

# Direct Debit Authority for Personal Superannuation Contributions

## 1. Personal Information

<b>Name</b> (Please print name in full)		
<b>Residential Address</b>		
<b>Date of Birth</b>	<b>Membership Number</b>	<b>Monthly Deduction (\$)</b>
<b>Email Address</b>		<b>Phone Number</b>

Type of Contribution:

Personal Contribution

Spouse Contribution

## 2. Account to be debited

Insert name of Financial Institution:

Insert name of account which is to be debited:

BSB Number:

 - 

Account Number:

I/We authorise and request you, until further notice in writing, debit my/our account described above any amounts which Meat Industry Employees' Superannuation Fund Pty Ltd (The User) (User ID 066386) may debit or charge me/us through the Direct Debit System.

I/We understand and acknowledge that:

- The Financial Institution may, in its absolute discretion, determine the order of priority of payment by it of any moneys pursuant to this Authority or any authority or mandate.
- The Financial Institution may, in its absolute discretion, at any time by notice in writing to me/us, terminate this Authority as to future debits.
- The User may, by prior arrangement and advice to me/us, vary the amount or frequency of future debits.

This Authority is to remain in force in accordance with the terms described in the 'Direct debit request service agreement' on the next page.



**MEAT INDUSTRY EMPLOYEES' SUPERANNUATION FUND**

Level 2/62 Lygon Street, Carlton South VIC 3053 | ABN 17 317 520 544

Phone: (03) 9662 3861 or 1800 252 099 | Fax: (03) 9662 2430 | Email: fundadmin@miesf.com.au

Trustee: Meat Industry Employees' Superannuation Fund Pty Ltd (ABN 58 005 793 199) (AFSL 239 953) (RSE L0001434)

December 2020

## Filling out this form

Check with your Financial Institution whether your nominated account can accept direct debit. Some account types aren't eligible and some Credit Unions don't permit direct debit.

**BSB Number:** This number identifies the bank/state/branch at which your account is held. Contact your financial institution if you're not sure of this number, or check your last bank statement.

**Account Number:** This number identifies your account. Contact your financial institution or check your last bank statement to obtain this number.

**Membership Number:** This number identifies your membership and account with MIESF. Check your last MIESF annual statement for this number.

### 3. Are you eligible to contribute to super?

You need to be eligible to contribute to super. [Please select the option below that applies to you.](#)

- I'm under 67 years of age
- I'm between 67 and 75 years of age and have worked at least 40 hours in a consecutive 30 day period during the financial year.

### 4. Direct debit service agreement

You've authorised us to debit amounts from your nominated bank account. Payments debited directly from your bank account will be processed on the 15<sup>th</sup> of each month. If the 15<sup>th</sup> falls on a weekend or public holiday the payment will occur on the first business day **before** this date.

#### To change your direct debit or make an enquiry

You can cancel your direct debit authority at least three business days before your next scheduled direct debit:

- By sending us written instructions
- By calling the Fund on 1800 252 099

If you have any questions, call MIESF on 1800 252 099 or email us at [fundadmin@miesf.com.au](mailto:fundadmin@miesf.com.au)

#### Make sure you have sufficient funds in your account

You should make sure you have enough cleared funds in your account for us to debit your account. If there are insufficient funds, the direct debit will be dishonoured by your bank. Some banks will charge you a dishonour fee if this occurs.

If your direct debit is rejected, we'll notify you and if contact is not made to the Fund, we'll automatically cancel your direct debit service agreement.

If all your super benefits are paid out from MIESF, this direct debit service agreement will automatically cancel.

We'll keep your bank account details confidential except when a court order applies, if our bank needs information about your account or if you give us written permission to reveal your bank details.

#### Declaration and Signature

Your signature below indicates you have read, understood and agree with this document. I also acknowledge that:

- I understand that my personal information will be handled by the Fund to provide and manage my superannuation and without this information the Fund may not be able to provide my superannuation benefits and choices. For this purpose, my personal information may pass between the Fund and the Fund's professional advisers, insurers, government bodies, my employer and other parties as required, including the trustee of any other fund I may transfer to.
- I may access my information by contacting the Fund's Privacy Officer.

#### Customer Signature

Date

D	D	M	M	Y	Y
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#### Co-signature (if required)

Date

D	D	M	M	Y	Y
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