# ING Ы Living Super Appointment of representative details form

## About this form

This form is to provide details to Diversa Trustees Limited as the trustee of Living Super, a sub-plan of OneSuper (Diversa), of the person/s that you authorise to act and/or enquire on your Living Super account/s (appointed Representative/s). If you wish to appoint a representative on your ING account/s, you will need to complete a separate "Appointment of representative" form available from the ING website.

When completing this form please: • use CAPITAL letters • mark boxes with an X where applicable • use black pen.

## **Return to:**

When this form has been completed and signed, please send it along with the identification document (see Step 3 and Appendix A) to us at:

Living Super Reply Paid 93910 MELBOURNE VIC 3001 (no stamp required)

Scanned certified copies of documents can be emailed to: livingsuper@onesuper.com.au

## Step 1: Your ING details (to be completed by the account holder/s)

Account number 1		
Living Super account number	Date of birth (	(DD/MM/YYYY)
		/ Mr Mrs Ms Other
First name	Middle name	Surname
Place of birth	Country of birth	Nationality
Account number 2 (if applicable)		
Living Super account number	Date of birth (	(DD/MM/YYYY)
		/ Mr Mrs Ms Other
First name	Middle name	Surname
Place of birth	Country of birth	Nationality

# Step 2: Authority requested (to be completed by the account holder)

## a) Appointment of representative/s

This Authority authorises an appointed Representative/s to obtain information held in relation to your Living Super account/s. Your appointed Representative cannot transact on or alter the details of your account/s.

## b) Cancellation of existing authorities

No

## This form cannot be processed unless you tick one of the boxes below.

I/We want this authority to replace and cancel any existing authorities previously given by me/us in relation to the account/s provided above.







# Certified identification for the representative must be provided, see page 5 for further details.

# **Representative 1**

Mr Mrs Ms	Other	Mr Mrs Ms Ot	her		
First name	Middle name	First name	Middle name		
L					
Surname		Surname	Surname		
Mandatory security		Mandatory security deta	ails		
Date of birth (DD/MM/YYYY)		Date of birth (DD/MM/YYY)			
Place of birth	Country of birth	Place of birth	Country of birth		
Nationality		Nationality	Nationality		
Mother's maiden name (mother's original surname/family name)		Mother's maiden name (mother's original surname/family name)			
Residential address	(DO Down out and the d)	Residential address (PO B			
Unit number	Street number	Unit number	Street number		
Street name		Street name			
Suburb		Suburb			
State	Postcode	State	Postcode		
Contact details (You must provide at least one phone number)			Contact details (You must provide at least one phone number)		
Mobile phone numbe	9r	Mobile phone number			
Other phone pumbe	r (for landline, please provide area code)	Other phone number ther	landline, please provide area code)		
	(or tandine, please provide drea code)		tandine, picase provide died code,		
Email		Email			

Representative 2 (if applicable)

Each appointed representative must supply an original ink or scanned certified identification document. Please refer to appendix A.



#### Step 4: Representative/s declaration (to be completed by your appointed Representative/s)

By signing below, I/We declare that:

- a) The personal information and security details provided above are true and correct and I/we authorise Diversa to verify this information;
- b) I/We have read the terms to operate contained in this form, as appropriate; and
- c) I/We have read the Privacy Policy referenced in appendix B of this form as appropriate and I/we consent to my/our personal information being collected, used and disclosed in the manner and for the purposes set out in the Privacy Statement and Privacy Policy.

## Note: Signatures must be signed in original ink with the form scanned as an attachment if sending via email.

#### **Representative person 1**

Representative person 2 (if applicable)

Signature of representative 1 (E-Signatures not accepted)	Signature of representative 2 (E-Signatures not accepted)		
Date (DD/MM/YYYY)	Date (dd/mm/yyyy)		

## Step 5: Account holder/s declaration (to be completed by the account holder/s)

By signing below:

- 1. I am giving the appointed representative/s authority to obtain information on my account/s in accordance with the terms to operate.
- 2. I declare that:
  - a) I confirm that each person appointed on this form is at least 18;
  - b) I authorise the person/s described in Step 3 as my/our appointed representative/s;
  - c) This appointment is made in accordance with, and subject to, the terms to operate contained in this form; and
  - d) I confirm that I have read and accepted the terms to operate contained in this form.
- 3. I also understand that if the appointed representative abuses any of their powers under this authority, I may suffer loss. I have considered the need to seek advice from a lawyer or a financial counselor before signing.

## Note: The signature must be signed in original ink with the form scanned as an attachment if sending via email.

## Account holder

Signature of account holder (E-Signatures not accepted)

Date (DD/MM/YYYY)		
1 1		



## Terms to operate

#### Authority of appointed Representative

By appointing a Representative, I will be giving the appointed Representative the authority to obtain information Diversa holds in relation to my nominated account/s. The appointed Representative cannot transact on or alter the details of the account/s.

#### Liability for dealings by appointed representative

I will be liable for any dealing with an account within the terms of this Authority, or any failure by the appointed Representative to comply with the terms of an account, as if that dealing or failure to comply were by me.

I will ensure that the appointed Representative has the opportunity to read the terms and conditions of the relevant account/s as stated in the Product Disclosure Statement (PDS) and Product Guide and complies with all obligations imposed on me under the terms and conditions of the account.

