

Searching for lost and unclaimed super

Before you use this form

Check your super details via ATO Online services > Super > Fund.

You'll need to log in to myGov to use ATO online services. If you don't have a myGov account, see the **Create a myGov account** instructions at **my.gov.au** to set up your access.

You should only complete this paper form if:

- you can't create a myGov account, or
- you have an open super account that is not displaying in ATO online services, and/or
- your super fund has sent unclaimed money to us, and it is not displaying in ATO online services.

An authorised third party can also complete this form on behalf of the account holder.

Completing this form

If you are filling in the form online:

- when completed, print the form
- sign and date the declaration.

If you are filling in the form by hand:

- print clearly in BLOCK LETTERS using a black or dark blue pen only
- place **X** in all applicable boxes
- sign and date the declaration.

Ensure you:

- attach supporting documentation, if required for example, written authority signed by the account holder, signed probate papers or letters of administration
- mail your completed form to the address shown on page 3.

Se	ection A: Account holder's details
1	Tax file number (TFN)
	We are authorised by the <i>Taxation Administration Act 1953</i> to request your TFN. It is not an offence not to quote your TFN but not providing it may lead to delays in processing your lost and unclaimed super search enquiry.
2	Name
	Title: Mr Mrs Miss Ms Other Family name
	First given name Other given names
3	Date of birth Day Month Year
4	Current postal address
	Street address
	Suburb/town/locality State/territory Postcode
	(Australia only) (Australia only)
	Country if outside Australia only) (Australia only) (Australia only)
5	Email address
	We will use this information as our first point of contact to send the account holder's results
6	How can we contact you if we need more information?
	Mobile phone number Day time phone number

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Section B: Third-party applicant's details						
7	Name of Organisation (if relevant)					
8	Name Title: Mr Mrs Miss Ms Other Family name					
	First given name Other given names					
9	Email address We will use this information as our first point of contact to send the account holder's results					
10	How can we contact you if we need more information?					
	Mobile phone number Day time phone number Day time phone number					
Se	ection C: Payment details					
11	Electronic funds transfer (EFT) Provide your Australian financial institution details. If we locate unclaimed money and you are eligible for a refund, we will pay it directly to you. It's faster and simpler to have your refund paid in this way. Complete the following details.					
	BSB (must be 6 digits) Account number Full account name (for example, IQ Citizen De not about the account type guels as about a particle of effect)					
	Full account name (for example, JQ Citizen. Do not show the account type, such as cheque, savings, mortgage offset)					
Se	ection D: Your super fund details					
12	Super fund details					
	Provide details of any super fund where contributions may have been made on your behalf and are not appearing in ATO online services. If your fund has sent you a letter confirming your account is closed and your super has been transferred to the ATO as unclaimed money, attach a copy of the letter to this form.					
	Superannuation fund name ABN Account Number Period of contributions					

Se	ection E: Your pr	evious details						
0	If you have additional information for the following questions, attach it to this form. If you can't provide responses to any of these questions we will still search for your lost and unclaimed super.							
13	Previous name details Provide details of all previous names and any names you are commonly known by.							
	Family name	Given name	Other given	names	Date of change			
					/ /			
					/ /			
					/ /			
14	Previous address deta	iils						
	Provide details of all previous	us addresses you lived at in Australia	a.					
	Address		State	Postcode	Period of residence			
Se	ection F: Declara	ntion						
	Before you sign and date the	nis form, ensure you have completed	d the relevant informa	tion correctly and r	ead the privacy			
	statement below. An incom	plete form may delay processing an	d we may ask you to	complete a new for	orm.			
Pri	vacy information							
		by bound by the <i>Privacy ACT 1988</i> ir rmation about your privacy law notic			sonal information and			
	claration	imation about your privacy law notic	es please go to ato.g	Ov.au/privacy				
		sed to act on your behalf must comp	olete this declaration					
		given on this form is complete and co						
Nar	me of signatory							
Sign	nature							
				Date				

After completing this form

After completing this form, send it to us at: **Australian Taxation Office** PO Box 3578 ALBURY NSW 2640