



# Nomination of Beneficiary AIA Superannuation Fund

## 1. Life Insured Details

Name of Life Insured ..... Proposal/Policy No. ....

Address .....

..... Suburb ..... State ..... Postcode .....

Date of birth ...../...../..... Telephone ..... Email .....

## 2. Nominated Beneficiaries

I, the Life Insured wish to:  make a new nomination. **Please indicate whether this nomination is**

amend an existing nomination with all prior nominations being revoked.  Non-Lapsing Binding  Non-Binding

(this includes amending my nomination from non-binding to binding) (see over for more information)

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**A. Beneficiary** Surname ..... First name .....

Address .....

Suburb ..... State ..... Postcode .....

Date of birth ...../...../..... Relationship to Life Insured ..... Percentage of benefit ..... %

(ie: spouse, child, other financial dependant)

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**B. Beneficiary** Surname ..... First name .....

Address .....

Suburb ..... State ..... Postcode .....

Date of birth ...../...../..... Relationship to Life Insured ..... Percentage of benefit ..... %

(ie: spouse, child, other financial dependant)

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**C. Beneficiary** Surname ..... First name .....

Address .....

Suburb ..... State ..... Postcode .....

Date of birth ...../...../..... Relationship to Life Insured ..... Percentage of benefit ..... %

(ie: spouse, child, other financial dependant)

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**D. Beneficiary** Surname ..... First name .....

Address .....

Suburb ..... State ..... Postcode .....

Date of birth ...../...../..... Relationship to Life Insured ..... Percentage of benefit ..... %

(ie: spouse, child, other financial dependant)

*(must equal 100%)* **TOTAL** \_\_\_\_\_

## 3. Signature

**Important Notice: The policy terms and conditions applicable to the nomination of beneficiaries are set out in your policy document. Please carefully read and understand the terms and conditions before completing this form.**

I acknowledge that I have read the important information section overleaf and agree to these conditions.

Signature of Life Insured ..... Date ...../...../.....

## 4. Witness Signatures – Declaration and Statement by Witnesses

Only complete this section if the Life Insured wishes to make a binding nomination. We declare that this form was signed by the Life Insured in our presence. We state that we are each over 18 and that we are not nominated as a beneficiary on this form.

| Signature of Witness A | Date signed       | Signature of Witness B | Date signed       |
|------------------------|-------------------|------------------------|-------------------|
| .....                  | ...../...../..... | .....                  | ...../...../..... |
| Name                   | Date of birth     | Name                   | Date of birth     |
| .....                  | ...../...../..... | .....                  | ...../...../..... |

## Binding Nomination

If you provide a valid non-lapsing binding nomination to the Trustee, the Trustee must pay the death benefit in accordance with your nomination as long as the person that you nominate to receive the benefit (or a share of the benefit) is eligible to receive it at the date of your death and the nomination is valid.

A non-lapsing binding nomination is valid for the entire term you are a member, unless another nomination is lodged with the Trustee or this nomination is revoked by you.

If anyone you nominate is not entitled to receive a share of your benefit, the Trustee has discretion in deciding who will receive the remaining portion of your benefit.

Some conditions apply to non-lapsing binding nominations. They are:

- To be a valid non-lapsing binding nomination it must be signed by you in the presence of two witnesses who must each sign and date the declaration where indicated and set out their full name and date of birth.

**Each witness must be over 18 years of age and must not be one of your nominated beneficiaries;**

- A nomination is effective only when it is received by the Trustee;
- A non-lapsing binding nomination is valid from the day after it was first signed by you, or last confirmed or amended by you;
- You may revoke or change your nomination at any time by completing a fresh, valid Nomination of Beneficiary form and lodging it with the Trustee. You may also change your nomination from binding to non-binding at any time;
- An invalid non-lapsing binding nomination will be treated as a non-binding nomination by the Trustee but will not revoke or replace an existing, valid non-lapsing binding nomination; and
- The Trustee will contact you if your nomination is clearly invalid (completed incorrectly) and will give you the opportunity to re-submit a valid nomination.

## Non-binding Nomination

If you provide a non-binding nomination to the Trustee, the Trustee will take your wishes into account, along with all other available information, but has complete discretion in deciding who will receive the benefit payable from the Fund on your death. The Trustee may pay the death benefit to one or more of your dependants or a person who is in an interdependency relationship with you in whatever shares the Trustee decides or may pay it to your legal personal representative to be distributed as part of your deceased estate.

Some conditions apply to non-binding nominations. They are:

- A non-binding nomination does not need to be witnessed to be a valid nomination;
- A nomination is effective only when it is received by the Trustee;
- A non-binding nomination is valid for the whole time that you are a member of the Fund, unless you lodge another valid nomination with the Trustee;
- You may revoke or change your nomination at any time by completing a fresh, valid Nomination of Beneficiary form and lodging it with the Trustee. You may also change your nomination from non-binding to binding at any time.

| Eligible beneficiaries                          |   |
|---|---|
| <b>Dependants</b>                               | Your spouse (which includes a de facto spouse and certain same-sex partners) and children (including certain children of same-sex partners). For this purpose, 'spouse' means: <ul style="list-style-type: none"> <li>a person to whom you are legally married;</li> <li>a person (whether of the same or a different sex) who, although not legally married to you, lives with you on a genuine domestic basis in a relationship as a couple (de facto); or</li> <li>a person (whether of the same or a different sex) with whom you are in a relationship that is registered under a relevant law of a State or Territory.</li> </ul> <ul style="list-style-type: none"> <li>Another person who is financially dependent on you.</li> </ul> |
| <b>Legal Personal Representative</b>            | The person acting as executor or administrator of your deceased estate.<br><br>If paid to your legal personal representative, a death benefit will form part of your deceased estate and be distributed according to your Will (or the laws of intestacy if you don't have a valid Will).   |
| <b>People in an Interdependent relationship</b> | An interdependent relationship will exist if you and other person: <ul style="list-style-type: none"> <li>have a close personal relationship;</li> <li>live together; and</li> <li>one (or both) of you provides the other with financial support, domestic support and personal care.</li> </ul> This may include same-sex couples, live-in adult carers of elderly parents and siblings with common finances.<br><br>Note: Where you have a close personal relationship and either or both of you suffer from a physical, intellectual or psychiatric disability, the other requirements for an interdependent relationship do not apply.   |

Pursuant to the terms of the AIA Superannuation Fund trust deed, by making a non-lapsing binding death benefit nomination, you enter into an agreement with The Trust Company Ltd the trustee of the AIA Superannuation Fund, which will be taken to override any direction you previously gave to the trustee in relation to a binding death benefit nomination.