



## Excess transfer balance election

### Who should complete this form?

Use this form to elect to commute a different superannuation income stream to the one identified in the default commutation notice on the excess transfer balance determination issued to you. You do not need to complete this form if you arrange a commutation directly with your superannuation fund or if you are happy with the default commutation notice in your determination.

You may make an election by completing this form, which allows you to notify us which superannuation income streams you would like to commute in full or in part.

Please do this by identifying the superannuation provider for each income stream elected and the amount to be commuted from each income stream.

**!** Note that once made, your election cannot be revoked.

### Completing this form

- print clearly in BLOCK LETTERS using a black pen only
- place **X** in all applicable boxes
- do not use correction fluid or covering stickers
- do not use pins or staples to attach additional details.

## Section A: Your details

### 1 Tax file number (TFN)

□□□□	□□□□	□□□□
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### 2 Name

Title: Mr  Mrs  Miss  Ms  Other

Family name

First given name

Other given name

### 3 Current residential address

  

Suburb/town/locality

State/territory

□	□	□
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(Australia only)

Postcode

□	□	□	□	□
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(Australia only)

Country if outside Australia

### 4 Date of birth

Day	Month	Year
□□	□□	□□□□
/	/	

## Section B: Excess transfer balance details

### 5 Issue date of your determination notice (top right hand corner)

Day	Month	Year
□□	□□	□□□□
/	/	



## Section D: Declarations

Complete the declaration that applies to you. Print your full name then sign and date the declaration.

 Before you sign the declaration, check that you have provided true and correct information.

### Individual declaration

*I declare that the information contained in this form is true and correct.*

Name (BLOCK LETTERS)

Business hours phone number (include area code)

Signature

You MUST SIGN here

Date

Day                      Month                      Year

  /   /   

OR

### Authorised representative declaration

Complete this declaration if you are an authorised representative of the individual shown in Section A.

*I declare that:*

- *I am authorised by the individual to give this election form to the ATO*
- *this election form has been prepared according to the information supplied by the individual*
- *I have received a declaration made by the individual that the information provided to me for the preparation of this statement is true and correct.*

Name (BLOCK LETTERS)

Business hours phone number (include area code)

Authorised representative signature

You MUST SIGN here

Date

Day                      Month                      Year

  /   /   

Tax agent number (if you are a registered tax agent)

## Lodging this form

You can lodge this form by:

Fax **1300 730 298**

Post **Australian Taxation Office  
PO Box 3006  
PENRITH NSW 2740**