

# Withdrawal from superannuation holding accounts special account

How to complete your *Application for direct payment from the superannuation holding accounts special account*.

## WHO SHOULD COMPLETE THIS APPLICATION?

You or your authorised representative should complete this application if you want to request a withdrawal of the superannuation holding accounts (SHA) special account entitlement held by us.

You can only apply for a withdrawal if one of the following applies:

- you have retired due to permanent disability
- you receive Australian Government income support payments (which you have received for a sufficient period) as outlined in section C on the form
- you are 65 years of age or older
- you are at least 55 years of age and are not a resident of Australia and are
  - not in employment, or
  - in employment but your duties are performed wholly or principally outside Australia
- you are the legal personal representative of the account holder who is deceased
- you were a holder of a temporary visa that has ceased to be in effect (for example, expired or been cancelled), and have left Australia

▶ Former temporary residents can also apply by using the online departing Australia superannuation payment (DASP) system. Visit our website at [ato.gov.au](http://ato.gov.au) for more information.

! You can only withdraw the full account balance from the above categories. The direct payment is taxed as a super lump sum element untaxed in the fund. However, where a payment is made to the holder of a temporary visa because they left Australia and the visa has ceased to be in effect, the payment is a departing Australia superannuation payment (DASP) and tax is withheld at the time of payment.

- you have ceased employment with all employers who have deposited amounts on your behalf in the SHA special account and the balance of your account is less than \$200. (If your SHA special account entitlement includes a super co-contribution amount, you cannot withdraw the super co-contribution amount or any interest accrued on it.)

If your circumstances do not match any of the withdrawal categories listed, you are not eligible to withdraw your SHA special account entitlement. You can, however, have your account balance transferred to a complying super fund or retirement savings account that will accept it.



### **Tax-free payment for terminal medical condition applicants**

The terminal medical condition provision applies if:

- two registered medical practitioners (with at least one being a specialist practicing in the area related to the illness or injury) have certified that you suffer from an illness or have incurred an injury that is likely to result in your death within a 12-month period
- the certificates are less than 12 months old.

If you qualify for a withdrawal from the SHA special account **and** you have a terminal medical condition, your payment is generally tax-free.

You need to attach certified copies of the relevant medical certificates to your application if you have a terminal medical condition and are making the withdrawal request under one of the categories listed on page 1. Where you have retired due to permanent disability, attach certified copies of medical certificates covering both requirements.

⚠ Former temporary residents who apply for withdrawal because of permanent departure from Australia are not eligible for a tax-free payment.

## HOW TO COMPLETE THIS APPLICATION

### **SECTION A: REASON FOR APPLICATION**

#### **Question 1**

#### **Why are you applying for direct payment?**

Place an 'X' in the applicable box.

### **SECTION B: ACCOUNT HOLDER'S DETAILS**

⚠ The account holder is the individual the account balance in the SHA special account relates to.

Provide your details as they appear on your account statement or correspondence from us.

For more information about making this application on behalf of the account holder, see section D on page 4 of the instructions.

#### **Question 2**

#### **Tax file number (TFN)**

Provide your TFN.

You don't have to provide your TFN to us. However, we may withhold an amount up to the highest marginal tax rate (plus the Medicare levy) from your payment if you don't quote it.

#### **Question 3**

#### **Are you an Australian resident for tax purposes?**

Place an 'X' in the applicable box.

The tax rates that apply to your taxable income depend on whether or not you are an Australian resident. The standards we use to determine your residency status are not the same as those used by the Department of Immigration and Citizenship or Centrelink.

Generally, we consider you to be an Australian resident for tax purposes if any of the following applies:

- you have always lived in Australia or you have come to Australia and live here permanently
- you have been in Australia continuously for six months or more and for most of that time you worked in the one job and lived at the same place
- you have been in Australia for more than half of the current tax year, unless your usual home is overseas and you do not intend to live in Australia.

**Question 4**  
**Name**

Provide your title and full name.

**Have you changed your name?**

If you have changed your name, you need to provide proof, for example, a marriage certificate, deed poll or change of name certificate from the Births, Deaths and Marriages Registration Office.

**Question 5**  
**Residential address**

Provide your residential address.

**Question 6**  
**Postal address**

Provide your postal address.

If this is the same as your residential address, write 'as above'.

**Question 7**  
**Daytime phone number**

Provide your daytime phone number, including the area code (and the country code if you are outside Australia).

**Question 8**  
**Date of birth**

Provide your date of birth.

