



BT Lifetime Super – Employer Plan Direct Personal Member and Spouse Application Form

BT Contact Centre ☎ 132 135 (8.00am – 6.30pm Mon-Fri Sydney Time)

BT Funds Management Limited ABN 63 002 916 458
AFSL 233724 RSE L0001090 is the Trustee of BT Lifetime Super
– Employer Plan RSE R1001327 ABN 39 827 542 991

You must read the BT Lifetime Super – Employer Plan (BT Super) Product Disclosure Statement (PDS) in full before making an investment decision and completing this application form.

If you do not have a copy of the BT Super PDS, please contact the BT Contact Centre on 132 135 or download a copy from our website at www.bt.com.au.

This application form is for:

- a spouse of an existing member who wishes to join the existing members employer sponsored plan within BT Super, and
- personal investors who wish to join BT Super directly.

Complete this form using **black pen** – print in clear **CAPITAL LETTERS**

1. PERSONAL DETAILS

Title

Mr Mrs Miss Ms Other

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

Gender

Male Female

Postal address

State Postcode

Residential address – if different from above

State Postcode

Daytime phone number

Mobile phone number

Email address* (please supply)

* In the future, BT may elect to email correspondence to you.

2. TAX FILE NUMBER

Tax file number (TFN)

We are authorised to collect your TFN under the Superannuation Industry (Supervision) Act 1993 (SIS).

It is not an offence if you do not quote your TFN. However, giving your TFN will have the following advantages, which may not otherwise apply:

- we will be able to accept all types of contributions to your account(s)
- you will not be subject to extra tax for making contributions without a TFN
- other than the tax that might ordinarily apply, no additional tax will be deducted when you start drawing down on your superannuation benefits
- it will be much easier to trace different superannuation accounts in your name so that you receive all your superannuation benefits when you retire.

These advantages may change in the future.

If provided, your TFN will be used for legal purposes only, including providing it to another super fund, unless you notify us otherwise in writing, in which case it will be kept confidential. These purposes may change in the future if the law changes.

3. ELIGIBILITY TO CONTRIBUTE

Please select your age and the criteria under which your contributions will be made, *select all that apply*.

I am under age **65**

I am aged **65 – 74**

with mandated employer contributions being made on my behalf (Superannuation Guarantee contributions only to age 70)

with contributions other than mandated employer contributions being made by me or on my behalf and I have been gainfully employed for at least 40 hours in a period of not more than 30 consecutive days in the current financial year (spouse contributions only to age 70)

I am aged **75** or more

with mandated employer contributions (other than Superannuation Guarantee contributions) being made on my behalf.

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03-17-012-06

4. EMPLOYMENT DETAILS

ARE YOU CURRENTLY GAINFULLY EMPLOYED?

No If you are currently not working, what is your status?

Not Employed/Home Duties
 Unemployed Retired
 Not working due to ill health
 Last date of employment (dd/mm/yyyy)
 / /

Yes Self-employed

Yes Employed Full time
 Permanent part-time
 Casual

COMPLETE THE FOLLOWING IF YOU ARE EMPLOYED OR SELF-EMPLOYED

Number of hours worked each week

Annual Income¹

\$

What is your occupation?

What is your industry (eg mining)?

¹ Please refer to the 'Definitions and interpretation of insurance terms' section of the BT Super Additional Information Booklet for the definition of 'Income'.

5. INITIAL CONTRIBUTION DETAILS

Note: Cash is not accepted. Minimum initial investment of \$500 is required.

How will initial contributions be made?		Cheque	BPAY
Member contributions	\$	<input type="checkbox"/>	<input type="checkbox"/>
Employer contributions	\$	<input type="checkbox"/>	<input type="checkbox"/>
Spouse contributions	\$		
Contributions relating to small business concessions	\$		▶ attach ATO election form ¹
Directed termination payments	\$		▶ attach employer documentation ²
Contributions from certain personal injury settlements or orders	\$		▶ attach ATO election form ³
ATO Super Guarantee Voucher	\$		
Rollovers from other superannuation funds	\$		
How many? ▶	<input type="text"/>		

Rollover Details⁴

Name of rollover institution	Estimated amount
	\$
	\$
	\$
	\$
	\$

¹ ATO Capital gains tax cap election

² Directed termination payment statement

³ ATO Contributions for personal injury

⁴ If you are rolling over funds and you have not already initiated the transaction, for each rollover please complete a Request to Transfer form available online at www.bt.com.au.

