

Claiming a superannuation death benefit guide

This document will guide you through the death benefit claims process and outline the documents and information needed.

Losing a loved one can be an extremely challenging and emotional time.* We're here to help you through the process of making a claim and will strive to have this claim paid as quickly as possible.

What is a death benefit?

A superannuation death benefit is a payment made after a member passes away. It consists of:

- their super account balance, plus
- any insurance cover they may have had at the time of their death.

Death benefits don't automatically form part of a deceased member's estate and are not always paid in line with a member's wishes in their Will.

We can only pay a death benefit as allowed by:

- the Superannuation Industry Supervision (SIS)
 Act 1993 (the Act governing management of
 superannuation funds),
- the HESTA Trust Deed (the legal document which sets out the rules of the Fund) available at hesta.com.au/disclosures or by calling 1800 813 327, and
- the Income Tax Assessment Act (ITAA) 1997.

How is a death benefit paid?

It can be paid as either:

- a lump sum, or
- via an income stream for certain eligible dependants, or
- as a rollover to another super fund.

For more information about the HESTA Income Stream, go to **hesta.com.au/income-stream**

Who can claim a benefit?

There are strict legislative requirements and fund rules that guide how we decide who can receive a member's death benefit.

We can only pay a death benefit to eligible dependants of the member or their legal personal representative (LPR). If a dependant or an LPR can not be identified after making reasonable enquiries, we may pay the benefit to another person.

Who is a dependant?

A dependant includes:

- a spouse (includes same-sex and de facto spouse)
- a child including an adult child, adopted child, a stepchild, an ex-nuptial child of the member, and a child of the member's spouse
- any person who was financially dependant on the member to help them meet their daily living expenses and any shared financial commitments
- any person who had an interdependency relationship with the member at the time of their death.

^{*} HESTA's Vulnerable Members Policy sets our commitments and expectations for dealing with members who are experiencing difficulty and require extra care. You can review the policy at hesta.com.au/about-us/disclosures under More Information.

What is an 'interdependency relationship'?

Two people may have an interdependency relationship if they have a close personal relationship, live together, and one or both provides the other with financial support, domestic support and/or personal care.

A close personal relationship may be considered an interdependency relationship if either or both persons have a physical, intellectual or psychiatric disability.

An interdependency relationship does not generally apply to housemates, parents or adult children.

What is a legal personal representative (LPR)?

Generally, this is the person who is managing the deceased member's estate. The LPR is either:

- the executor, if the deceased member left a valid Will, who will be granted Probate (authorising the executor to manage distribution of the member's estate in accordance with the Will), or
- the administrator, if the deceased member died without a Will, who has been granted Letters of Administration.

What if the member has made a binding death benefit nomination?

A binding death benefit nomination is a formal and legal instruction from the member to HESTA instructing us who and in what proportion we must pay their superannuation benefit to when they die.

The nomination must be valid at the time it was made and at the time of the member's death.

A binding death benefit nomination will generally be valid, if:

- it hasn't expired at the time of the member's death
- the people nominated were dependants or LPR of the member at the time of the member's death
- it was received by HESTA before the member's death.

If the deceased member did not make a binding death benefit nomination or the nomination is not valid, we'll need to consider all dependants and personal relationships of the member when deciding who the benefit can be paid to.

Tax on lump-sum payments

Any tax withheld is based on the circumstances of the person to who it is paid to and may be different for each beneficiary. Tax is not calculated or withheld on the 'taxed' component of the deceased member's superannuation balance.

Paid to:	Is tax payable?
 Dependant of the deceased member including: spouse or former spouse a child (under 18) any person financially dependent on the deceased member at the time of death any person in an interdependency relationship with the deceased member at time of death. 	No
Non-dependant (includes a child above the age of 18)	Yes
Legal Personal Representative	Tax payable will depend on whether the beneficiary is a dependant or non-dependant of the deceased. While HESTA does not deduct tax, the Estate may do so at the time the benefit is paid to the beneficiaries of the Will.

