

# Existing Fund Transfer Request (TS Admin System)



This form requests Tranzact Super ('TS') to accept the transfer of an existing SMSF to the TS Regulatory Compliance & Administration system.

TS encourages you to read our [Information About our SMSF Regulatory Compliance & Administration Services Document](#) prior to completing this request form.

Do not use this form to establish a new SMSF and utilise our administration system. Please use the "[Request to Establish New SMSF](#)" form.

## Section 1 - Fund Details

Fund Name:	<input type="text"/>		
Fund TFN:	<input type="text"/>	Fund ABN:	<input type="text"/>
Date Fund Commenced <sup>1</sup> :	<input type="text"/>		

1. This is the date per the Trust Deed establishing the Fund.

## Section 2 – Trustee Details (Individual or Corporate)

Please advise the type of trustee and complete the relevant section:

Individuals  (complete section 4)

Corporate  (complete section 3)

## Section 3 – Corporate Trustee

Company Name:	<input type="text"/>
ACN:	<input type="text"/>

Will you be transferring the Registered Office and ASIC Registered Agent requirements to Tranzact Super (applicable fee applies)?

Yes  No

If No, please advise details of ASIC Registered Agent & Registered Office Address:

ASIC Registered Agent:

Registered Office  
Street Address:

#### Section 4 – Member of SMSF

A SMSF cannot have more than 4 members at any given time and all members must be either a trustee of the fund or a director of the fund's corporate trustee. Special rules apply for single member funds. Further, a member cannot be employed by another fund member unless they are relatives. For more details of structure of a SMSF please [click here](#).

**Member 1:** Individual Trustee  Director of Corporate Trustee

Mr  Mrs  Ms  Miss  Dr  Other : \_\_\_\_\_

Last Name:

First Name/s:

Street Address:

Date of Birth:

Place of Birth  
(Town, State &  
Country)

Tax File Number:

Occupation:

**Member 2:** Individual Trustee  Director of Corporate Trustee

Mr  Mrs  Ms  Miss  Dr  Other : \_\_\_\_\_

Last Name:  First Name/s:

Street Address:

Date of Birth:  Place of Birth (Town, State & Country)

Tax File Number:  Occupation:

**Member 3:** Individual Trustee  Director of Corporate Trustee

Mr  Mrs  Ms  Miss  Dr  Other : \_\_\_\_\_

Last Name:  First Name/s:

Street Address:

Date of Birth:  Place of Birth (Town, State & Country)

Tax File Number:  Occupation:

**Member 4:** Individual Trustee  Director of Corporate Trustee

Mr  Mrs  Ms  Miss  Dr  Other : \_\_\_\_\_

Last Name:  First Name/s:

Street Address:

Place of Birth

Date of Birth:

(Town, State & Country)

Tax File Number:

Occupation:

**Section 4(a) – Single Member SMSF with Individual Trustees**

Where a fund has only one member and has chosen not to have a corporate trustee, there must be one other individual trustee (other than the single member). Where the trustee is a company, you can choose to nominate a second person as a director. Again, the second person cannot have an employer/employee relationship with the single member, unless they are a relative. For more details please refer to the [Trustee Decision Tree](#) on our website.

2<sup>nd</sup> Trustee  2<sup>nd</sup> Director of Corporate Trustee

Mr  Mrs  Ms  Miss  Dr  Other : \_\_\_\_\_

Last Name:

First Name/s:

Street Address:

Date of Birth:

Place of Birth  
(Town, State & Country)

Tax File Number:

Occupation:

**Section 4(b) – Use of Legal Personal Representative**

The superannuation law allows a person, other than a member, to act as trustee or director of the corporate trustee where they are the member’s Legal Personal Representative. This includes: a parent or guardian for a child under age; Where a person is under a legal disability; or a person who holds an Enduring Power of Attorney (‘EPOA’) for the member.

Where you are requesting the establishment of a SMSF, with more than one member) with a person(s) acting as trustee or director of the corporate trustee, other than a member(s), please advise details so we can ascertain if it is compliant with the relevant superannuation law. Please note that we may request further details or documents (eg copy of EPOA).

Details:

## Section 5 – Tranzact Super’s Regulatory Compliance & Administration Service

Tranzact Super provides you with either a 24/7 or an annual regulatory compliance and administration service. Full details of these services and applicable fees are available from our website [www.tranzactottalsuper.com.au](http://www.tranzactottalsuper.com.au).

Please select one of the following services:

- 24/7 - this service involves ongoing information processing during the year with the results posted to the web. It is most suitable for Funds that do not have Wrap investments and where the adviser/trustee is prepared to provide a constant flow of information to TS. This can be achieved by TS becoming the postal address for all fund assets. We will request information on a regular basis if TS has not been made the postal address for fund assets.
- Yearly - this service involves the progressive processing of Fund information as received at various stages during the year - monthly, quarterly or half yearly. Results are not posted to the web. We require information to be forwarded to us on a progressive basis during the year.

