



5. Declaration

I declare that the information I have provided on this form is true and correct;

I understand that if I nominate an amount that is below the minimum or above the maximum pension limits (for transition to retirement pensions) set by government, the requested pension amount will be automatically adjusted to be within the prescribed limits;

If this form is signed under Power of attorney the Attorney declares that he/she has not received notice of revocation of that power (a certified copy of the Power of Attorney must be submitted with this form if not previously provided).

Signature

Date / /

Full Name

