

Investment Bond Death Claim Discharge Form



Please use **BLOCK** letters and a black or blue pen to complete this application form.

Please indicate using an "X" where appropriate.

If a section does not apply to you, please indicate using "N/A".

Office use only

1. Particulars of the deceased

Account Number

Title Mr Mrs Ms Miss

Surname

Given name(s)

Date of birth

Address

Suburb State

Postcode Country (if not Australia)

Did the deceased leave a will?

Yes No

2. Particulars of the claimant

Title Mr Mrs Ms Miss

Surname

Given name(s)

Date of birth

Address

Suburb State

Postcode Country (if not Australia)

Contact number (business hours)

Email

Preferred contact method Phone Email

3. Relationship of claimant to the deceased

Please indicate using an "X"

- Executor Assignee Administrator Nominee
- Other (please specify)

Declaration of claimant

I declare that I am legally entitled to receive the sum payable under the above mentioned policy. I/we hereby covenant to indemnify and forever indemnified Australian Unity Investment Bonds Limited and its Agents from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs and expenses whatsoever, which may be made or brought against it by reason of compliance with this request.

Signature of claimant

X

Date / /

Signature of referee

X

Date / /

Persons signing this statement should note that the law imposes severe penalties for making false statements (\$10,000 or imprisonment for two years or both) or failing to ensure that a statement is not false or misleading (\$5,000 or imprisonment for 1 year or both).

4. Important documents required

To ensure that we are able to process your Death Claim Discharge quickly and efficiently, please 'X' that you have included the following documents:

<input type="checkbox"/>	(a) Original policy certificate Note: If you do not have the original policy certificate you must complete Section 5. Statutory Declaration
<input type="checkbox"/>	(b) Full (or Extract) Death certificate - original or certified copy
<input type="checkbox"/>	(c) Last known Will or Letters of Administration - original or certified copy
<input type="checkbox"/>	(d) Probate is required if the claim exceeds \$50,000 - original or certified copy Note: Item (d) is not required if a valid Nomination Form is held by Australian Unity

Please see overleaf for a list of acceptable persons who may certify copies of original documents.

Where your documents need to be certified, we suggest that the person certifying the document(s) for you use the following statement on the copy being certified:

'I certify this to be a true copy of [name of document] the original of which, was produced to me at the time of signing.'

The documents must also be dated, and have the signature, printed name, occupation, employer and address of the person certifying the document.

List of persons who can certify copies of original documents:

- Accountants (members of the Institute of Chartered Accountants, the Australian Society of CPA's or the National Institute of Accountants).
- Aldermen or Councillors of Municipal or Shire Councils.
- Bank, Building Society and Credit Union employees and agents authorised by their institution to open accounts.
- International Banks employees authorised by their institution to open accounts where the International Bank engages in a transaction with a cash dealer.
- Bailiffs.
- Barristers.
- Clerks of Courts.
- Clerks of Petty Sessions.
- Commissioned officers currently serving in the defence forces.
- Dentists.
- Diplomatic or consular officers to an Australian Embassy.
- Holders of statutory offices for which an annual salary is payable.
- Insurance Company full-time employees who have been employee continuously for at least five years by such company.
- Judges and Masters of Federal or State Parliament.
- Members of an aboriginal community council and recognised community elders of an aboriginal community.
- Medical Practitioners.
- Members of Federal or State Parliament.
- Members of the Legislative Assembly of the ACT, Northern Territory or Norfolk Island.
- Ministers of Religion who are authorised Marriage Celebrants.
- Notaries public.
- Nursing sisters.
- Pharmacists.
- Police officers in charge of police stations.
- Police officers in the rank of Sergeant or any greater ranking.
- Postal managers.
- Public employees - current full-time employees of Commonwealth, State, Territory or Local Governments or Statutory Authorities, who have been employees for at least 5 years by one or more of those employers.
- Registrars of Federal or State Courts.
- Sheriffs.
- Solicitors.
- Stipendiary Magistrates.
- Teachers - full time, who have been teaching for more than 5 years at schools or tertiary institutions.

5. Death claim Statutory Declaration

Please complete this section only if you do not have the original policy certificate.

Please use **BLOCK** letters and a black or blue pen.

(1) Here insert name, address and occupation of persons making the declaration

I⁽¹⁾,

do solemnly and sincerely declare that:

To the best of my knowledge and belief the said Bond Certificate has been lost. A proper search and diligent enquiries have been made to locate the said Bond Certificate, however, no trace of it can be found.

I make this solemn declaration by virtue of the Statutory Declaration Act 1959 as amended and subject to the penalties provided in that Act for the making of false statements in the statutory declarations, conscientiously believing the statements contained in the declaration to be true in every particular.

(2) Signature of person(s) making the declaration

.....

Declared at

On

Before me,

(3) Signature of person(s) before whom the declaration is made

.....

(4) Here insert printed name, qualifications and address of person whom the declaration is made

.....

Note: A person who willfully makes a false statement in a statutory declaration under the Statutory Declaration Act 1959 as amended is guilty of an offence against this Act the punishment for which is a fine not exceeding \$200 or imprisonment for a term not exceeding six months or both if the offence is prosecuted summarily, or imprisonment for a term not exceeding four years if the offence is prosecuted upon indictment.

Please send your completed form to:

Australian Unity Investments
Reply Paid 64466
South Melbourne VIC 3205

Or fax your completed form to:

(03) 8682 5057

and send the original form to the address indicated at left.

Contact us

Investor Services

T 13 29 39
F 03 8682 5057

Australian Unity Investments
114 Albert Road
South Melbourne Vic 3205

Website:

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Email:

investments@australianunity.com.au