

Application to become a Contributing Employer

Only complete this form if you are applying to become a contributing employer of this fund.

To the Trustee, LUCRF Pty Ltd

- The Employer hereby makes application to become a contributing employer of the Labour Union Co-operative Retirement Fund as established by the Trust Deed
- If accepted as a contributing employer of the Fund:
 - (a) The Employer agrees to be bound by the terms and conditions of the Trust Deed
 - (b) The participation of the Employer and its employees who become members of the Fund shall take effect in accordance with the particulars shown below
 - (c) The Employer agrees to make contributions to the Fund as required by law.

Step 1 – Employer details

Employer name

Trading name

ACN

ABN

Industry type

Street address

Suburb / City / Town

State / Territory

Postcode

Mailing address (show 'AS ABOVE' if same as street address)

Suburb / City / Town

State / Territory

Postcode

Office contact

Phone

Fax

E-mail address

Step 2 – Contribution details – please tick [✓] where appropriate

Date joining the Fund

Contributions commence

How will your contributions from wages/salaries normally be paid?

Weekly Fortnightly Monthly Quarterly Other

Contribution types to be used: Employer Salary sacrifice

Are you providing member voluntary contributions through payroll deductions?

Yes No

Please turn over, then complete page 2 of this Application to become a Contributing Employer

Step 3 – Signatures

By signing this document you acknowledge that you have read the current PDS.

Sole proprietor

Proprietor name

Witness name

Proprietor signature

Witness signature

Date signed

Date signed

Registered companies

Director name

Director or Company Secretary name

Director signature

Director or Company Secretary signature

Date signed

Date signed

If possible, please attach a Membership Details Form for each employee you will be making contributions on behalf of.

Please Note: Section 64 of the *Superannuation Industry (Supervision) Act 1993* states that where an employer is authorised to deduct member contributions from an employee's salary or wage and pay it to a regulated superannuation fund, **the payment MUST be forwarded to the fund within 28 days after the end of the month in which the deduction was made.**

Step 4 – Post to LUCRF Super

Once you have completed this application send it along with the Membership Details Forms for your employee(s) to:

PO Box 211, North Melbourne VIC 3051

For more information call 1300 130 780 or visit www.lucrf.com.au