**Question 9**  
**SHA special account advice IDs**

Provide your SHA special account advice IDs, if possible.

You can find your advice ID on SHA special account documents, such as your:

- opening account statement
- annual account statement
- greater than \$1,200 account balance notice.

Your advice ID is in the bottom right-hand corner, below the date of issue.

**SECTION C: ACCOUNT HOLDER'S SUPPORTING DOCUMENTATION**

Place an 'X' in the applicable boxes.

You must provide **certified copies** of the relevant documents to support your application.

! Do not send originals and do not use pins or staples.

All copied pages of original documents must be certified as true and correct copies by a:

- barrister
- doctor
- judge
- Justice of the Peace
- minister of religion who is authorised to celebrate marriages
- police officer
- bank, building society or credit union officer with at least five years service
- sheriff's officer, or
- solicitor.

They must sight the original document and the copy and certify that each page is a true copy by writing or stamping 'certified true copy', followed by:

- their signature
- their printed name
- their qualification (for example, Justice of the Peace) and relevant reference number
- the date.

! If you are outside Australia, you can take the original documents to the Australian Embassy, High Commission or Consulate. The staff can photocopy and certify them.

If you are unable to reach an Australian Embassy High Commission or Consulate, you can have your documents certified by a:

- notary public
- Justice of the Peace
- judge of the court
- registrar or deputy registrar of a court.

## SECTION D: AUTHORISED PERSON'S DETAILS

! If you are the account holder, you do not need to complete this section.

Only complete this section if you are authorised to act as the legal personal representative of the account holder.

### Question 10 Authorisation

Provide details of your authority to make this application on behalf of the account holder – for example, if you have a power of attorney, a probate, a notice of public trustee or you are an estate trustee.

### Question 11 Name

Provide your title and full name.

### Question 12 Residential address

Provide your residential address.

### Question 13 Postal address

Provide your postal address.

If this is the same as your residential address, write 'as above'.

### Question 14 Daytime phone number

Provide your daytime phone number, including the area code (and the country code if you are outside Australia).

### Question 15 Date of birth

Provide your date of birth.

## SECTION E: AUTHORISED PERSON'S SUPPORTING DOCUMENTATION

! If you are the account holder, you do not need to complete this section.

Place an 'X' in the applicable boxes.

If you are authorised to act on behalf of the account holder, you must provide certified copies of the documents you have marked on the list (page 5) of the application.

! Do not send originals and do not use pins or staples.

### Have you changed your name since taking on this role?

If you have changed your name and not previously advised us, you need to provide a certified copy of evidence of your name change. For example, a marriage certificate, deed poll or change of name certificate from the Births, Deaths and Marriages Registration Office.

For more information about certifying copies of documents, see section C on page 3.

## SECTION F: ELECTRONIC FUNDS TRANSFER (EFT)

### Question 16

#### Direct refund

It's faster and simpler to have your refund paid directly to your Australian financial institution account. Complete your account details in Section F of the form, even if you have provided them to us previously. If you have changed your registered tax agent or have a new account check that you have completed the item with the new details.

**!** If you do not complete this item or do not have an Australian financial institution account, a cheque will be mailed to you.

Complete the following:

- Print the bank state branch (BSB) number. This six-digit number identifies the financial institution. Do not include spaces, dashes or hyphens in the number.
- Print the account number. You cannot use an account number with more than nine characters. Do not include spaces in the account number.
- Print the account name, as shown on the account records. Do not print the account type – for example savings, cheque or mortgage offset. Joint accounts are acceptable. The account name must not exceed 32 characters. If your account name exceeds 32 characters, provide the first 32 characters of your account name in the spaces provided. This figure includes spaces between each word and between initials in the account name.

## SECTION G: DECLARATION

You need to complete one declaration. If you are the account holder, complete the account holder declaration. If you are the authorised person, complete the authorised person declaration.

### How to lodge your application

Keep a copy of this application for your records and send the original, together with the certified copies of your supporting documents, to us at:

**Australian Taxation Office**  
**PO Box 3578**  
**ALBURY NSW 2640**

### ➤ MORE INFORMATION

For more information about the SHA special account:

- visit **ato.gov.au**
- phone us on **13 10 20** between 8.00am and 6.00pm, Monday to Friday
- write to us at  
**Australian Taxation Office**  
**PO Box 3578**  
**ALBURY NSW 2640**

If you do not speak English well and need help from the ATO, phone the Translating and Interpreting Service on **13 14 50**.

