

## Important Information

# Nominating a Beneficiary

### Who will get your benefit if you pass away?

In the event that you die without a valid binding death benefit nomination in place, EISS Super (the Trustee) will be required to exercise its discretion and pay your Basic Benefit Other Contributions (OC) account to your estate or to any one or more of your Dependants, or proportions to each of them depending on the circumstances.

A binding death benefit nomination is a binding direction from you to the Trustee to pay any death benefit to your estate or to one or more Dependants nominated by you and in the proportions that you have specified.

If you make a binding death benefit nomination and it is still valid and in effect at the event of your death, the Trustee will be bound to follow it and pay your Basic Benefit OC account to your estate or the Dependants you have nominated and in the proportions specified by you.

**For the Defined Benefit Scheme, a binding nomination only applies to your Basic Benefit OC account.**

### Definition of a Dependant

The persons you nominate must be your 'Dependant' or legal personal representative (LPR), that is, the executor or administrator of your estate.

#### 'Dependant' is defined as:

- your spouse as defined in the relevant legislation which generally includes:
  - your husband or wife;
  - another person (whether of the same sex or not) with whom you are in a registered relationship;
  - another person who, although not legally married to you, lives with you on a genuine domestic basis in a relationship as a couple.
- your children as defined in the relevant legislation which generally includes:
  - your adopted child, step-child, or ex-nuptial children;
  - your spouse's child;
  - someone who is a child of you within the meaning of the Family Law Act 1975.
- any other person who the Trustee considers is wholly or partially dependent on you at the time of death; and
- any person you have an interdependency relationship with.

#### Two people have an interdependency relationship if:

1. they have a close personal relationship;
2. they live together;
3. one or each of them provides the other with financial support; and
4. one or each of them provides the other with domestic support and personal care.

An interdependency relationship will also exist between two people if they have a close personal relationship but do not meet the other criteria as listed above (2, 3 & 4) because either or both of them suffer from a physical, intellectual or psychiatric disability.

Any amounts paid to your LPR would be distributed according to your will, or if you don't have a will, according to the laws of the State in which you resided at the date of your death.

### What you should know about your binding death benefit nomination

You can change your binding death benefit nomination at any time. As your personal circumstances change, it's important to remember to keep your nomination up-to-date.

#### A binding death benefit nomination will be invalid if:

- it is not made using this 'Binding Nomination' form;
- this 'Binding Nomination' form has not been properly completed (for example, the nominated proportions are not clear or do not equal 100%, or the form has not been signed and witnessed correctly);
- at the time of your death, one or more of the persons nominated by you have died or are not your Dependant or LPR;
- you were legally incapable of making the nomination; or
- the Trustee is legally restrained or prohibited from paying your benefit payout to one or more of the persons nominated by you.

Binding death benefit nominations cease to have effect after a period of three (3) years from the date you sign your nomination, unless revoked by you earlier. It would also cease to have effect if you are subject to a Court Order at the time of your death that prohibited you from making a binding death benefit nomination or required you to amend or revoke a nomination, or if (and for so long as) the Trustee is prevented from paying out your death payout in accordance with your nomination due to Family Law.

## Defined Benefit Scheme

# Binding Nomination form

### About this form

Please complete this form to make a new binding nomination or change your existing binding nomination for your Defined Benefit Scheme Basic Benefit Other Contributions OC account. Remember, a beneficiary must be a dependant or Legal Personal Representative (see Important Information).

To make or amend a binding nomination you must complete this form in full and sign and date it in the presence of two (2) witnesses. Witnesses must be at least 18 years of age and neither of them can be nominated within this form. Each witness must also sign and date the form on the same day you sign the form in Step 4.

If you have more than one account with EISS Super, please complete a separate form for each account.

As the Trustee can only accept a binding beneficiary nomination with your original signature, you must print, sign in the presence of two (2) witnesses over 18 years old who are not nominated as a beneficiary and return this form to EISS Super.

### We're here to help

If you need assistance completing this form, you can call us on 1300 369 901, Monday to Friday from 8am to 8pm (AEST).

Please complete all sections of this form as applicable, sign and return the completed form to:  
EISS Super GPO Box 7039, Sydney, NSW 2001.

## Step 1. Your personal details

We will use this information to verify your membership in the Defined Benefit Scheme.

