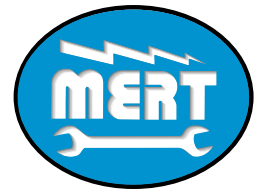


MERT Redundancy Benefit Claim

Please complete all sections in **black** ink using **BLOCK** letters and send to:
MERT Administration, Locked Bag 20, Parramatta NSW 2124 or email mertadmin@as.com.au



Section A: Employer to complete Note: Delays will occur if Section A is not completed by the employer.

Company Name

MERT Employer Number

Employer's Telephone Number

Terminated employee details

Employee's Name

Commencement Date (dd/mm/yyyy)

Termination Date (dd/mm/yyyy)

I hereby certify that the member/employee ceased employment on the above date.

Signature of Employer/Authorised Person



Date (dd/mm/yyyy)

Section B: Member/Employee to complete

Membership Number

Date of Birth (dd/mm/yyyy)

Telephone Number

Tax File Number

Note: Providing your Tax File Number is voluntary. However, failure to do so, will result in the Fund Administrator deducting the highest marginal tax rate.

I, Mr/Mrs/Ms/Miss

Surname

Given Names

of, Street Number / PO Box

Street Name

Suburb / Town

State

Postcode

Personal Email Address

hereby request payment of: ☐ Full payment of my benefit **OR** ☐ Part payment \$, (before tax)

Payment is to be:

☐ directly into my bank account (details below) ☐ paid by cheque and posted to my above address

NOTE: Please provide a copy of your Bank Statement or Deposit Slip showing your Name, BSB and Account Number if you want payment by direct deposit. If not received, a cheque will be posted to you.

Six digit Branch BSB Number

Account Number

Account Name

Bank/Building Society

Branch/Suburb

Signature of Employee



Date (dd/mm/yyyy)

Information - to assist employers/members in completing the benefit claim form

Definition of Redundancy

"Redundancy" means the termination or cessation of employment of an employee for any reason.

"Redundancy payments" are those paid by an employer that an employee is legally entitled to receive on termination as prescribed by the relevant award or enterprise agreement, or the amount the employer has contributed to MERT whichever is greater. Redundancy payments can only be claimed on termination of employment.

Employer

Section A: Is to be fully completed by the employer, before the form is given to the member.

Employee Entitlement:

Upon redundancy the employee is legally entitled to receive a redundancy payment, as prescribed by the relevant award or enterprise agreement (whichever is applicable) or the amount that the employer has contributed into MERT, whichever is the greater amount. To ensure employees receive their legal entitlement, please complete the following:

- Employee's entitlement as provided for under an award or enterprise agreement (A) \$
- Amount of redundancy contributions made to MERT on behalf of the employee (B) \$
- Balance or amount outstanding (Deduct (B) from A) (C) \$

Where the amount at (C) is nil then the employer has no payment to make to the employee. If the amount shown at (A) is greater than the amount shown at (B) then the employer is required to pay the employee the difference, being the amount shown at (C). The employee will receive the amount in (B) directly from MERT.

Member

Section B: Is to be completed by the member/employee.

Note: The member/employee needs to make a decision on termination, as to whether he/she wishes to claim their full entitlements, or only part of their entitlement. Circumstances surrounding payment may affect options, ie, previous employer rollover not applicable. Please contact the Fund Administrators for more information. This section also allows nomination of payment method, ie, cheque or electronic fund transfer.

Payment

Payment will be processed by the Fund Administrators, within 3 business days of the completed claim form being received, either by cheque or electronic fund transfer, whichever method of payment is nominated.

NOTE: If requesting payment to be paid directly into your bank account a copy of your bank statement or a Preprinted personalised deposit slip that has been issued to you showing Name of account holder, BSB and Account number must be supplied.

Lodgement of Claim Form

The completed claim form is to be returned to the Fund Administrators. This claim form can be sent by fax emailed or posted to the address listed below. A copy of the Separation Certificate from the employer, Long Service Leave Certificate, Group Certificate, your current income statement for benefits from Centrelink or documentation from a third party confirming your termination is to be attached to claim form.

Applicable Taxation

Redundancy payments paid on termination are classified as Eligible Termination Payments (ETPs). ETPs are subject to the following tax rates, (plus Medicare levy) which will be deducted by the Fund Administrators upon payment of the benefit.

- Preservation Age and over 15% (up to the threshold) plus Medicare Levy
- Under Preservation Age 30% plus Medicare Levy

Your Preservation Age is shown in the Table below:

Date of birth	Preservation age
Before 1 July 1960	55
1 July 1960 – 30 June 1961	56
1 July 1961 – 30 June 1962	57
1 July 1962 – 30 June 1963	58
1 July 1963 – 30 June 1964	59
From 1 July 1964	60

The relevant Age is your Age at the end of the financial year you receive your benefit.

Rollover of ETPs

Changes to Rollover of ETP's came into effect from 1/7/2012. ETP Rollover to superannuation option is no longer permitted.