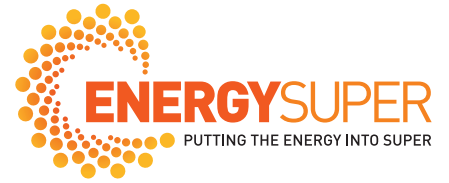


PROOF OF IDENTITY FORM



We are required by law to obtain proof of your identity and verification before paying any benefit from the Fund or changing your name.

The identification process also helps to protect you and your super from identity fraud.

Please complete this form and attach any required documents so we can update our records.

Please complete the form in BLOCK letters using blue or black pen. Print an 'X' to mark boxes where appropriate.

YOUR PERSONAL DETAILS

Energy Super member number (if known):

Surname:

Title: Mr Mrs Ms Miss Dr

Given names:

Previous given names (if applicable):

Previous surname (if applicable):

Date of birth: (DD/MM/YYYY) / /

Residential address:

State: Postcode:

Postal address (if same as above, write "as above"):

State: Postcode:

Telephone (home):

Telephone (work):

Mobile:

Primary email:

Secondary email:

Please indicate your relationship with the Fund:

- I am a member
- I am a nominated beneficiary of a Fund member
(please complete **Linking Member Details** section)
- I am a legal personal representative (guardian, attorney, executor of a will, administrator of an estate) for a Fund member
(please complete **Linking Member Details** section)
- Other (please specify):

LINKING MEMBER DETAILS

Only complete this section if you are a nominated beneficiary or a legal personal representative for a Fund member.

Please provide the Fund member's details below:

Energy Super member number (if known):

Surname:

Title: Mr Mrs Ms Miss Dr

Given names:

Previous given names (if applicable)

DECLARATION

I have read this form and I declare that the information I have provided in it is true and correct and I acknowledge responsibility for its accuracy.

Signature:

Date (DD/MM/YYYY): / /

1407.3 07/21 ISS3

PROOF OF IDENTITY

PLEASE SELECT ONE OPTION BELOW

You are able to prove your identity to us, either:

Electronically

By providing you my Medicare, driver's licence (Australian/New Zealand) or passport details (Australian/New Zealand) below, I authorise the use of my personal details (including the information below) for the purpose of electronic data verification using reliable and independent data sources. I understand the Fund uses a third party for this purpose.

I confirm that I've read the information regarding the electronic identity verification process outlined in the *Proof of Identity Requirements* Fact Sheet at energysuper.com.au

Important: Make sure the details you provide are accurate. If your personal details provided at the start of this form do not match your electronic identification details, we will not be able to use your personal details to prove your identity, which will delay processing your request.

You must provide details of at least two of the following documents:

Document 1: Medicare card

Full name as shown, including initials:

Card number:

Valid to: /

I am person number on this card

Document 2: Driver's licence

First name as shown on licence:

Surname as shown on licence:

Driver licence number:

State of issue

Expiry date:

/ /

Document 3: Passport

Given Name/s (including middle Name) as shown on your passport:

Surname as shown on your passport:

Australian passport number:

Place of birth as shown on your passport:

Country of birth (not shown on passport):

Family name at birth (not shown on passport):

If signing on behalf of another person, please provide your following details:

Date of Birth: / /

Address:

State:

Postcode

1407.3 07/21 ISS3

OR

Document-based

We're able to accept your certified identification (ID) sent by email or fax. Of course if you'd prefer, you can post your certified ID to us. Please include your certified (within 12 months) ID with this form when you return it to us.

Please see the *Proof of Identity Requirements* Fact Sheet at energysuper.com.au for more information on using certified ID to prove your identity.

If my identification documentation has not been certified correctly or is unable to be read, I consent to having the Fund use the information from the documents in conjunction with the information on this form to verify my identity electronically using independent data sources. I understand the Fund uses a third party for this purpose.

RETURN THIS FORM

Energy Super

PO Box 10530

Brisbane Adelaide Street QLD 4000

F 07 3229 7523

E member@energysuper.com.au
(as a scanned email attachment)

HAS YOUR NAME CHANGED OR ARE YOU SIGNING ON BEHALF OF ANOTHER PERSON?

If your name has changed:

To prove your name change, you'll need to use the document-based method of ID verification and provide a certified copy of a Linking document in addition to your other certified identification document/s (such as a driver's licence or passport). Some examples of linking documents can be seen below.

You'll need a certified copy of one of these:

- marriage certificate from the Births, Deaths and Marriages Registration Office
- deed poll; or
- change of name certificate from the Births, Deaths and Marriages Registration Office.

If you're a legal personal representative and signing on behalf of another person:

You'll need to provide a certified copy of one of the following documents to us (if not previously provided):

- guardianship papers
- Power of Attorney.

You'll also need to prove your identity using either the electronic or document-based method.

If you choose the electronic method, you'll also need to provide your **date of birth** and **address**, in addition to your two selected document details.

TALK TO US

T 1300 436 374

E info@energysuper.com.au

W energysuper.com.au

Energy Super

Level 10, 123 Eagle Street

Brisbane QLD 4000

PO Box 10530

Brisbane Adelaide Street QLD 4000

PRIVACY STATEMENT - YOUR PRIVACY IS IMPORTANT TO US

LGIAsuper (the issuer of the Energy Super product) respects your privacy. All personal information collected via this form is protected in line with LGIAsuper's Privacy policy. To find out more about how we collect and manage your personal information, please refer to our privacy policy available at energysuper.com.au

1407.3 07/21 ISS3