

# Third party authority form



## AVOID PROCESSING DELAYS

We make important changes to our forms at times. Check you're using the latest version by comparing the issue date at the bottom of this page with the version at [unisuper.com.au/forms](http://unisuper.com.au/forms).

## Important information

This form allows you to authorise us to provide information about your UniSuper account to the person/s you nominate, such as:

- your attorney (under a Power of Attorney)
- your accountant
- your financial adviser
- your guardian
- your spouse or a family member
- your union representative, or
- the Public Trustee.

By signing this form you authorise the nominated person/s to have access to information about your UniSuper account for a period of **24 months** from the date this form is signed. The authority won't take effect until we've received your completed form.

The nominated person/s won't be authorised to change your personal contact details, give any instructions or make any transactions on your behalf, including switching investment options, making contributions, requesting a rollover or making lump-sum withdrawals. Personal information such as your TFN and financial institution account details won't be released to the nominated person/s under any circumstances.

You can cancel your authority at any time before the end of the **24 month** period by providing written notice to the Trustee. This will take effect when we receive your notice.



## DID YOU KNOW

You have exclusive access to expert UniSuper financial advisers who can help with managing your retirement savings.

You can get over-the-phone advice or meet with an adviser in person for a more comprehensive discussion about your finances.

Call UniSuper Advice on **1800 823 842** to find out more.

## Privacy information

UniSuper recognises the importance of protecting your personal information and is committed to complying with its privacy law obligations. For more information on how we collect and manage your information please refer to the Privacy statement at the end of this form.

## SECTION 1 — Member details

 Please use **BLACK** or **BLUE BALLPOINT PEN** and print in **CAPITAL LETTERS**. Cross where required **X**

UniSuper member/pension number

If you're unsure of your member number, refer to your most recent UniSuper correspondence or call us on **1800 331 685**

Title Mr  Mrs  Ms  Dr  Professor

Other

Surname

Given name

Date of birth (DDMMYYYY)

If you've changed your personal details (i.e. residential address and email address) since you last contacted us, please update your details by:

- logging in to your account at [unisuper.com.au](http://unisuper.com.au).
- completing a *Change of details form* (available from [unisuper.com.au](http://unisuper.com.au)) or
- give us a call on **1800 331 685**.

What number can we call you on if we have a question regarding this form?

form continues →



## SECTION 2 — Third party details

Title Mr  Mrs  Ms  Dr  Professor

Other

Surname

Given name

Company name *(if nominated person is your accountant or financial adviser)*

I authorise UniSuper to release information about my UniSuper account to any staff member of the above company.

Contact number *(during business hours)*

(   )

Signature of nominated person

Date *(DDMMYYYY)*

Relationship to member *(select one box)*

attorney (under a Power of Attorney)

accountant

financial adviser  AFSL<sup>^</sup>

guardian

the Public Trustee

spouse or family member

union representative

other (please specify)


<sup>^</sup>You must provide an Australian Financial Services Licence number if you choose financial adviser.

## SECTION 3 — Before you sign

Did you know that:

- If you transfer the balance of your account to another super fund, any insurance cover you have through UniSuper will cease?
- We have a number of options to suit your retirement needs? See our range of pension options, including a transition-to-retirement (TTR) option, at [unisuper.com.au](http://unisuper.com.au).
- This authority will only last for **24 months**, unless you cancel it earlier (see Section 4 below)?

## SECTION 4 — Member declaration and signature

 Please read this declaration before you sign and date your form.

- I declare that the information I have provided on this form is true and correct.
- I authorise UniSuper to release information about my UniSuper account to the person nominated in Section 2 of this form or any staff of the nominated company, if I've authorised this in Section 2.
- I acknowledge that:
  - this authority will remain in effect for a period of **24 months** from the date I sign this form unless revoked by me on an earlier date, and
  - I can revoke my authority at any time before the end of the **24 month** period by notice in writing to UniSuper.
- I understand that this authority will not allow the nominated person to change my personal details or carry out any transactions on my behalf.
- Any AFSL provided for a financial adviser must be valid. If it lapses, this third party authority will be void.
- I acknowledge that UniSuper is not responsible for any loss or delay which results from UniSuper providing information to my nominee.
- I agree to release, discharge and indemnify UniSuper from and against all action, claims, demands, expenses and liabilities which I suffer or which are suffered by or brought against UniSuper as a result of any information released to the nominated person by UniSuper.
- I consent to my personal information being used in accordance with UniSuper's Privacy Policy.

Signature

Date *(DDMMYYYY)*

## Privacy statement

We recognise the importance of protecting your personal information and are committed to complying with our privacy law obligations.

We collect your personal information to administer your account, ensure you're eligible for insurance cover, provide you with UniSuper membership benefits, services and products, verify your identity and improve our products and services. You consent to our collecting sensitive information about you, where collecting that information is reasonably necessary for us to perform one or more of our functions or activities. We usually collect personal and sensitive information directly from you, however, it may also be collected from third parties, such as your employer.

We may also collect this information from you because we're required or authorised by or under an Australian law or a court/tribunal order to collect that information.

If you don't provide this information, we may not be able to administer your account, provide you with a product or service or you may be disadvantaged in some other way.

We may disclose your information to any service provider we engage (for example mail-houses, auditors, insurers, actuaries, lawyers and research consultants) to carry out or help us provide your membership benefits, services and products. This includes overseas entities. The countries we may disclose personal information to are Japan, Canada and the United States of America. Where information is transferred overseas, we'll seek to ensure the recipient of the data has security systems to prevent misuse, loss or unauthorised disclosure in line with Australian laws and standards.

Our Privacy Policy contains information about how you can access any personal information we hold, how to correct your information and how to make a complaint about a breach of the Privacy Act. It's available at [unisuper.com.au](https://www.unisuper.com.au) or by calling us on **1800 331 685**.



### FURTHER INFORMATION

If you need further information:

- call us on **1800 331 685**, or
- visit our website at [unisuper.com.au](https://www.unisuper.com.au)



### RETURN YOUR FORM TO:

- UniSuper, Level 1, 385 Bourke Street, Melbourne Vic 3000
- [enquiry@unisuper.com.au](mailto:enquiry@unisuper.com.au), or
- Fax to 03 8831 6141