6. INVESTMENT STRATEGY

If you do not nominate an investment choice below, your initial contribution and any other contributions will be invested in either:

- the Default Investment Option selected by the employer for the plan, or
- if the employer has not selected a Default Investment Option or if you are a direct personal member, the Default Investment Option nominated by the Trustee will apply (currently the BT Multi-manager Balanced Investment Option).

Risk Category	Investment Option	Asset Class*	OFFICE USE ONLY		% Contribution <small>You can select a maximum of 6 Investment Options. Indicate the % for each below.</small>
			APIR Codes	Unit Code	
Stable	BT Cash	C	BTA0511AU	(003)	%
Conservative	BT Multi-manager Conservative	D	BTA0225AU	(041)	%
	BT Conservative Outlook	D	BTA0512AU	(002)	%
	Macquarie Conservative	D	BTA0163AU	(027)	%
	BT Multi-manager Fixed Interest	F	BTA0300AU	(105)	%
	BT Australasian Bond	F	BTA0028AU	(009)	%
	BT Global Bond	F	BTA0030AU	(010)	%
	Macquarie Diversified Fixed Interest	F	BTA0257AU	(092)	%

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Risk Category	Investment Option	Asset Class*	OFFICE USE ONLY		% Contribution <i>You can select a maximum of 6 Investment Options. Indicate the % for each below.</i>
			APIR Codes	Unit Code	
Moderate	BT Multi-manager Balanced	D	BTA0224AU	(042)	%
	BT Balanced Returns	D	BTA0513AU	(201)	%
	Westpac Balanced	D	BTA0098AU	(049)	%
	BlackRock Scientific Diversified Growth	D	BTA0160AU	(032)	%
	Schroder Balanced	D	BTA0247AU	(085)	%
	Vanguard Growth Index Fund	D	BTA0399AU	(114)	%
Dynamic	BT Multi-manager Growth	D	BTA0226AU	(043)	%
	BT Future Goals	D	BTA0068AU	(029)	%
	MLC Growth	D	BTA0165AU	(031)	%
	BT Property Securities	P	BTA0034AU	(011)	%
	BT Global Property	P	BTA0254AU	(093)	%
	AMP Capital Investors Listed Property	P	BTA0159AU	(035)	%
	BT Multi-manager Australian Share	AS	BTA0299AU	(104)	%
	BT Australian Share	AS	BTA0029AU	(007)	%
	BT Ethical Share	AS	BTA0253AU	(097)	%
	BT Partner Australian Shares Core 1	AS	BTA0095AU	(047)	%
	BT Partner Australian Shares Growth 1	AS	BTA0096AU	(046)	%
	BT Partner Australian Shares Value 1	AS	BTA0097AU	(048)	%
	Aberdeen Classic Series Australian Small Companies	AS	BTA0255AU	(096)	%
	Colonial First State Australian Share	AS	BTA0161AU	(028)	%
	Fidelity Australian Equities Fund	AS	BTA0305AU	(109)	%
	ING Australian Shares	AS	BTA0164AU	(034)	%
	Investors Mutual Australian Share	AS	BTA0099AU	(084)	%
	Vanguard Index Australian Shares Fund	AS	BTA0408AU	(119)	%
Aggressive	BT Multi-manager High Growth	D	BTA0182AU	(039)	%
	Colonial First State Wholesale Geared Share Fund	AS	BTA0405AU	(117)	%
	BT Multi-manager International Share	IS	BTA0302AU	(106)	%
	BT International Share	IS	BTA0033AU	(008)	%
	BT Partner International Shares Core 1	IS	BTA0258AU	(094)	%
	BT Partner International Shares Growth 1	IS	BTA0093AU	(044)	%
	BT Partner International Shares Value 1	IS	BTA0094AU	(045)	%
	Aberdeen Actively Hedged International Equities	IS	BTA0162AU	(025)	%
	Aberdeen Emerging Opportunities Fund	IS	BTA0404AU	(116)	%
	Colonial First State Wholesale Global Resources Fund	IS	BTA0406AU	(118)	%
	Platinum international fund	IS	BTA0400AU	(115)	%
	Vanguard Index International Shares Fund	IS	BTA0407AU	(120)	%
Total Investment					100 %

*Asset Class: D – Diversified, IS – International Shares, AS – Australian Shares, P – Property, F – Fixed Interest, C – Cash