A complete Regulatory Compliance & Administration Agreement, including the terms and conditions of our appointment, will be sent to you for your execution.

## Section 6 – Adviser & Contact Details

Where the fund has an Intermediary (eg Financial Adviser or Accountant), all contact and correspondence will be via the Intermediary. Please provide details of the Intermediary below.

Where there is no Intermediary, that is a ‘Direct Trustee’, please provide detail of a contact person to whom all queries and correspondence can be directed, eg a trustee. Please note that a different fee schedule for on-going regulatory compliance and administration for a fund without an Intermediary.

Intermediary or  
Direct Trustee  
Name:

Intermediary  
Firm Name:

Intermediary  
Dealer Group:

Please nominate a contact in your office to whom we should direct ongoing administration:

Name:

Email:

Phone Number:

### Section 7 – Transferring Fund Information

We will require relevant fund information to allow us to set up opening balance on our SMSF administration and accounting system. Further, we will require Fund documents, eg Trust Deed.

We also require the trustees to sign an authority letter to the Fund's current administrator. This form helps expedite the transfer of data and documents to us and it provided at the end of this form.

Please advise which income year you wish us to commence our Compliance & Administration Agreement from, eg 2010/2011

Please further advise details of your Superannuation Funds nominated bank account from which our monthly Compliance & Administration fees will be deducted:

Account Name: \_\_\_\_\_

Bank: \_\_\_\_\_

BSB: \_\_\_\_\_

Account Number: \_\_\_\_\_

Do you require us to set up a Macquarie CMA for your fund? Yes  No

### Section 8 – Confirmation & Declaration

On behalf of the trustee(s) (or prospective trustee(s)) of the SMSF:

- I/we are authorised to confirm details and make declarations on behalf of the trustee(s) (or prospective trustee(s));
- That the details provided in this request form are correct and accurate, to the best of my/our knowledge;
- Acknowledge that I/we have read and understood the fees for the service chosen and other applicable fees, as outlined on the [Tranzact Super website](#), as updated from time to time;
- Acknowledge that I/we have read and understood the terms and conditions as outlined in the [Information About our SMSF Regulatory Compliance & Administration Services Document](#), which is available on the Tranzact Super website;
- Understand that the services chosen is provided in accordance with the information provided in this form and the current terms and conditions;
- Authorise TS to nominate a Tax Agent for the fund and for the said Tax Agent to place the Fund on their Tax Lodgement Programme;

- I/we agree to the following transfer fees:

Establishment Fee	<b>NIL</b>		
Deed Upgrade (optional)	\$570	<input type="checkbox"/>	please select if required
Corporate Trustee Constitution Upgrade (optional)	\$350	<input type="checkbox"/>	please select if required

The cost of bringing existing funds onto the system is involves significant retrospective work and is justifiable only if the fund remains on the system for at least 3 years. For existing funds only, there is a deferred establishment fee of \$990 if the fund leaves the system in less than 3 years. This fee is NOT prorated but is payable in full if the fund leaves the system at any time under 3 full years of billed administration services. This fee DOES NOT apply to funds that have commenced with the TS service in their first financial year of operation or if the Fund is wound up.

**NOTE: Where any of the above fees are selected, payment must accompany this application either by way of a cheque or by credit card authority.**

Payment Method:                      Cheque                                      Master Card                                      Visa Card

Fund Name:

Card Holder Name:

Credit Card No:                       Expiry Date:

Signature:

**NB: A payment other than from the Fund will be regarded as a non-concessional contribution to the member with the largest account balance.**

Signature

Print Name: \_\_\_\_\_

**If you have any questions regarding our services or this application please feel free to contact our office 1800 644 804 or via [contact@tranzacttotalsuper.com.au](mailto:contact@tranzacttotalsuper.com.au)**

[www.tranzacttotalsuper.com.au](http://www.tranzacttotalsuper.com.au)

## CHANGE OF ADMINISTRATOR NOTICE

Date:

To:

Phone:  Fax:

Email:

***Dear Sir/Madam,***

Re:

We wish to advise that Tranzact Super has been appointed as administrator of our above named self managed superannuation fund. Would you please provide them, or any member of their staff with the information they require to establish our fund on their systems.

***Please regard a photocopy or facsimile or scanned copy of this Notice as if it were an original.***

Thank you for your assistance.

Yours faithfully

Signature:

*Trustee/Director/Sole Director*

Signature:

*Trustee/Director/Sole Director*

Signature:

*Trustee/Director/Sole Director*

Signature:

*Trustee/Director/Sole Director*

ON COMPLETION PLEASE FAX OR SCAN & EMAIL TO  
TRANZACT SUPER [contact@tranzacttotalsuper.com.au](mailto:contact@tranzacttotalsuper.com.au)  
FAX: 07 3211 1455 TS Chnge Admin 0110