Office use only



Pension plan change of payment details form.

October 2021

Complete this form to change how much you receive from your Hostplus Pension plan account, how often you receive it and/or your bank account details.

This form must be completed in full. Please use BLOCK letters and dark ink. Complete all fields marked with an asterisk (*).

Provide your existing member details. * Mandatory fields Pension plan membership number Date of birth* Title Other Mr Mrs Ms D Given names* Surname* A/H phone number* B/H phone number* Mobile phone* Current address* Suburb State P/C Email address*

Your privacy

Hostplus is seeking to collect personal information from you so we may identify and update your pension account on an ongoing basis. The personal information we are seeking to collect from you is your name, address, date of birth, contact details and your bank account details. We need to collect the requested personal information from you for the purposes of processing your pension payment or pay benefits to you. If you do not provide this information, we will be unable to update your details.

The Hostplus privacy policy is available on the Hostplus website at **hostplus.com.au/privacy** and includes information about overseas disclosure of personal information, how you may access and seek correction of your personal information as well as how you can make a complaint about a breach of your privacy.

Hostplus usually discloses your personal information to our administrator Australian Administration Services (AAS), mail houses and the ATO. Australian Administration Services (AAS) may disclose your personal information to overseas recipients. Please see the Australian Administration Services (AAS) Privacy Policy at www.aas.com.au/privacy-policy.html for further information.

2	Provide your new details (if required).			
	Change my payment amount to: The standard minimum amount allowed under government legislation. OR			
	Maximum amounts (this option is only for members who are between preservation age and 64, working and choosing the Transition to Retirement facility).			
	OR			
	a new selected amount: Annual \$			
	OR per payment \$,, ,,, ,, ,, ,,, , ,, , ,, , , , , , , , , , , , , , , , , , , ,			
3	Select your new payment frequency (if required).			
	Change my payment frequency to:			

Fortnightly Monthly Quarterly	Half-yearly	Yearly				
For monthly payments, please choose the starting date						
15th of each month OR End of month	Starting month for payment					

Your payment nominations will remain in place until you advise us in writing to change them.

4 Provide your new bank account details (if required).

Change my bank account to:								
Name of bank, building society or credit union*								
Branch address*								
Suburb	State P/C							
Name account is held in*								
BSB number*	Account number*							

Please supply a copy of your bank statement verifying that the above listed bank account is in your name or if held jointly, you must be one of the account holders.

- I declare that I am the Hostplus Pension plan member whose details appear on this form.
- Confirm that the details I have supplied are correct and request Hostplus to pay the benefit as requested and in accordance with the provisions of the trust deed (subject to any preservation requirements that might apply).
- Consent to Hostplus collecting, using, storing and disclosing the information supplied by me for the purposes of administering my membership in accordance with the Hostplus privacy policy.*
- Acknowledge that Hostplus may require additional proof of identity in certain circumstances under the AML/CTF Act 2006.
- Changes in this form are binding and irrevocable until I make future changes.
- Understand that if I do not provide you with the information requested in this form, you may not be able to accept or carry out my requests or instructions.
- * Your personal information will not be used or disclosed for any other purpose without your consent, except where required by law. You are able to gain access to this information.

For more information on privacy or to obtain a copy of our privacy policy, visit hostplus.com.au or call 1300 348 546.

Signature of applicant*	
	Date*

Faxed or scanned forms cannot be processed. However photocopied forms can be processed if signed with an original signature.

It is important that you answer all questions on this form. In confidence when completed.

On completion, please send your original application (no stamp required) to: Hostplus Pension, Locked Bag 5046, Parramatta NSW 2124.

Issued by Host-Plus Pty Limited ABN 79 008 634 704, AFSL 244392 as trustee for the Hostplus Superannuation Fund (the Fund) ABN 68 657 495 890, MySuper No 68 657 495 890 198. This information is general advice only and does not take into account your personal objectives, financial situation or needs. You should consider if this information is appropriate for you in light of your circumstances before acting on it. Please read the relevant Hostplus Product Disclosure Statement (PDS), available at hostplus.com.au before making a decision about Hostplus. For a description of the target market, please read the Target Market Determination (TMD), available at hostplus.com.au. 1195.110/21ISS4