

New South Wales Electrical Superannuation Scheme

Pension Change of my Membership Details



Important: Section 1, Personal Details, and Section 8, Declaration, must be completed in addition to your required changes in Sections 2 to 7.

Please complete this form in **black** ink using **BLOCK** letters.

Once completed please return to:

NESS Locked Bag 5042 Parramatta NSW 2124

Section 1: Personal Details

If you are advising a change of name in Section 3, for this section, please use the name currently recorded in NESS.

NESS Pension Member Number	Date of Birth (DD/MM/YYYY)	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>
(Please provide certified Proof)		
Mr/Mrs/Ms/Miss	Surname	
<input type="text"/>	<input type="text"/>	
Given Names		
<input type="text"/>		

Section 2: Change to Contact Details

Residential Address			
Street Number	Street Name		
<input type="text"/>	<input type="text"/>		
Suburb / Town	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Postal Address (only if different from above)			
PO Box Number			
<input type="text"/>			
Suburb / Town	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Telephone (Home)	(Mobile)		
<input type="text"/>	<input type="text"/>		
Email			
<input type="text"/>			

Trustee: New South Wales Electrical Superannuation Scheme Pty Ltd ABN 28 003 156 812 (RSE Licence No. L0000161) as trustee of the New South Wales Electrical Superannuation Scheme ABN 72 229 227 691 (RSE Registration No. R1000115) Australian Financial Services Licence No. 238945 **Freecall:** 1800 022 067 **Fax:** (02) 8837 5422 **Email:** nessadmin@aes.com.au **Web:** www.nesssuper.com.au

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Section 3: Change of Name

Please provide a certified copy of your Marriage certificate, Deed Poll certificate etc to verify your change of name.

Mr/Mrs/Ms/Miss

New Surname

New Given Names

Date of Name Change (DD/MM/YYYY)

Old Signature



New Signature



Section 4: Change of Pension Payments

Complete this section if you would like to change the value or the payment frequency of your pension.

A change in payment frequency will be effective from the first pension payment following receipt of your form, only if your form is received at least 5 working days, prior to the pension payment date. If received outside of this period, the change in payment frequency will be effective from the second payment following receipt of the form.

Pension Payment Amount

Minimum Pension

Maximum Pension

Nominated Pension \$

per payment frequency

Pension Frequency

Monthly (Paid on 16th of each month)

Quarterly (Paid on 16 January, 16 April, 16 July and 16 October)

Half Yearly (Paid on 16 January and 16 July)

Yearly pension payment frequency (Paid on 16 June)

Section 5: Change of Banking Details

Please provide the details of the new bank, building society or credit union account into which you would like your pension payments to be made. A change in banking details will be effective from the first pension payment following receipt of your form, only if your form is received at least 5 working days, prior to the pension payment date. If received outside this period, the change will be effective from the second payment following receipt of the form.

Account Name (must be in your name or a joint account with you and another person)

Bank/Building Society/Credit Union Name

BSB

Account Number

Section 8: Declaration

I declare that:

- Where I have made an Investment choice that:
 - I have read the investment section of the current NESS Pension Product Disclosure Statement (PDS).
 - I acknowledge that NESS cannot give me investment advice. It is therefore recommended that I seek advice from a licensed financial adviser.
 - I understand that if my choice(s) do not total 100% or if this form is unsigned or is classified as invalid, it will not be processed.
 - I understand that the material contained in the NESS Pension PDS is only a general summary of investment issues.
 - I understand that if my investment choice nomination is received by the 20th day of the month, it will be effective from the 1st day of the following month.
 - I understand that if more than 1 investment choice nomination is received from me in a month then only the last form received in that month will be actioned.
- I have read and understand the NESS Privacy Statement at page 24 in the Pension PDS and agree that the Trustee may use my personal information for the purposes described.
- Where a new beneficiary nomination has been provided, all previous nominations are no longer valid.
- All information supplied by me in this form and any additional information attached to this form is true and correct.

Signature



Date (DD/MM/YYYY)

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