



convert from HESTA Transition to Retirement Income Stream to HESTA Retirement Income Stream



Use this form to move from a HESTA Transition to Retirement Income Stream to a HESTA Retirement Income Stream. Please consult a financial adviser before making a decision. Type in your details or complete in pen using CAPITAL LETTERS. Print 'X' to mark boxes where applicable. **The form must be completed in full.**

1. Personal details

Member number:

Given name/s:

Family name:

Date of birth:

D

D

M

M

Y

Y

Y

Y

Residential address (PO Box not accepted):

Suburb

State/Terr.

Postcode

Postal address (only complete if different from above):

Suburb

State/Terr.

Postcode

Mobile or daytime phone number:

Email:

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It is strongly recommended that you speak to a financial adviser prior to making any decisions in relation to your HESTA Income Stream account.

2. Eligibility to move to HESTA Retirement Income Stream

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Transition to Retirement members are only eligible to convert to a HESTA Retirement Income Stream if they meet one of the following:

X

I've reached age 60 and am permanently retired

Date left employer:

D

D

M

M

Y

Y

Y

Y

X

I'm age 60 to 64 and I've ceased employment, with any employer, since turning age 60

Date left employer:

D

D

M

M

Y

Y

Y

Y

Important note:

If you have never been employed, benefits cannot be paid until you reach age 65.

3. Member declaration

I confirm the details I have supplied are true and correct, and instruct the trustee of HESTA to process my request in accordance with the provisions of the HESTA Trust Deed available at hesta.com.au/disclosures or by calling 1800 813 327.

I acknowledge HESTA has advised me to consider obtaining financial advice.

I understand the conversion will be effective from the date of processing of the form.

I understand if I do not provide you with all information requested in this form, you may not be able to accept or carry out my request.

I have read and understood HESTA's Privacy Collection Statement which is available at hesta.com.au/privacy or by calling 1800 813 327. I consent to my personal information being collected and used by the Trustee for the ongoing administration of my membership by the fund administrator and other service providers.

By providing my email address and/or phone number, I nominate those as my up-to-date contact details, and consent to HESTA providing me with information about HESTA's products and services, as well as marketing communications including third party products and services.

Signature:

Date:

D

D

M

M

Y

Y

Y

Y

Return your completed and signed form to hestais@hesta.com.au or mail to **HESTA, Locked Bag 35007, Collins St West VIC 8007.**

If you have any questions about completing this form, call us on 1300 734 479 between 8.00am and 8.00pm (AET) Monday to Friday.

contact us

hesta@hesta.com.au | 1800 813 327 | Locked Bag 35007, Collins St West VIC 8007 | hesta.com.au

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