

# Wind Up Request

The trustees of the superannuation fund request to wind up the super fund. The trustees instruct you to finalise the accounts and prepare the appropriate documentation to wind up the fund.

## Fund details

Superannuation Fund Name

Australian Business Number

## Wind up details

Financial year wind up will occur

Have you sold/transferred all your assets? Yes ☐ No ☐

\*One cash account to remain open until advised. Please don't close your bank account until the following has occurred:

- Expected liabilities have been settled
- Any tax refunds have been received
- You have completed any rollovers using SuperStream
- You have received confirmation from us that your fund has been wound up

Comments:

Have you paid outstanding expenses and tax liabilities e.g. final adviser fees, administration fees, insurances and outstanding PAYG instalments?

Yes ☐ No ☐

Comments:

Have you notified employers to cease making contributions to the fund?

Yes ☐ No ☐

Comments:

**Member 1 Balance**

Member Name:

Are member benefits to be:

Paid out to member(s) as pension payments

Paid out to member(s) as lump sum / pension payment

Rollover to another superannuation fund (please complete below if you select this)

**Receiving fund details**

ABN

Fund name

Postal address

Street address

Suburb / town / city

State / territory

Postcode

Country, if other than Australia

Unique superannuation identifier (USI)

Member client identifier

If transferring to an SMSF, please also provide:

Account name

BSB

Account number

Electronic Service Address (ESA)

**Member 2 Balance**

Member Name:

Are member benefits to be:

Paid out to member(s) as pension payments

Paid out to member(s) as lump sum / pension payment

Rollover to another superannuation fund (please complete below if you select this)

**Receiving fund details**

ABN

Fund name

Postal address

Street address

Suburb / town / city

State / territory

Postcode

Country, if other than Australia

Unique superannuation identifier (USI)

Member client identifier

If transferring to an SMSF, please also provide:

Account name

BSB

Account number

Electronic Service Address (ESA)

**Member 3 Balance**

Member Name:

Are member benefits to be:

Paid out to member(s) as pension payments

Paid out to member(s) as lump sum / pension payment

Rollover to another superannuation fund (please complete below if you select this)

**Receiving fund details**

ABN

Fund name

Postal address

Street address

Suburb / town / city

State / territory

Postcode

Country, if other than Australia

Unique superannuation identifier (USI)

Member client identifier

If transferring to an SMSF, please also provide:

Account name

BSB

Account number

Electronic Service Address (ESA)

**Member 4 Balance**

Member Name:

Are member benefits to be:

Paid out to member(s) as pension payments

Paid out to member(s) as lump sum / pension payment

Rollover to another superannuation fund (please complete below if you select this)

**Receiving fund details**

ABN

Fund name

Postal address

Street address

Suburb / town / city

State / territory

Postcode

Country, if other than Australia

Unique superannuation identifier (USI)

Member client identifier

If transferring to an SMSF, please also provide:

Account name

BSB

Account number

Electronic Service Address (ESA)

**Member 5 Balance**

Member Name:

Are member benefits to be:

Paid out to member(s) as pension payments

Paid out to member(s) as lump sum / pension payment

Rollover to another superannuation fund (please complete below if you select this)

**Receiving fund details**

ABN

Fund name

Postal address

Street address

Suburb / town / city

State / territory

Postcode

Country, if other than Australia

Unique superannuation identifier (USI)

Member client identifier

**Member 6 Balance**

Member Name:

Are member benefits to be:

Paid out to member(s) as pension payments

Paid out to member(s) as lump sum / pension payment

Rollover to another superannuation fund (please complete below if you select this)

**Receiving fund details**

ABN

Fund name

Postal address

Street address

Suburb / town / city

State / territory

Postcode

Country, if other than Australia

Unique superannuation identifier (USI)

Member client identifier

If transferring to an SMSF, please also provide:

Account name

BSB

Account number

Electronic Service Address (ESA)

If SuperGuardian is the ASIC agent, would you like us to arrange the deregistration of the fund's corporate trustee?

Yes

No

Not applicable

### **Trustee Authority**

\*Upon completion of this form we will prepare a formal resolution for the decision to wind up. Once all assets are sold or transferred and only cash remains, we will cease any monthly fees and raise our final wind up fee. \*

Trustee 1:

Signed:

Date:

Trustee 2:

Signed:

Date:

Trustee 3:

Signed:

Date:

Trustee 4:

Signed:

Date:

Trustee 5:

Signed:

Date:

Trustee 6:

Signed:

Date:

or

### **Adviser Authority**

Adviser:

Signed:

Date: