

Employer default fund application form

Complete this form if you are nominating WA Super as your default super fund. As a participating employer WA Super will automatically accept your employees as members of the Fund upon receipt of the first contribution from you, on your employees' behalf.

SECTION 1 - EMPLOYER DETAILS

Registered business name

Trading name (If different to Registered Business Name)

Primary activity of the employer

Street address

Suburb/town

State

Postcode

Phone

Mobile

Email

Contact name

Position title

ABN

No. of employees

SECTION 2 - ACKNOWLEDGEMENT AND DECLARATION

By signing this form you hereby agree:

- that you are authorised to make this nomination on behalf of the employer named in section 1.
- to be bound by the Trust Deed as amended from time to time, governing the superannuation Fund known as WA Super.
- to provide the Trustee with all information and to do all such things as the Trustee requires to comply with Government requirements relating to the Superannuation Guarantee legislation.
- that you have read the Product Disclosure Statement V11.0 issued 21 November 2016 and Member Guide, including the Privacy Statement.

Signature (Authorised Officer of the Employer)

Date

WA Super declares the following:

- The Fund is a regulated superannuation Fund and complies with the Superannuation Industry (Supervision) legislation.
- There is no minimum amounts that can be accepted by the Fund.
- Payments can be made by using a clearing house or 3rd party provider in accordance with SuperStream. Contact WA Super for more information if required.
- The Plan's Superannuation Fund Number is 146651943.
- The Plan's Australian Business Number is 18 159 499 614.
- The Plan's USI is WAL0001AU.
- The Plan's RSE License Number is L0001137 and the RSE registration number is R1004380.
- The Plan's MySuper No. is 18159499614451.