For more information about tax rates that would apply go to ato.gov.au

The claims process



1. Claim lodgement:

Start by reviewing the Document Checklist at the end of this Guide. The information you need to provide us is based on the relationship of the potential claimants to our deceased member. Gather the required documents and fill out the Superannuation death benefit claim form.

We know that the loss of a loved one can be an extremely challenging and emotional time. We are here to support you through the process of making a claim. If you have any questions, need help filling out the form or have trouble obtaining any of the required documents, contact us. Give us a call on 1800 813 327, Monday to Friday 8:30am - 5:30pm AET.



2. Claim assessment:

We will start assessing the claim once we have received the necessary documents, including the completed claim form/s. When we receive formal notification of death, we'll switch the member's account to the HESTA Cash and Term Deposits option so the account balance is less likely to be impacted by any investment market movements.

While we try to collect as much information that might be needed through the initial forms, sometimes where there are multiple potential beneficiaries or family complexities, clarification or other documentation may be required. We'll keep you updated throughout the assessment and ensure you understand why we might be asking for certain information. The Trustee will only ask for information that it needs to be able to reach a decision about the eligible beneficairies and the distribution of the payment.

It is important that we receive accurate and complete information to avoid delays.

At the same time as we assess the deceased member's personal relationships, we will also submit the claim to our insurer to assess whether an insurance benefit is payable. If approved, the insurance benefit will be added to the late member's account from the date it is received from the insurer. Any insured benefit or additional contributions received is also invested in the Cash and Term Deposits option.

We aim to assess new information we receive within 5 business days.



3. Decision:

Once we have the information we need, the Trustee will assess and decide who the benefit will be paid to, and in what portion if there are multiple beneficiaries.

The proposed decision will be provided in writing to all parties that submitted an interest to claim. In some circumstances we will give them 28 days to accept the decision or lodge an objection. If an objection is raised, we'll consider the objection and any evidence supporting it. We have 90 days from the expiry of the 28 day period to review the claim and either confirm or vary our original decision. The benefit will not be paid until we confirm or vary our decision. If any parties remain dissatisfied with the outcome, they can lodge a further objection with the Australian Financial Complaints Authority (AFCA) for an independent review. If no objections are received within the 28 day period the claim will proceed with payment.



4. Payment:

We pay death benefits electronically. We'll ask all beneficiaries to provide their preferred banking details by completing a payment form.



We take all measures to resolve all claims as quickly as possible. Depending on the number of persons claiming the benefit and how quickly we can obtain the necessary information to make a decision, it can take approximately 3-6 months to fully assess a claim. For complex cases, involving multiple beneficiaries, it may take longer.

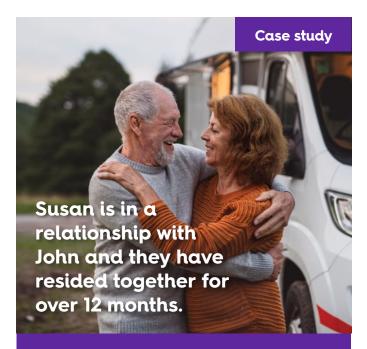
More information on dependants

De-facto

Under superannuation law, a spouse includes a person who is legally married to the deceased member; or a person who, although not legally married to the person, lived with the person on a domestic basis in a relationship as a couple.

When reviewing whether two people were living with each other on a genuine domestic basis in a relationship as a couple, we consider:

- the duration of the relationship;
- the nature and extent of the common residence;
- whether a sexual relationship exists;
- the degree of financial dependence or interdependence;
- the ownership, use and acquisition of property or any other assets;
- the degree of mutual and future commitments to a shared life;
- the care and support of children; and
- the reputation and public aspects of the relationship.



While they don't share all of their finances, John and Susan both contribute to the living expenses and are public about their intention to continue their relationship.

Susan has not made a binding death benefit nomination on her HESTA account.

Susan has three adult children from a previous relationship, who are all financially independent.

