

# Accumulation Scheme – Notification of Chosen Fund Employer to Complete

## Please complete in capital letters and in BLACK INK only

The employer hereby makes application to contribute to Local Government Super (DIVP) as an employee has elected Local Government Super as their fund of choice.

### 1. Employer details

Registered name			
Trading name			
Australian Company Number (ACN/ABN)			
Registered address			
No./Street/PO Box			
Suburb/Town/City			
State/Territory	Postcode	Country (if outside Australia)	

### 2. Contact details

Title				<i>(e.g. Mr/Mrs/Ms/Miss/Dr)</i>
Family name				
Given name(s)				
No./Street/PO Box				
Suburb/Town/City				
State/Territory	Postcode	Country (if outside Australia)		
Business no. (inc. STD/ISD)		Fax no. (inc. STD/ISD)		
Mobile no.				
E-mail address				
Position within business				

### 3. Banking Information\*

Account Name			
Bank			
Branch			
BSB Number	-	Account Number	

\* Should Local Government Super not be able to accept your contribution, it will be returned to your nominated bank account.

#### 4. Contribution commencement date

This is the date from which you nominate to pay contributions

Date contributions to start:  /  /

Pay Frequency

#### 5. Employee name

Member no.  Date of birth (dd/mm/yyyy)  /  /

#### 6. Preparation by

Full name

Contact phone no

Signed  Date (dd/mm/yyyy)  /  /

#### Where to send this form/enquiries

Local Government Super PO Box N835 Grosvenor Place NSW 1220 website: www.lgsuper.com.au	Phone: 1800 636 441 (8.30 am – 5.00 pm Mon – Fri) Fax: (02) 9299 9321 enquiries: employerservices@lgsuper.com.au
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### IMPORTANT NOTES

**You should read the Product Disclosure Statement (PDS) before completing this form. The PDS is available from Member Services and the website.**

Your employee must have an account with Local Government Super. If your employee does not have an account with Local Government Super we cannot accept contribution payments.

#### Paying Contributions

Payment can be made either by:

- EFT – details below, or
- cheque – made out to Local Government Super and forwarded to the Scheme Administrator

In either case, please ensure that the following information is provided, either with the cheque or as a confirmation email sent on the same day:

- Transaction date of EFT
- Fund name ie LG Super
- Full name of member
- Member number
- Type of contributions ie Super Guarantee, salary sacrifice, etc
- Payroll period ending
- Full name, address and contact details of your company

The subject line of the email should include: **LGDIVA Employer Name CONT** – anything after the word CONT is purely for information on the actual subject of the email, eg **LGDIVA Health Club CONT - \$1000 salary sacrifice EFT'd 14/03/2009**

Emails should be sent to [employeronline@lgsuper.com.au](mailto:employeronline@lgsuper.com.au)

#### Bank Account Details for EFT:

Account Name	LG POOL A
BSB	062 000
Account Number	1046 6118

Please update this information on your payroll system for future remittances.



To Whom It May Concern:

**LOCAL GOVERNMENT SUPER**

I confirm that:

1. LGSS Pty Limited (ABN 68 068 003 497) (AFSL 383558) is the Trustee of the Local Government Superannuation Scheme (known as Local Government Super).
2. Local Government Super is a resident regulated superannuation scheme within the meaning of the Superannuation Industry (Supervision) Act 1993.
3. Local Government Super is not, nor has ever been, subject to direction under Section 63 of the Act not to accept any contributions from an employer sponsor.
4. It is the intention of the Trustee that Local Government Super will be administered so that it will continue to be treated as a complying superannuation scheme.
5. Local Government Super allows benefits to be rolled over into the Scheme from another superannuation or rollover fund.
6. Local Government Super is able to accept contributions from employers on behalf of their members upon receipt of the attached Accumulation Scheme 'Notification of Chosen Fund' form.
7. Local Government Super's life insurance arrangements meet the minimum statutory death insurance requirements for choice of funds. Local Government Super is therefore eligible to be nominated as a default fund.
8. The accumulation divisions of Local Government Super have the following identification numbers:
  - Australian Business Number (ABN) 74 925 979 278
  - Superannuation Fund Number (SFN) 4464 909 74
  - Superannuation Product Identification Number (SPIN) LGS0101AU.

Yours sincerely



Peter Lambert  
CEO, Local Government Super

The information above is about Local Government Super and is not intended to be financial advice. It does not take into account any specific needs, so members should consider their personal position, objectives and requirements before taking any action.