump sum – provides for a pension calculated as a percentage of what would have been the deceased's invalidity pension as at the date of death, if the deceased died before age 60, or what would have been the deceased's age retirement pension if death occurred after reaching age 60.

The percentage rate applicable depends on the number of eligible children receiving benefit.

- > 1 child 45%
- > 2 children 80%
- > 3 children 90%
- > 4 or more children 100%

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.

TEAR OFF THESE PAGES AND KEEP FOR YOUR INFORMATION



Australian
Reward
Investment
Alliance

Orphan of a deceased member

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
- > After completing and signing the application form, return it to the employer together with any supporting documentation. If you don't sign the relevant sections of this form, it will be returned to you.
- > If applying for a pension benefit it may be in your interest to also include a **Tax file number declaration** form completed on behalf of the child. This form is available from the ATO at www.ato.gov.au

SECTION A - Your details

Title (please tick one) Mr Ms Mrs Miss Other

YOUR NAME
Surname

Given name/s

YOUR CONTACT DETAILS
Postal address

STATE POSTCODE

Residential address

STATE POSTCODE

Contact phone number(s) HOME WORK

SECTION B - About the deceased

Reference (AGS) number

Title (please tick one) Mr Ms Mrs Miss Other

NAME
Surname

Given name/s

Date of birth DAY MONTH YEAR

Date of death DAY MONTH YEAR

Name of Former Employer
The name of the Government Office or Authority the deceased was employed by.

Designation/Classification, if known
The position held by the deceased.

SECTION C - About the child

Surname

Given name/s

Date of birth DAY / MONTH / YEAR INCLUDE COPY OF FULL BIRTH CERTIFICATE

What is your relationship to the child?

What was the child's relationship to the deceased?

C1. Was the child living with the deceased at the time of death? YES - If you answered YES go to question **C3**.

NO - If you answered NO go to question **C2**.

C2. Was the child wholly or substantially dependent upon the deceased at the time of death? YES - If you answered YES go to question **C3**.

NO

Include all details of dependency with the application including any supporting documents you may think relevant, e.g. maintenance agreements.

C3. Is the child age 16 years or more? YES - If you answered YES include a **Review of student pension (SC3)** form with this application. This form is available at www.pss.gov.au or phone 1300 000 377.

NO

Please indicate whether there are other children whom you consider are also eligible for a benefit. If any of the children are in your care, control and custody, separate applications need to be completed for them. If not, please attach a list of the name(s) and address(es) of the relevant guardians.

Name	Date of birth
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

SECTION D - Method of payment

Type of financial institution (please tick one) Bank **OR** Building Society **OR** Credit Union

Name of bank, building society or credit union

Branch address

STATE POSTCODE

BSB number (must be six numbers long)

Account number (no more than nine numbers long)

Note: If the BSB or account number you provide is incorrect the payment will not be accepted by your financial institution. If you have any doubts what your correct BSB or account number is, you should confirm these details with your financial institution before including them in this form.

Account name

The information I have supplied is complete and correct.

SIGNATURE

DATE DAY MONTH YEAR

Section D continued over page

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 column A 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 - Departmental Report

To be completed by the employer's personnel or pay section

Contributor's work classification or local designation

Reference (AGS) number

Date started employment
 DAY MONTH YEAR
 / /

Date of death
 DAY MONTH YEAR
 / /

Salary at date of death

The figure(s) to be shown is the greater of:

- (a) annual salary at the date of exit;
- (b) the salary on which contributions are based; or
- (c) the highest salary received on or after the last birthday anniversary

Annual salary \$

Annual allowance(s) \$

Total salary \$

Contribution Ceasing Entries

Show details of this ceasing entry together with the last three variation entries.

Payday of adjustment	Old perm. cont.	New perm. cont.	Current adjust.	PLUS/MINUS
<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"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	NIL	<input type="text"/>	<input type="text"/>

SECTION I - Certification

FULL NAME
 I,

Contact phone number

being the officer authorised to sign on behalf of the Chief Officer declare that the above information is true and correct and I certify that no variations to contributions will be made subsequent to the ceasing entry shown above.

SIGNATURE

DATE
 DAY MONTH YEAR
 / /

END FORM