We will consider whether John and Susan lived together on a genuine domestic basis in a relationship as a couple. As part of this consideration, we may ask for evidence that John and Susan were living together and sharing responsibility for their living expenses. We may also ask John and people in John and Susan's life to confirm the nature of the relationship.

Did you know?

Susan could have completed a binding death nomination and provided HESTA with instructions on how she wanted her benefit paid.

Financial dependency

Anyone who was being financially supported by the deceased member just before the member died, and who had a reasonable expectation that this support would be ongoing, would generally have high priority in the distribution of a death benefit.

This may include a surviving spouse, minor children or adult children who were receiving ongoing and regular financial support from the member with an expectation for it to continue.

In most cases a child under age 18 is financially dependent however a child of any age can provide evidence of ongoing financial support such as further education expenses.

The extent and expected duration of financial support is a relevant factor we'll consider. For this reason, a surviving spouse who reasonably might have expected to share in the deceased member's retirement income, is often allocated a larger portion.



Jane's adult daughter Samantha lives on government income support benefits and Jane supports Samantha by regularly paying for her rent and depositing money into her bank account.

Jane passes away unexpectedly. Without a valid binding nomination on Jane's account, Samantha needs to provide evidence in the form of regular deposits from Jane and payment of expenses to show she relied on her mum for financial support with no expectation of repayment of this support. HESTA may acknowledge that Samantha is a financial dependant.

Interdependency

Two persons are considered to have an interdependency relationship if:

- they have a close personal relationship, and
- they live together, and
- one or each of them provides the other with financial support; and
- one or each of them provides the other with support and care of a type and quality normally provided in a close personal relationship, rather than by a friend or flatmate.

An interdependency relationship may also exist if two people have a "close personal relationship" which does not meet the other criteria, because:

- they are temporarily living apart; or
- either or both of them suffer from a disability.

Children are generally not considered to have an interdependency relationship with their parents. However, in some cirucmstances parents caring for a disabled child or a child suffering from a serious illness, whether an adult or minor child, may be considered interdependent. In these cases, a parent will usually provide extraordinary support that surpasses the support provided in a normal parent/child relationship. Equally, a child may live with an aged or frail parent, and have a permanent commitment to caring for the parent for the parent's lifetime.



They share expenses and have a close relationship. Patricia is a HESTA member.

Patricia is diagnosed with a chronic medical illness and Jean takes Patricia to her medical appointments. Jean continues to provide Patricia with everyday needs care, such as (but not limited to) contributing to household expenses such as rent/mortgage, utilities and groceries, cooking meals, personal hygiene, and emotional support, while she is unwell.

Sadly, Patricia passes away. After reviewing all of the evidence, HESTA may recognise that Jean and Patricia had an interdependency relationship.

Document checklist

Before submitting a claim, review the below list to ensure that you have collected all required documents. If you have trouble obtaining any of these documents, please contact us so we can assist.

Evidence of	Documents and considerations	
Deceased member death	 A certified copy of the death certificate with the cause of death included. 	
and identity	 A certified copy of the deceased member's proof of age. This can be a passport, driver licence or proof of age card. 	
Will	A certified copy of the late member's Will, if there is one.	
Spouse	A certified copy of the Marriage Certificate.	
	 A certified copy of the Decree Nisi/Divorce Certificate (if applicable). 	
De facto	 Proof of registration of the relationship under a law of a State or Territory (not mandatory but if it exists, this is enough proof for us and no further proof is necessary). 	
	 A statutory declaration completed by two of the following: the de-facto, family members, friends or legal adviser/accountant/minister of religion, verifying the member lived with the person on a genuine domestic basis as a couple, including the nature and duration of the relationship. 	
	 To support your claim, please provide the following documents where they apply to your relationship: 	
	 (a) evidence of joint finances including copies of bank statements, mortgage/lease, household utilities:; 	
	(b) evidence of joint loan documents for major assets like homes, cars or major appliances, that may be in both names;	
	(c) proof you have told government, public or commercial bodies about the existence of you relationship.	
Child	 A certified copy of the birth or adoption certificate(s). 	
	 For adult children we will also require evidence of financial dependency if claiming to have been financially dependent – refer to Financial Dependency. 	
	 For stepchild or ex-nuptial child, marriage certificates and birth certificates to show the relationship between the deceased member and the parent of the stepchild. 	
Interdependency	 Fully completed Interdependency Questionnaire including execution of the statutory declaration at the end of the Claim Form. 	
Financial Dependency	 A statutory declaration/s providing details as to how the claimant relied on the member to meet or assist in meeting daily living expenses, such as utility and household expenses, rent and shared financial commitments (mortgage payments and other loans). The statutory declaration should clearly state the frequency and the amount of financial support provided by the deceased member or late member. To support your claim, please provide evidence of financial support. This may be copies of bank statements that demonstrate regular transfers from the deceased member or evidence of payment of expenses. 	
Legal Personal	A certified copy of the late member's Will, if there is one.	
Representative	 A certified copy of the Grant of Probate or Letters of Administration. If you have not yet received Grant of Probate or Letters of Administration, let us know when you expect to receive them. Alternatively, if you do not intend to apply, please let us know why. Note that we generally require either Probate or Letters of Administration before we make a decision to pay the benefit to the deceased member's estate. 	
Before submitting this o	claim, have you:	
Completed all parts and sign	ned the form?	
Provided a certified copy of		
	the deceased member's proof of age document?	
	ed copy of the deceased member's marriage certificate?	
	the deceased member's Will (if any)?	
	the deceased member's Will (if any)? the Grant of Probate or Letters of Administration (if any)? the children's birth certificate (if any)?	
rilled out the Certifying your	identification form to confirm your identity?	

We're here to help you

If you have any queries or need help with making a death claim, please contact us.



hesta.com.au hesta@hesta.com.au



1800 813 327 or +613 9200 4714 (if calling from overseas)



Send your claim. Scan and email all requirements to **hesta@hesta.com.au** or mail to: HESTA, Locked Bag 5136, Parramatta NSW 2124

superannuation death benefit claim form



Tips to help you complete this form:

- 1. Read the attached Claiming a superannuation death benefit guide
- Use the checklist on the previous page of the Claiming a superannuation death benefit guide to ensure you've provided all necessary documents.
- 3. Complete all sections of this Superannuation death benefit claim form

If there are multiple claimants, they will also be required to submit the forms listed as part of their applications.

Got any questions?

Call us on **1800 813 327** or if calling from overseas **+61 3 9200 4714**

Under superannuation law, HESTA is required to inform all potential beneficiaries of the proposed payment. This means a person's name and details of their relationship with or dependence on the deceased member may be disclosed to other claimants. This information may also be disclosed to HESTA's legal advisers, the Australian Financial Complaints Authority (AFCA) or a court.

Section A: Details of deceased member	r	
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth:	Family name:	
		d Cinale Contact
Relationship status at the date of death: M Residential address (must be provided - PO		d Single Interdependant
	,	
Suburb		State/Terr. Postcode
Date of death: Tax	file number:	
Section B: Personal details of depende	ınts	
	hildren. If there are more than five dependants,	please photocopy the page overleaf and
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth: DDMMYYYY	Family name:	
Residential address (must be provided - PO		
Suburb		State/Terr. Postcode
Phone number:	Email:	
Tax file number†:	Relationship to the deceased member:	Commencement of relationship:
		DDMMYYYY
*We are authorised by law to ask for your IFN. Living with the deceased member at the tim	You do not have to provide it, but if you don't, you e of death? Yes	may pay more tax than you need to. No
Financially dependent on the deceased me		No .
	deceased member at time of death?* Yes	No 🗌
*If ticked 'Yes', please complete Section C.		

Section B continued: Personal details o	of dependants	
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth: DDMMYYY	Y Family name:	
Residential address (must be provided - PO	Box not accepted)	
Suburb		State/Terr. Postcode
Phone number:	Email:	
Tax file number [†] :	Relationship to the deceased member:	Commencement of relationship:
*We are authorised by law to ask for your TFN.	You do not have to provide it, but if you don't, you	ı may pay more tax than you need to.
Living with the deceased member at the time	e of death? Yes 🗌	No 🗌
Financially dependent on the deceased me		No 🗌
In an interdependency relationship with the *If ticked 'Yes', please complete Section C.	deceased member at time of death?* Yes	No _
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth: DDMMYYY	Y Family name:	
Residential address (must be provided - PO	Box not accepted)	
Suburb		State/Terr. Postcode
Phone number:	Email:	
Tax file number [†] :	Relationship to the deceased member:	Commencement of relationship:
*We are authorised by law to ask for your TFN.	You do not have to provide it, but if you don't, you	ı may pay more tax than you need to.
Living with the deceased member at the tim		No _
Financially dependent on the deceased me	_	No 🗌
In an interdependency relationship with the *If ticked 'Yes', please complete Section C.	deceased member at time of death?* Yes	No .
T:N- 14 [] 14 [] 14 [] 2 [] 2 [] 2 [] 2 [] 2 [] 2 [] 2 []	Chara a secondo	
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth: D D M M Y Y	Family name:	
Residential address (must be provided - PO	Box not accepted)	
Suburb		State/Terr. Postcode
Phone number:	Email:	
Tax file number [†] :	Relationship to the deceased member:	Commencement of relationship:
*We are authorised by law to ask for your TFN.	You do not have to provide it, but if you don't, you	ı may pay more tax than you need to.
Living with the deceased member at the time		No 🗌
Financially dependent on the deceased me		No 🗌
In an interdependency relationship with the *If ticked 'Yes', please complete Section C.	deceased member at time of death?* Yes	No [_]

Section B continued: Personal details o	f other dependants	
Provide details of surviving spouse and/or ch	nildren. If there is more than one dependant ple	ease copy this page and attach to this form.
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth: DDMMYYY	Y Family name:	
Residential address (must be provided - PO	Box not accepted)	
Suburb		State/Terr. Postcode
Phone number:	Email:	
Tax file number†:	Polationship to the decoased member	Common company of relationship.
Tax lite Humber.	Relationship to the deceased member:	Commencement of relationship:
tWe are authorised by law to ask for your TFN \	ou do not have to provide it, but if you don't, you	may pay more tax than you need to
Living with the deceased member at the time		No
Financially dependent on the deceased men	<u> </u>	No 🗌
In an interdependency relationship with the *If ticked 'Yes', please complete Section C.	deceased member at time of death?* Yes	No [_]
Section C. Dersonal details of interden	and ante	
Section C: Personal details of interdependent relatives	enaants itionship with the deceased member and wishes	s to claim a death benefit has to complete the
following. Please copy this page to enable ea	•	to claim a death benefit has to complete the
Title: Ms Mrs Miss Mr Dr Other	Given name/s:	
Date of Birth: DDMMYYY	Y Family name:	
Residential address (must be provided - PO	Box not accepted)	
Suburb		State/Terr. Postcode
	_	
	e number: Eme	ail:
Please answer the following:		
Did you have a close personal relationship		Yes No
What was your relationship with the deced What was the duration of your relationship		
Were you living together at the time of dea		∏Yes*
Did one or each of you provide the other w		Yes* No
	with domestic support and personal care?	Yes* No
	the ownership of or use of acquired property?	Yes* No
Did you and the deceased member have Did both of you care and support your chi		Yes*No □Yes* □No
Did both of you enjoy the reputation and p		Yes* No
Did you and the deceased member provide		Yes No
Was the relationship a one of convenience	9?	Yes No
Did either you or the deceased member h	ave a disability?	Yes* No
*If you answered 'Yes' please attach evide	ence to support this claim.	

Section D: Additional information

If there is other information you can provide to assist the Trustee to assess this claim, (such as evidence of joint ownership of property, joint bank accounts, etc) please complete a Statutory Declaration (overleaf) along with supporting evidence.

Section E: Details of the Estate	
Is there a Will? If 'Yes', has Probate been applied for? If Probate has been applied for, has Probate If there is no Will, are Letters of Administration been re *Please provide a certified copy of the Will, Property	peing applied for? Yes No Don't know eccived? Yes* No
Section F: Details of the person making t	
Title: Ms Mrs Miss Mr Dr Other	Given name/s:
Date of Birth: DDMMYYY	Y Family name:
Residential address (must be provided - PO Bo	x not accepted)
Suburb	State/Terr. Postcode
Phone number:	mail:
Tax file number [†] :	elationship to the deceased member: Commencement of relationship:
We are authorised by law to ask for your TFN. You	do not have to provide it, but if you don't, you may pay more tax than you need to.
Section G: Statutory declaration	
You must complete the Statutory Declaration See back page for a list of persons who may v	which must be signed and witnessed by an authorised person. vitness the signing of a Statutory Declaration.
, FULL NAME	
of RESIDENTIAL ADDRESS	
make the following declaration under the Stati	utory Declarations Act 1959:
, and the second se	•
2. I understand that a person who intentionall	n given on this application is true and correct, and y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular.
2. I understand that a person who intentionall	y makes a false statement in a statutory declaration is guilty of an offence under
2. I understand that a person who intentionall section 11 of the Statutory Declarations Act 1	y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular.
2. I understand that a person who intentionall section 11 of the Statutory Declarations Act 1	y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular.
2. I understand that a person who intentionall section 11 of the Statutory Declarations Act 1	y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular. Declared at:
2. I understand that a person who intentionall section 11 of the Statutory Declarations Act 1. Signature: (Person making this declaration)	y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular. Declared at: on DDMMYYYYY
2. I understand that a person who intentionall section 11 of the Statutory Declarations Act 19 Signature: (Person making this declaration) Before me,	y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular. Declared at: on DDMMYYYYY
2. I understand that a person who intentionall section 11 of the Statutory Declarations Act 19 Signature: (Person making this declaration) Before me, FULL NAME	y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular. Declared at: On D M M Y Y Y Y Signature:
2. I understand that a person who intentionall section 11 of the Statutory Declarations Act 19 Signature: (Person making this declaration) Before me, FULL NAME	y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular. Declared at: On D M M Y Y Y Y Signature:
2. I understand that a person who intentionall section 11 of the Statutory Declarations Act 14 Signature: (Person making this declaration) Before me, FULL NAME Qualification of signatory:	y makes a false statement in a statutory declaration is guilty of an offence under 959, and I believe that the statements in this declaration are true in every particular. Declared at: On D M M Y Y Y Y Signature:

contact us

hesta@hesta.com.au | 1800 813 327 | Email form to hesta@hesta.com.au or mail to: HESTA, Locked Bag 5136, Parramatta NSW 2124

certifying your identification



Name:	Member number (if known):		

Proving your identity

To protect you from the risk of identity fraud, you will need to provide certified identification to make a change of name or details, benefit claim, open a HESTA Income Stream or apply for refund of contributions. You can provide certified documents in hard copy or you can provide consent for us to verify your identity electronically with your accompanying application form.

If you are providing ID for an IP or TPD claim, and to avoid any delays in processing your request, send all requirements to: AIA Australia, PO Box 6111, Melbourne VIC 3004.

If you are providing ID for any other claim, and to avoid any delays in processing your request, scan and email all requirements to: hesta@hesta.com.au or mail to: HESTA, Locked Bag 5136, Parramatta NSW 2124.

Type in the information or if writing please do so in CAPITAL letters.
Option 1: Electronic proof of identity
Please provide at least TWO of the following for verification.
Electronic verification If you select this option you do not have to attach any certified documents. We will do all the checks for you. I authorise the use of the below information for this purpose (complete 'Verification of identification' on this form):
My Medicare number is:
Exp. date:
I am person number on this Medicare card
My Australian Driver licence number is:
Card number: (see <i>Driver licence card number</i> under Proof of identification at hesta.com.au/forms-brochures
Exp. date: State of issue:
My Australian passport number is:
Exp. date: D D M M Y Y Y Y Place of birth:
Country of residence:
Name on citizenship document (if applicable):
Family name at birth:

Option 2: Provide certified copies of ID documents

This step-by-step guide details the types of documents we can accept as proof of your identity and what you need to do to certify them correctly.

Hard copy verification

If you select this option you must attach all certified documents.

Acceptable documents

Either

A certified copy of a primary photographic identification document:

- current photographic driver's licence issued under state or territory law (copy of the front and back)
- current passport (including English translation where required).

or

A certified copy of a primary non-photographic identification document:

- birth certificate
- citizenship certificate issued by the Commonwealth of Australia
- pension card issued by Centrelink that entitles you to financial benefits.

and

A certified copy of a secondary identification document:

- a notice issued by a local government body or utilities provider within the preceding three months that shows your name and residential address.
- notice issued by Commonwealth, state or territory government within the past 12 months that shows your name and residential address. For example:
 - Tax Office notice of assessment
 - a notice recording the provision of financial benefits i.e. a Centrelink assistance payment.

Verification of identification

I consent to the Trustee of HESTA verifying my identification via electronic means including in the event my certified documents have not been correctly certified or if I apply for IP or TPD and have been approved for payment.

Signature: Date signed:



Have you changed your name?

If you've changed your name, you'll need to provide a certified linking document proving a relationship exists between two (or more) names.

For a change of name you can request linking documents (eg Marriage certificate, Deed poll, Change of name certificate, Divorce decree or Registered relationship certificate) from the Births Deaths and Marriages Registration Office.

If you are signing on behalf of the applicant, you will need to provide Guardianship papers and Power of Attorney documents.

How to certify

The person authorised to sight and certify documents must:

- sight the ORIGINAL and the copy and make sure they are
- write or stamp 'certified true copy' on all copied pages followed by their signature, printed name, qualification (e.g. Justice of the Peace), registration number (if applicable) and date.

What does a certified document look like?

Samantha Sample has provided a photocopy of her identification that included signature, full name, date of birth, and current residential address.

- The certifying authority has sighted the original identification, and confirmed that the copy is a true copy.
- Details for the certifying authority are included: full name, qualification, registration number (if applicable), date and signature.





"I certify that this document is a true copy of the original

Name: Kate Anderson Date: 31 July 2015

Qualification: Registration no: 222222

Do proof of identity and/or linking documents need to be translated?

If your proof of identity and/or linking documents are in a language that is not understood by the person carrying out the verification, they must be accompanied by an English translation prepared by an accredited translator.

Who can certify my identification document?

For a full listing of people who can certify your documents, see Part 2 of Schedule 1 of the Statutory Declarations Regulations 2023. Some of the people who can certify documents are:

- a medical practitioner
- a nurse
- an optometrist
- a psychologist
- a pharmacist
- a chiropractor
- a veterinary surgeon
- an accountant (member of ATMA, CA ANZ, CPA or IPA)
- a teacher permanently employed on a full time or part time basis at a school or tertiary institution
- a notary public
- a police officer
- a Justice of the Peace
- a magistrate
- a marriage celebrant
- a member of the Governance Institute of Australia Ltd
- a SES employee of the Commonwealth.

What if I don't certify my identity documents correctly?

If the identification documents you send with your application are not certified or incorrectly certified, we may call you to verify your identity over the phone. If you're unable to give us enough information to identify you over the phone, you may need to resend certified proof of identity documents. This will lead to delays in processing your application.

Alternatively you can give your consent for electronic verification of your documents to be completed in the event that your documents have not been correctly certified, please sign the consent section under 'Verification of identification'.

Return your completed form

Scan and email all requirements to hesta@hesta.com.au or mail to: HESTA, Locked Bag 5136, Parramatta NSW 2124

contact us

hesta@hesta.com.au | 1800 813 327 | Email form to hesta@hesta.com.au or mail to: HESTA, Locked Bag 5136, Parramatta NSW 2124