

Lump Sum Payment Service

By completing this form, you will provide all the information we need in order to *document* a lump sum payment from a self managed superannuation fund. As part of our service, we:

- review the Trust Deed to ensure that no changes are required in order to pay the lump sum;
- prepare all relevant letters, minutes, declarations etc for signing by the relevant parties;
- calculate the amount of Pay-As-You-Go Withholding tax that the Fund needs to withhold in relation to the lump sum (if any); and
- complete the statutory form – PAYG Payment Summary – superannuation lump sum. We will also complete the form to register the Fund for Pay-As-You-Go Withholding tax (if required).

Note that this is a documentation service only. If you need calculations performed in order to calculate the Crystallised Segment result please refer to our Crystallised Segment Calculation Service form (additional fees apply for this service). We are also able to provide **advice** on benefit structuring given the member's circumstances – we hold our own Australian Financial Services Licence (covering the full range of superannuation issues) and have significant expertise in superannuation pensions. Please do not hesitate to contact one of our consultants if you wish to explore this service.

The cost of this service is **\$220** (including GST). Add \$110 (including GST) for each additional set of lump sum payment documents requested for the fund at the same time. Please see payment options below.

Please note that the Fund's accountant/administrator will need to attend to the following:

- remit PAYG Withholding tax (if required) with the Fund's quarterly Instalment or Business Activity Statement; and
- complete an Annual PAYG Payment Summary Statement for the Fund (if required).

Confirmation and Acceptance of Terms

I confirm that the information on this form is correct and I have completed the payment details below. *Please note that payment must accompany all requests* (an invoice will be provided in due course).

Name & Signature:

Invoice in the name of:

Payment Details

Please find a cheque attached

A Direct Debit agreement is in place in the name of:.....

Account Holder's Signature:

Please charge the following credit card:

MasterCard Visa **Amount:**.....

Cardholder's full name:

Card Number: _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _ Expiry Date: _ _ / _ _

Cardholder's Signature:

Documents to Attach

Full copy of the Fund’s current Trust Deed.

Section A: Contact Details

Person Ordering the Service – documents will be forwarded to this person.

Name:

Name of Firm:

Postal Address:

Contact Number: Fax:

Email:

Section B: Fund and Trustee Details

Name of Fund:

TFN: ____/____/____ ABN: ____/____/____/____

Is the Fund already registered for PAYG Withholding? Yes/No

Please Indicate Trustee Type

Corporate Trustee:

Company Directors:

Individual Trustees:

Section C: Member Details – If there is more than one lump sum payment please copy this page.

Title: Mr/Mrs/Miss/Ms/Dr Sex: Male/Female

First Name: Surname:

Street Address:

Date of Birth:...../...../.....Eligible Service Date:...../...../.....TFN:.....

On what basis can the member make the withdrawal:

they have sufficient unrestricted non-preserved monies; or

they have met the following condition of release:

65 years of age or over

terminated an employment relationship after age 60

reached preservation age and have permanently retired

Section D: Lump Sum Payment Details

Payment Date:/...../.....

Lump Sum Payment Components:

- Tax Free Component _____
- Taxable Component _____
- TOTAL \$ _____