Member Number

Mr / Mrs / Ms / Miss / Other

Given name(s)

Surname

Date of birth   /   /

Residential address (must be advised)

Suburb

State

Postcode

Postal address (if different from above)

Suburb

State

Postcode

If we have any questions about this form we will contact you on the details you provide below:

Telephone

Mobile

Email

You can change your personal details online by logging into your account at [eisuper.com.au/login](https://eisuper.com.au/login) or you can call us on 1300 369 901.

## Step 2. Nominate your beneficiaries

Select one option ✓

- I would like to make a binding nomination that will revoke and replace any existing nomination. Please complete this section by providing your new nominee details below and ensure your signature is witnessed.
- I would like to revoke and not replace my existing binding nomination. You do not need to complete the rest of this section, please go to Step 3 to sign and date this form. No witnesses are required.

In the event of my death, I nominate that my superannuation death benefit be paid as follows:

### Name of First Beneficiary

Relationship to you (please select one):

- Spouse  Child  Financial Dependant  Interdependency Relationship  Legal Personal Representative

Address

Suburb

State

Postcode

Date of birth   /   /

Proportion of payout  %

### Name of Second Beneficiary

Relationship to you (please select one):

- Spouse  Child  Financial Dependant  Interdependency Relationship  Legal Personal Representative

Address

Suburb

State

Postcode

Date of birth   /   /

Proportion of payout  %

### Name of Third Beneficiary

Relationship to you (please select one):

- Spouse  Child  Financial Dependant  Interdependency Relationship  Legal Personal Representative

Address

Suburb

State

Postcode

Date of birth   /   /

Proportion of payout  %

## Step 2. Nominate your beneficiaries (continued)

### Name of Fourth Beneficiary

Relationship to you (please select one):

Spouse  Child  Financial Dependant  Interdependency Relationship  Legal Personal Representative

Address

Suburb

State

Postcode

Date of birth   /   /

Proportion of payout  %

**Total of your nomination(s):**  %

## Your privacy is important to us

We are required to comply with relevant privacy laws. The personal information that we collect is used to process your application, administer your account(s), provide you with services and conduct research about how to improve our services and products. Unless required or authorised by law, we will only provide your personal information to authorised service providers who use the information to administer the Fund and provide services on our behalf.

The EISS Super Privacy Policy is available to view at [eisuper.com.au/privacy](https://eisuper.com.au/privacy) or you can obtain a copy by contacting us on 1300 369 901.

## Step 3. Sign the form

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

### I understand that this binding nomination will only be valid if:

- at the date of my death, each of the beneficiaries listed on this form is a person I can nominate, as listed in the 'Important Information' section 'Definition of a Dependant' at the beginning of this form; and
- I have provided all the details requested for each nominated beneficiary in Step 2;
- the total of my nominations equals 100%; and
- it is signed by me in the presence of two witnesses, who are 18 years of age or older, and who are not listed as beneficiaries on this form.

### Step 3. Sign the form (continued)

#### I also understand that:

- this binding nomination form is only valid and effective for up to three (3) years from the date it is signed or last confirmed, and that it must be received by EISS Super before my death;
- my beneficiaries and I will be bound by the provisions of EISS Super's Trust Deed;
- I can amend or revoke this binding nomination at any time by completing a new binding nomination form and returning it to EISS Super;
- the binding nomination binds the Trustee to distribute my benefit as I have specified, unless the binding nomination is invalid or superannuation law requires otherwise. Where the nomination is invalid, I understand that the Trustee may exercise its own discretion in determining the beneficiaries of my death benefit under EISS Super's Trust Deed;
- EISS Super accepts no responsibility for either the correct nomination of beneficiaries or the completion of this form;
- the information provided within this form will be used by the Trustee to contact those nominated to determine whether they are still my dependants and/or Legal Personal Representative at the time of my death;
- this form revokes any prior binding or non-binding beneficiary nomination(s) I may have; and
- I consent to my information being collected, disclosed and used in the manner set out in this form.

Member Signature

X

Date

D D / M M / Y Y Y Y

Sign here

### Step 4. Witness declaration

#### First Witness (insert full name)

I,

declare that the member signed this binding nomination form in my presence, I am over 18 years of age and I am not listed as a beneficiary on this form.

Witness Signature

X

Date

D D / M M / Y Y Y Y

Sign here

#### Second Witness (insert full name)

I,

declare that the member signed this binding nomination form in my presence, I am over 18 years of age and I am not listed as a beneficiary on this form.

Witness Signature

X

Date

D D / M M / Y Y Y Y

Sign here

**As an original signature is required, this form must be printed, signed and returned to:**

EISS Super  
GPO Box 7039,  
Sydney, NSW 2001.