In the event of a conflict between this Authority and the account terms and conditions, the account terms and conditions will prevail.

#### Instructions given under authority

ING has the right to delay, or seek further information, before acting on any instructions purporting to be given under this Authority. However, ING is not obliged to seek further information or make any enquires in connection with any such instruction. ING may take any instruction purported to be given under this Authority on face value. ING has the right to refuse to act on any instructions understood to be given under this Appointment.

#### **ING's liability limited**

To the maximum extent permitted by law, neither Diversa nor ING Bank (Australia) Limited (ING) is liable for any loss or damage which may be suffered or incurred by me, or which may arise in connection with Diversa acting on this Authority, except to the extent that the negligence, wilful default or fraud of Diversa or ING contributes to that loss or damage. Nothing in this Authority excludes any liability that cannot by law be excluded. Where any term or condition imposing liability is implied through the operation of any law, and that term or condition cannot be excluded, liability of Diversa or ING under that term or condition will be limited to, at Diversa's election:

(a) Providing the services again; or

(b) Paying a sum equivalent to the fees charged for providing the services.

#### Cancellation of this authority by Diversa

Diversa may cancel, or vary the terms of this Authority, by prior written notice to me and the appointed Representative.

#### Cancellation of this authority by the account holder

I can cancel this Authority by giving Diversa written notice from me cancelling this Authority. The notice must be sent to Living Super, Reply Paid 93910 Melbourne VIC 3001. This Appointment is not cancelled until Diversa receives and processes the notice. Diversa will use its best endeavours to process the notice in a reasonable time frame and in any event no longer than 5 Business Days after it receives the notice.



#### Appendix A: Identification document and certification

#### **Identification Documents**

You need to choose either 1 document from List A or two documents from List B. Please note the certified copies will not be returned. The documents must verify the following details:

- List A: Your full name and DOB
- List B: A combination of your full name and DOB and your full name and residential address

#### List A

- Australian Driver's Licence (must be current, show current residential address and photograph)
- Australian Passport (either a current passport or a passport that expired within the last 2 years)
- Proof of Age Card/NSW Photo Card (must be current and show date of birth and photograph)
- International Passport or Driver's Licence front and back of document (current, containing a photograph and a signature and accompanied by a translation from a Professional Translator accredited by the National Accreditation Authority for Translators and Interpreters if not in English)
- Current foreign National Identity Card issued for the purposes of identification - front and back of document (current, containing a photograph and a signature and accompanied by a translation from a Professional Translator accredited by the National Accreditation Authority for Translators and Interpreters if not in English)

#### **Document certification**

Take the originals and copies of your identification documents to a document certifier from the list below. Ask them to follow the Instructions below.

- 1. A Pharmacist
- 2. A Justice of the Peace
- 3. A Notary Public Officer
- 4. A Medical Practitioner or Nurse
- 5. A Police Officer
- 6. An Accountant (CA/CPA)
- 7. A Legal Practitioner
- 8. A Full-time teacher (school or tertiary)
- 9. Bank/Credit Union/Building Society Officer with at least two years continuous service
- 10. A permanent employee of a Commonwealth, State/Territory or local government with at least two years continuous service

## Appendix B: Privacy Policy

Diversa is committed to ensuring the confidentiality and security of your personal information. Diversa collects and handles your personal information in accordance with its legal obligations, including those under the Privacy Act 1988 (Cth). To find out more about how Diversa handles your personal information, you can review the Living Super Privacy Policy on the ING website or request a copy by either calling or writing to us.

## List B

# One of the documents

- Birth Certificate (issued by a State or Territory in Australia)
  OR
- Citizenship Certificate (issued by the Commonwealth of Australia)
  AND
- Social Security notice issued by the Commonwealth, State or Territory in the past 12 months containing your name and residential address which records financial benefits provided to you
- Notice Issued by the Australian Tax Office within the past twelve months that contains your name and residential address and records debts payable by you

#### OR

 Rates or Utilities notice issued in the last 3 months containing your name and residential address and recording the provision of services to you/your address

## OR

 Pension Card or Health Card (must be current and issued by Centrelink entitling financial benefits)

## **Certifier instructions**

The certifier must sign, date and authenticate that your identification document is a true copy of the original. This must be completed in original ink, with all of the following information, please:

- "I hereby certify this to be a true copy of the original document shown to me on [Date]"
- Signature
- Full name (printed)
- Address
- Phone number
- Qualification (i.e. JP/solicitor/doctor etc.)
- Registration number (if applicable)

# How to contact us

If you have any further questions about privacy in relation to Living Super please contact us by:

- calling: 133 464
- writing to: Living Super Privacy Officer

Reply Paid 93910 MELBOURNE VIC 3001

For the curious: Diversa Trustees Limited ABN 49 006 421 638, AFSL 235153, RSE L0000635 is the Trustee of Living Super, a sub-plan of OneSuper ABN 43 905 581 638 (Fund) and the issuer of interests in the Fund. Living Super is a product issued out of the Fund. ING, a business name of ING Bank (Australia) Limited ABN 24 000 893 292, AFSL 229823, is the Sponsor of the Living Super product.

