



**Sandhurst**Trustees

# Bendigo SmartStart Super<sup>®</sup>

## **Employer Application Booklet**

This booklet contains:

Employer Application Form

Direct Debit Form

(for the Bendigo Superannuation Contribution Service)

1 July 2019

# Bendigo SmartStart Super<sup>®</sup> Employer Application

## Employer Application Form

Dated 1 July 2019

This application form accompanies the current Bendigo SmartStart Super Product Disclosure Statement and the current Bendigo Superannuation Contribution Service Product Disclosure Statement (PDS). This form is to be used by employers to apply for an interest in Bendigo SmartStart Super (USI STL0050AU) by establishing an employer plan and to apply for access to the Bendigo Superannuation Contribution Service if applicable.

Before you sign this Application Form, Sandhurst or your licensed financial adviser is obliged to give you the PDS which contains important information relating to Bendigo SmartStart Super (the Plan) and the Bendigo Superannuation Contribution Service. The PDS will help you to understand the Plan and/or the Bendigo Superannuation Contribution Service (if applicable) and decide if it is appropriate to your needs. You should read the PDS and the information incorporated into the PDS, if relevant, before investing in the Plan and/or applying for the Bendigo Superannuation Contribution Service.

We also recommend that you read the current Employer Guide available on our website together with the PDS before deciding to establish an employer plan.

Applications from outside of Australia will not be accepted, as the offer made in the PDS is only available to persons receiving the PDS (electronically or otherwise) within Australia.

## Your Personal Information

### Collection of your personal information

Sandhurst collects your personal information, to assess your application, to provide you and your employees with the product or service that you have requested and to assess any future applications for products or services you may make to Sandhurst or our related entities. Collection of some of this information is required by the Anti-Money Laundering and Counter-Terrorism Financing Act 2006. If you provide incomplete or incorrect information we may be unable to provide you with the product or service you are applying for.

### Collection of personal information about third parties

Sandhurst may need to collect personal information about a third party from you as part of this application. If we do this, you agree you will advise that person that we have collected their information, and that in most cases they can access and seek correction of the information we hold about them.

### Use and disclosure of your personal information

Sandhurst may use your personal information, to perform its business functions (for example internal audit, operational risk, product development and planning).

Sandhurst will treat your personal information, as confidential and only disclose it to others where necessary. For example, we usually disclose your information to organisations to whom we outsource functions such as mailing and printing houses, IT providers, our agents and specialist advisers such as

accountants and solicitors. Other disclosures usually include, insurers, intermediaries and government authorities. Your information may be disclosed to our related entities, our joint venture partners and **Community Bank<sup>®</sup>** companies where its confidentiality is maintained at all times.

### Disclosure of personal information to overseas organisations

Some of the organisations Sandhurst discloses your personal information, may be located overseas. Where an organisation is located overseas we will either take reasonable steps to ensure that it complies with Australian privacy laws or we will seek your consent to the disclosure.

### Access to and correction of your personal information

In most cases you can gain access to and seek correction of your personal information. Should you wish to do so, or if you have any queries about your information, please contact us on 1800 033 426.

### Direct marketing

Sandhurst may use your personal information to inform you about financial products and services that are related to those you have with Sandhurst or other products and services we think you may be interested in. These may be products and services provided by Sandhurst, our related entities or other entities we are associated with. If you do not wish to receive any marketing material from us please call us on 1800 033 426.

### Privacy Policy

You should also read our Privacy Policy.

Our Privacy Policy contains information about:

- a.** how you can access and seek correction of your personal information;
- b.** how you can complain about a breach of the privacy laws by Sandhurst and how we will deal with a complaint; and
- c.** if we disclose personal information to overseas entities, and where practicable, which countries those recipients are located in.

Our Privacy Policy is available on our website **[www.sandhursttrustees.com.au](http://www.sandhursttrustees.com.au)** or by telephoning 1800 033 426.

\* Indicates a **mandatory field or section**. If you do not complete all of the mandatory fields or sections, there may be a delay in processing your request. Please complete this form in **black** or **blue** ink using CAPITAL LETTERS (except for email addresses)

<Place your Branch Stamp here>

### Step 1 Employer details

Employer name\*

Business address\*

Town/Suburb\*  State\*  Postcode\*

Postal address

Town/Suburb  State  Postcode

ABN\*

### Contact person

Title\*  Surname\*

Given name(s)\*

Role/Title

Telephone\*  Facsimile

Mobile

Email\*

### Step 2 Contribution method (optional)

Would you like to register for access to the Bendigo Superannuation Contribution Service?

Yes (please indicate how you will make contributions)  Direct debit^  Direct credit

^ Please ensure you complete the Direct Debit Request form contained in this booklet.

If you do not wish to register for the Bendigo Superannuation Contribution Service, please continue to Step 3.

### Step 3 Nominated employees\*

Please provide details of the first employee(s) you intend to enrol in this employer plan. If there is insufficient space, please list employee details on a separate, signed sheet and forward with this application.

#### Employee 1

Title*	<input type="text"/>	Surname*	<input type="text"/>
Given name(s)*	<input type="text"/>		
Tax file number*	<input type="text"/> <sup>1</sup>	Date of birth*	<input type="text"/> / <input type="text"/> / <input type="text"/> Sex* M <input type="checkbox"/> F <input type="checkbox"/>
Residential address*	<input type="text"/>		
Town/Suburb*	<input type="text"/>	State	<input type="text"/> Postcode* <input type="text"/>
Telephone*	<input type="text"/>	Mobile	<input type="text"/>
Email*	<input type="text"/>		
Occupation*	<input type="text"/>		
Date commenced employment *	<input type="text"/> / <input type="text"/> / <input type="text"/>	Active Employment* <sup>^</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No

<sup>^</sup> By placing a tick in the yes box above, I declare that the employee is actively performing or capable of actively performing all of the duties and work hours of his or her usual occupation free from any limitation due to illness or injury for at least 30 hours per week. If the employee is on employer approved leave for reasons other than illness or injury, answer as being in active employment. For further details, please refer to the current Bendigo SmartStart Super Insurance Guide.

<sup>1</sup> Under the Superannuation Industry (Supervision) Act 1993, Sandhurst, is authorised to collect your employee's Tax File Number (TFN), which will only be used for legal purposes and in accordance with Sandhurst's privacy policy. If your employee has provided their TFN to you, then you must supply the TFN to Sandhurst as required by law. While it is not an offence for your employee not to quote their TFN, there may be consequences. Please ensure that your employees refer to the 'How Super is taxed' section of the PDS about the consequences of not providing TFNs.

#### Employee 2

Title*	<input type="text"/>	Surname*	<input type="text"/>
Given name(s)*	<input type="text"/>		
Tax file number	<input type="text"/> <sup>1</sup>	Date of birth*	<input type="text"/> / <input type="text"/> / <input type="text"/> Sex* M <input type="checkbox"/> F <input type="checkbox"/>
Residential address*	<input type="text"/>		
Town/Suburb*	<input type="text"/>	State	<input type="text"/> Postcode* <input type="text"/>
Telephone*	<input type="text"/>	Mobile	<input type="text"/>
Email*	<input type="text"/>		
Occupation*	<input type="text"/>		
Date commenced employment*	<input type="text"/> / <input type="text"/> / <input type="text"/>	Active Employment* <sup>^</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No

<sup>^</sup> By placing a tick in the yes box above, I declare that the employee is actively performing or capable of actively performing all of the duties and work hours of his or her usual occupation free from any limitation due to illness or injury for at least 30 hours per week. If the employee is on employer approved leave for reasons other than illness or injury, answer as being in active employment. For further details, please refer to the current Bendigo SmartStart Super Insurance Guide.

<sup>1</sup> Under the Superannuation Industry (Supervision) Act 1993, Sandhurst, is authorised to collect your employee's Tax File Number (TFN), which will only be used for legal purposes and in accordance with Sandhurst's privacy policy. If your employee has provided their TFN to you, then you must supply the TFN to Sandhurst as required by law. While it is not an offence for your employee not to quote their TFN, there may be consequences. Please ensure that your employees refer to the 'How Super is taxed' section of the PDS about the consequences of not providing TFNs.



Employee 5

Title\*  Surname\*

Given name(s)\*

Tax file number <sup>1</sup> Date of birth\*  /  /  Sex\*  M  F

Residential address\*

Town/Suburb\*  State  Postcode\*

Telephone\*  Mobile

Email\*

Occupation\*

Date commenced employment\*  /  /  Active Employment\*<sup>^</sup>  Yes  No

<sup>^</sup> By placing a tick in the yes box above, I declare that the employee is actively performing or capable of actively performing all of the duties and work hours of his or her usual occupation free from any limitation due to illness or injury for at least 30 hours per week. If the employee is on employer approved leave for reasons other than illness or injury, answer as being in active employment. For further details, please refer to the current Bendigo SmartStart Super Insurance Guide.

<sup>1</sup> Under the Superannuation Industry (Supervision) Act 1993, Sandhurst, is authorised to collect your employee's Tax File Number (TFN), which will only be used for legal purposes and in accordance with Sandhurst's privacy policy. If your employee has provided their TFN to you, then you must supply the TFN to Sandhurst as required by law. While it is not an offence for your employee not to quote their TFN, there may be consequences. Please ensure that your employees refer to the 'How Super is taxed' section of the PDS about the consequences of not providing TFNs.

Step 4 (Only complete if you are applying to access the Bendigo Superannuation Contribution Service)

**Authorised officer(s)**

Primary authorised officer

Title\*  Surname\*

Given name(s)\*

Position/Title

Telephone\*  Facsimile

Mobile

Email\*

Authorised Officer address  
(if different to Employer/Company)

Town/Suburb\*  State  Postcode\*

Authorised Officer mailing address  
(if different to above)

Town/Suburb\*  State  Postcode\*

Telephone\*  Mobile

Authorised officer 2

Title\* [ ] Surname\* [ ]
Given name(s)\* [ ]
Position/Title [ ]
Telephone\* [ ] Facsimile [ ]
Email\* [ ]

Authorised officer 3

Title\* [ ] Surname\* [ ]
Given name(s)\* [ ]
Position/Title [ ]
Telephone\* [ ] Facsimile [ ]
Email\* [ ]

Do you want dual authorisation?\* [ ] Yes [ ] No Dual authorisation requires two users to authorise a contribution batch prior to submission.

Payment frequency

Please indicate your preferred payment frequency: [ ] Weekly [ ] Fortnightly [ ] Four weekly [ ] Monthly [ ] Quarterly

Upload facility

Do you want to use the payroll upload facility? [ ] Yes [ ] No # This option is dependent on your payroll system generating a file in ".csv" or ".txt" format. If you would like to use this facility please provide a sample of your .csv or .txt file with your application.

Bank account details for contribution refunds^

Name of financial institution [ ]
Branch address [ ]
Town/Suburb\* [ ] State [ ] Postcode\* [ ]
Account name [ ]
BSB [ ] Account number [ ]

^ This bank account will be credited if a contribution is returned by a Choice Fund or if we are not able to reconcile a payment that is intended to be made to a Choice Fund.

Step 5 Employer declaration

- I/We have received the current Bendigo SmartStart Super Product Disclosure Statement (PDS) within Australia and understand that applications from outside Australia will not be accepted.
I/We have read and understood the PDS to which this application relates and hereby wish to establish an employer plan in Bendigo SmartStart Super (the Plan).
I/We understand that Sandhurst Trustees Limited (Sandhurst) will act as trustee of the Plan.
I/We acknowledge that future transactions in relation to my employer plan will be made on the terms of the Trust Deed, as amended from time to time, and the terms and conditions applicable to the Plan from time to time.
I/We also apply on behalf of the employee(s) named in step 3 and other employees in respect of whom I/we will from time to time contribute on behalf of to Bendigo SmartStart Super.

- The application consists of this form in the case of me/us and the employee(s) named in step 3 and in the case of each other employee, employee details provided in respect of each employee.
- I/We acknowledge that should any of the information I provide in this Application change, I/we will notify Sandhurst of such changes as soon as possible.
- I/We acknowledge that it is the responsibility of the employer to meet its Superannuation Guarantee obligations.
- I/we declare that all details given in this Application are accurate and complete and that I/we have the power to invest in the Plan.
- I/we undertake to provide Sandhurst with any further information that it may request which relates to my/our participation in the Plan.

## Investment

- I/We agree to receive the product disclosure statements for the managed fund investment options (including those used in the Bendigo MySuper investment option) by Sandhurst and acknowledge that Sandhurst has provided me with access to those product disclosure statements via the Plan's website at sandhursttrustees.com.au.
- I/We acknowledge that neither Sandhurst nor any other person guarantees the return of capital or the performance of the investment funds.

## Insurance

I/we acknowledge and agree that:

- The insurance arrangements applicable to my employees under the Plan are governed by the terms and conditions contained in the group life insurance policy issued by TAL Life Limited to Sandhurst, in its capacity as trustee of the Plan.
- The information contained in the PDS is only a summary of the main terms and conditions of the insurance offered under the Plan and I agree that I can, and my employees can, access the full terms and conditions governing the insurance arrangements by contacting Sandhurst's Client Services Team on 1800 033 426.
- If my employees do not decline the Standard default cover, premiums will be deducted from their account for so long as cover continues.

## Anti-Money Laundering and Counter Terrorism Financing (AML/CTF)

- I/We understand that Sandhurst must adhere to AML/CTF rules. These require Sandhurst to undertake ongoing due diligence of customers and transactions within the Plan.
- I/We understand that Sandhurst must immediately monitor and report any suspicious transactions or matters to the appropriate authority.

By making an application, I/we acknowledge and warrant to Sandhurst that:

- I/We have not knowingly done anything to put Sandhurst in breach of AML/CTF laws;
- I/We will notify Sandhurst if I/we become aware of anything that would put Sandhurst in breach of AML/CTF laws;
- If requested, I/we will provide additional information and assistance and comply with all reasonable requests to facilitate Sandhurst's compliance with AML/CTF laws;
- I/We am/are not aware and have no reason to suspect that the money used to fund investments in the Plan is derived from or related to money laundering, terrorism financing or similar illegal activities; and proceeds of investment made in connection with this product will fund illegal activities.

## Electronic instructions

In respect of electronic instructions (email, fax) relating to notifying Sandhurst of a change in details, I/we agree and acknowledge that Sandhurst:

- Will not accept electronic instructions unless it is received in full and accompanied by my/our scanned or faxed signatures (unless those instructions are received electronically through my/our Bendigo Superannuation Contribution Service authorised account, if relevant);
- Is not responsible for any loss or delay that results from a transmission not being received by Sandhurst;
- Will not accept a receipt confirmation from the sender's facsimile machine or computer as evidence of receipt of the instructions;
- Will not compensate me/us for any losses relating to electronic instructions, unless required by law; and
- Does not take responsibility for any fraudulent or incorrectly completed electronic instructions. In the event of fraud I/we agree to release Sandhurst from, and indemnify Sandhurst against, all losses and liabilities whatsoever arising from my/our acting in accordance with any instructions received electronically bearing my/our employer plan name and a signature purportedly mine/ours.



If applying for access to the Bendigo Superannuation Contribution Service

- I/we have read the current Bendigo Superannuation Contribution Service PDS (PDS) and agree to be bound by its terms and conditions;
- I/we hereby apply to use the Service and the Authorised Officer(s) named in Step 4 of this form have our authority to use the Bendigo Superannuation Contribution Service (Service) on our behalf;
- I/we will determine the appropriateness of the Service for our needs, and understand the risks associated with using the Service;
- The fees payable by us for using the Service are as set out in the PDS; and
- I/we authorise Sandhurst to act on any instructions received through the Service in accordance with the terms and conditions set out in the PDS.

Two signatures are required (unless Sole Director/Trader)

Employer Representative 1

Director/Partner 1  Company Secretary  Sole Director/Trader

Position

Title  Surname

Given name(s)

Signature#  Date  /  /

#If you are a Sole Director/Trader only one signature is required. A director can sign jointly with another director or a company secretary.

Employer Representative 2

Director/Partner 2  Company Secretary

Position

Title  Surname

Given name(s)

Signature##  Date  /  /

## If there is more than one director/company signatory a second signatory is required. A director can sign jointly with another director or a company secretary

Step 6 Adviser use only

Adviser full name

Dealer Group name

AFSL number

Adviser signature  Date  /  /

**Please send completed form to:** Bendigo SmartStart Super  
 GPO Box 264  
 Melbourne VIC 3001  
 OR Email: [superannuation@bendigobank.com.au](mailto:superannuation@bendigobank.com.au)

# Bendigo Superannuation Contribution Service

## Direct Debit Request (Employer initiated)



Use this form if you would like to make superannuation contributions in respect of your employees via the Bendigo Superannuation Contribution Service by Direct Debit, or to update an existing Direct Debit Request.

Please read the Direct Debit Service Agreement at the end of this form before completing this request.

This Direct Debit Request, together with the Direct Debit Service Agreement, is an agreement between Sandhurst Trustees Limited (ABN 16 004 030 737) (Sandhurst) (User ID 165221) and IOOF Investment Management Limited (ABN 53 006 695 021) (IIML) (APCA ID 032105) (collectively, the 'Debit Users') AND the Employer, whose details are set out at Step 1 below, and supersedes any previous direct debit arrangement between the Debit Users and the Employer in relation to the Bendigo Superannuation Contribution Service.

### Step 1 Employer details

Employer /company name										
ABN				Plan number (if known)						

### Step 2 Account details (account to be debited)

Name of financial institution											
Branch address											
Town/Suburb						State			Postcode		
Account name											
Branch (BSB) number				Account number							

### Step 3 Declaration and signature

#### By signing this form, you declare as follows:

- I/we request and authorise the Debit Users to debit my/our account nominated above (Account) for the payment of Employer plan contributions and Choice contributions through the Bulk Electronic Clearing System (BECS) as part of the Bendigo Superannuation Contribution Service.
- I/we acknowledge and agree that Sandhurst will debit Employer Plan Contributions from my/our Account, and that IIML will debit Choice Contributions from my/our Account, including any applicable fees.
- I/we acknowledge that I/we have read the Direct Debit Service Agreement, and understand that the Direct Debit Service Agreement and this Direct Debit Request sets out the terms and conditions upon which I/we have authorised the Debit Users to deduct payments from my/our Account, and I/we agree to the terms and conditions.
- I/We understand and acknowledge that the Debit Users may in their absolute discretion, at any time by notice in writing to me /us, may suspend or terminate this Direct Debit Request.
- I/we agree to meet any charges resulting from my/our use of Direct Debit (including reimbursing any dishonour fees charged to the Debit Users) and agree that the Debit Users may charge these fees directly to me/us.
- I/we understand that if there is an alteration to the Direct Debit Service Agreement, the Debit Users will provide 14 days written notice before the alteration takes place.
- I/We have read and understood each Debit User's Privacy Policy which is available at [www.sandhursttrustees.com.au](http://www.sandhursttrustees.com.au) and [ioof.com.au](http://ioof.com.au) respectively, and agree that the each Debit User may collect, use and disclose my/our personal information in accordance with their relevant Privacy Policy.
- I/we understand that the Debit Users will not compensate me/us for any losses relating to this Direct Debit Request, unless required by law; and
- I/we understand that the Debit Users do not take responsibility for any fraudulent or incorrectly completed Direct Debit Request. In the event of fraud, I/we agree to release the Debit Users from, and indemnify the Debit Users against, all losses and liabilities whatsoever arising from the Debit Users acting in accordance
- The information I/we have provided is true and correct.

### Step 3 Declaration and signature (continued)

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#### Signatory 1

Title	<input type="text"/>	Surname	<input type="text"/>
Given name(s)	<input type="text"/>		
Position	<input type="text"/>		
Residential address	<input type="text"/>		
Town/Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>
Signature	<input type="text"/>		
	<input type="text"/>		
Date	<input type="text"/>		
	<input type="text"/>		

#### Signatory 2

Title	<input type="text"/>	Surname	<input type="text"/>
Given name(s)	<input type="text"/>		
Position	<input type="text"/>		
Residential address	<input type="text"/>		
Town/Suburb	<input type="text"/>	State	<input type="text"/>
		Postcode	<input type="text"/>
Signature	<input type="text"/>		
	<input type="text"/>		
Date	<input type="text"/>		
	<input type="text"/>		

### Direct Debit Service Agreement

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This Direct Debit Service Agreement explains what your obligations are when entering into a direct debit arrangement with the Debit Users. It also details what the Debit Users' obligations are to you as your direct debit provider. Please keep this Agreement for future reference. It forms part of the terms and conditions of your Direct Debit Request and must be read in conjunction with your Direct Debit Request authorisation.

#### Definitions

- Account** means the account held at your financial institution from which We are authorised to arrange for funds to be debited.
- Agreement** means this Direct Debit Request Service Agreement between you and Us.
- Banking Day** means a day other than a Saturday or a Sunday or a national/state/territory public holiday.
- Choice contributions** means contributions made by a participating employer to a Choice Fund.
- Choice Fund** means a superannuation fund other than a participating employer's Employer plan.
- Clearing Account** means the bank account maintained by IIML for the purpose of receiving Choice contributions.
- Debit day** means the day that payment by You to Us is due.
- Debit Payment** means a particular transaction where a debit is made.
- Direct Debit Request** means the Direct Debit Request between Us and You.
- Employer plan** means a Participating employer's plan in Bendigo SmartStart Super.
- Employer plan contributions** means contributions made by a participating employer to their Employer plan.
- Participating employer** means an employer who has established an Employer plan under Bendigo SmartStart Super.
- Transact** means the online superannuation administration and processing facility for employers through which data can be uploaded and superannuation contributions can be made.

## Direct Debit Service Agreement (continued)

**Us or We or Our** mean the Debit Users who You have authorised to make deductions from your Account by signing and completing a Direct Debit Request.

**You** means the person(s) who has/have signed or authorised by other means the Direct Debit Request.

**Your Financial Institution** means the financial institution nominated by You on the Direct Debit Request at which the Account is maintained.

### 1. Debiting your Account

- 1.1 By signing a Direct Debit Request, You have authorised Us to arrange for funds to be debited from your Account. You should refer to the Direct Debit Request and this Agreement for the terms of the arrangement between Us and You.
- 1.2 We will only arrange for funds to be debited from your Account as authorised by You via Transact.
- 1.3 If the debit day falls on a day that is not a banking day, we may direct your financial institution to debit your account on the following banking day. If you are unsure about which day your account has or will be debited you should ask Your Financial Institution.

### 2. Amendment by Us

We may vary any details of this Agreement or a Direct Debit Request at any time by giving You at least fourteen (14) days written notice.

### 3. Amendment by You

You may change, stop or defer a Debit Payment, or terminate this Agreement by providing Us with at least fourteen (14) days notification in writing to:

Bendigo SmartStart Super  
GPO Box 264  
Melbourne VIC 3001

or arranging it through Your Financial Institution, which is required to act promptly on your instructions.

### 4. Your obligations

- 4.1 It is your responsibility to ensure that there are sufficient clear funds available in your Account to allow a Debit Payment to be made in accordance with the Direct Debit Request.
- 4.2 If there are insufficient clear funds in your Account to meet a Debit Payment:
  - (a) You may be charged a fee and/or interest by Your Financial Institution;
  - (b) You must arrange for the Debit Payment to be made by another method or arrange for sufficient clear funds to be in your Account by an agreed time so that We can process the Debit Payment.
- 4.3 You should check your Account statement to verify that the amounts debited from your Account are correct.

### 5. Dispute

- 5.1 If You believe that there has been an error in debiting your Account, You should notify Us directly on 1800 033 426 and confirm that notice in writing with Us as soon as possible so that We can resolve your query more quickly. Alternatively you can take it up directly with Your Financial Institution.
- 5.2 If We conclude as a result of our investigations that your Account has been incorrectly debited We will respond to your query by arranging for Your Financial Institution to adjust your Account (including interest and charges) accordingly. We will also notify You in writing of the amount by which your Account has been adjusted.
- 5.3 If We conclude as a result of our investigations that your Account has not been incorrectly debited we will respond to your query by providing You with reasons and any evidence for this finding in writing.

### 6. Accounts

You should check:

- (a) with Your Financial Institution whether direct debiting is available from your Account as direct debiting is not available on all Accounts offered by financial institutions.
- (b) your Account details which you have provided to Us are correct by checking them against a recent Account statement; and
- (c) with Your Financial Institution before completing the Direct Debit Request if you have any queries about how to complete the Direct Debit Request.

### 7. Confidentiality

- 7.1 We will keep any information (including your Account details) in your Direct Debit Request confidential. We will make reasonable efforts to keep any such information that We have about You secure and to ensure that any of Our employees or agents who have access to information about You do not make any unauthorised use, modification, reproduction or disclosure of that information.
- 7.2 We will only disclose information that We have about You:
  - (a) to the extent specifically required by law; or
  - (b) for the purposes of this Agreement (including disclosing information in connection with any query or claim).

### 8. Notice

- 8.1 If you wish to notify Us in writing about anything relating to this Agreement, You should write to

Bendigo SmartStart Super  
GPO Box 264  
Melbourne VIC 3001

- 8.2 We will notify You by sending a notice in the ordinary post to the address you have given Us in the Direct Debit Request.
- 8.3 Any notice will be deemed to have been received on the third Banking Day after posting.

Sandhurst Trustees Limited ABN 16 004 030 737 AFSL No 237906 is the trustee and issuer of Bendigo SmartStart Super® ABN 57 526 653 420 and issuer of the Bendigo Superannuation Contribution Service.



Bendigo and Adelaide Bank Limited ABN 11 068 049 178 169 1326688 - 1326686 (06/19)