7. EXISTING MEMBER DETAILS (SPOUSE MEMBERS ONLY)

Title

Mr Mrs Miss Ms Other

Given name(s)

Surname

Date of birth (dd/mm/yyyy)

 / /

Gender

Male Female

BT Member number (if known)

BT Employer number (if known)

BT Employer name

8. CHECKLIST

- Have you entered your Tax File Number in Section 2?
- Have you indicated 'Eligibility to Contribute' in Section 3?
- Have you completed your Employment Details in Section 4?
- If you are rolling over from an external fund, have you completed a Request to Transfer form and sent it to the other Rollover Fund?
- Have you signed the Signature and Declaration in Section 9 on page 4?

9. SIGNATURE AND DECLARATIONS

Before you sign this Application Form, the Trustee is obliged to give you a copy of the BT Super PDS. This will help you understand the product and decide whether it is appropriate to your needs.

In signing this application I acknowledge that:

- I have received, read and understood the PDS
- I agree to, consent to and acknowledge the declarations, conditions and acknowledgements provided throughout the PDS and declare that all given details in this application are true and correct.

I understand that:

- an investment in BT Lifetime Super – Employer Plan is not a deposit with or any other liability of Westpac Banking Corporation ABN 33 007 457 141 or any other company in the Westpac Group of companies
- an investment in BT Lifetime Super – Employer Plan is subject to investment risk, including possible delays in repayment or loss of income and principal invested
- none of the Westpac Banking Corporation or its related entities stand behind or otherwise guarantee the capital value or investment performance of any Investment Option offered in the PDS.

Where this application form has been downloaded from an electronic file:

- you acknowledge that, prior to making this application you personally received the electronic PDS or a printout of it, attached to or accompanying this application form
- you understand that the law prohibits any person passing this application form to another person unless it is attached to, or accompanied by, the complete and unaltered PDS
- the Trustee will send to you, upon request and free of charge, the paper version or the electronic PDS that accompanies this application form, during the life of the PDS.

YOUR APPLICATION CANNOT PROCEED IF THIS SECTION IS NOT SIGNED

Signature of Applicant

Date (dd/mm/yy)

 / /

Signatory's full name (please print)

10. ADVISER USE ONLY

THIS SECTION TO BE COMPLETED FOR DIRECT PERSONAL MEMBERS ONLY.

Existing adviser – Complete Sections 10A and 10C.

New adviser – Complete Sections 10B and 10C.

10A BT Adviser number

10B Adviser name

ABN (mandatory)

Adviser's office name

Adviser's address

 State Postcode

Daytime phone number

 ()

Fax number

 ()

Email address

10C Please indicate the commission on all of the following:

Transfer fees/Rollover*	Please specify <input type="checkbox"/> <input type="text"/> %
Contribution fees*	Please specify <input type="checkbox"/> <input type="text"/> %
Trail	Standard <input type="checkbox"/> Other (please specify) <input type="checkbox"/> <input type="text"/> %
Death and TPD Insurance Cover	Standard <input type="checkbox"/> Other (please specify) <input type="checkbox"/> <input type="text"/> %
SCI Cover	Standard <input type="checkbox"/> Other (please specify) <input type="checkbox"/> <input type="text"/> %

* If no fee is nominated, the default fee of 0% will be applied.

BT Business Development Manager name

Declaration

If I am not a Westpac Financial Planner, by signing this form I:

- declare that I am lawfully authorised to advise on, and deal in, the financial product(s) offered in the PDS under an AFSL and do not provide these services on behalf of any member of the Westpac Group of companies
- acknowledge that any commission paid in respect of the financial product(s) offered in the PDS is governed by the Terms and Conditions of Commission Payments, a copy of which I acknowledge I have received and read.

If I am a Westpac Financial Planner, by signing this form I declare that I am a representative of Westpac Banking Corporation (AFSL No. 233714) and I am authorised to advise on the financial product(s) offered in the PDS. A copy of the Terms and Conditions of Commission Payments is available by calling BT Adviser Relations on 1800 025 127 or from the BT Adviser Exchange website (www.bt.com.au).

Signature of **Adviser**

Date (dd/mm/yy)

Adviser's full name (please print)

Adviser stamp (please use black ink only)

Please return this form and supporting documents by:



mail BT Lifetime Super – Employer Plan
GPO Box 2919, Adelaide SA 5001



fax (02) 9274 5402

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