If you are deaf or have a hearing or speech impairment, phone us through the National Relay Service (NRS) on the numbers listed below, and ask for the ATO number you need:

- TTY users, phone **13 36 77**. For ATO 1800 free-call numbers, phone **1800 555 677**.
- Speak and Listen users, phone **1300 555 727**. For ATO 1800 free-call numbers, phone **1800 555 727**.
- Internet relay users, connect to the NRS at **relayservice.com.au**

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## **OUR COMMITMENT TO YOU**

We are committed to providing you with accurate, consistent and clear information to help you understand your rights and entitlements and meet your obligations.

If you follow our information in this publication and it turns out to be incorrect, or it is misleading and you make a mistake as a result, we must still apply the law correctly. If that means you owe us money, we must ask you to pay it but we will not charge you a penalty. Also, if you acted reasonably and in good faith we will not charge you interest.

If you make an honest mistake in trying to follow our information in this publication and you owe us money as a result, we will not charge you a penalty. However, we will ask you to pay the money, and we may also charge you interest. If correcting the mistake means we owe you money, we will pay it to you. We will also pay you any interest you are entitled to.

If you feel that this publication does not fully cover your circumstances, or you are unsure how it applies to you, you can seek further assistance from us.

We regularly revise our publications to take account of any changes to the law, so make sure that you have the latest information. If you are unsure, you can check for more recent information on our website at [ato.gov.au](http://ato.gov.au) or contact us.

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**Aged 65 years or older**

Either

One of the following documents:

- Australian drivers licence issued under state or territory law
- passport

Or

One of the following documents:

- birth certificate
- citizenship certificate issued by the Australian Government
- pension card issued by Centrelink that entitles you to financial benefits

AND

One of the following documents:

- letter from Centrelink about a government assistance payment
- notice issued by Australian, state or territory government or local council within the past 12 months that contains your name and residential address, for example, an ATO notice of assessment or a council rates notice.

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**At least 55 years of age and a non-resident**

Provide one of the following documents:

- statutory declaration (made in accordance with the *Statutory Declarations Act 1959*) from you stating you are at least 55 years of age and not in employment
- statutory declaration from your overseas employer stating you are at least 55 years of age and employed in duties performed wholly or principally outside Australia
- travel visa
- proof of overseas residency (a lease or proof of purchase of property)
- proof your Australian property has been sold or is being leased on a long term basis.

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**Former temporary resident**

Provide the following documents:

- visa or evidence you held a temporary visa that has ceased to be in effect (for example, has expired or been cancelled)
- passport showing your photograph and identification pages, together with the page showing your departure stamp from Australia.

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**Ceased employment**

Provide one of the following documents from each former employer who deposited amounts on your behalf into the SHA special account:

- letter stating your employment has been terminated
- statement of termination
- payment summary showing an employment termination payment
- statutory declaration from you, stating your employment has been terminated.

Or

- Employment Separation Certificate* from Centrelink.

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**!** If you have changed your name and not previously advised us, you need to provide a certified copy of evidence of your name change. This can be done by completing the *Change of name and address advice for individuals* form (NAT 2817) or by calling **13 28 61**.











# Individual retired due to permanent disability

I am applying for my superannuation holding accounts special account entitlements on the grounds of permanent disability, in accordance with section 65 of the *Small Superannuation Accounts Act 1995*.

Included below is certification from two legally qualified medical practitioners stating that my disability is likely to result in me being unable ever to be employed in a capacity for which I am reasonably qualified through my education, training or experience.

## 1 LEGALLY QUALIFIED MEDICAL PRACTITIONER

I certify that

is suffering from a medical condition that is likely to result in the patient being unable to ever be employed in a capacity for which he/she is reasonably qualified through education, training or experience.

The start date of the patient's retirement due to permanent disability was  <sup>Day</sup> /  <sup>Month</sup> /  <sup>Year</sup>

Medicare Provider number

Name (Print in BLOCK LETTERS)

Signature

Date

 <sup>Day</sup> /  <sup>Month</sup> /  <sup>Year</sup>

## 2 LEGALLY QUALIFIED MEDICAL PRACTITIONER

I certify that

is suffering from a medical condition that is likely to result in the patient being unable to ever be employed in a capacity for which he/she is reasonably qualified through education, training or experience.

The start date of the patient's retirement due to permanent disability was  <sup>Day</sup> /  <sup>Month</sup> /  <sup>Year</sup>

Medicare Provider number

Name (Print in BLOCK LETTERS)

Signature

Date

 <sup>Day</sup> /  <sup>Month</sup> /  <sup>Year</sup>

▲ Detach form here ▲

