member direct debit service agreement
and member direct debit request form
after-tax contributions

You can use the request form attached to set up a direct debit to make regular after-tax contributions from your bank account into your HESTA super account.

First, make sure you’ve given us your TFN. We won’t be able to accept your after-tax contributions unless we have it.

The easiest way to make after-tax contributions to your super is to set up a direct debit from your bank account into HESTA.

Please read this Member direct debit service agreement before completing the Member direct debit request on page 3. Keep a copy of this document for your records.

Member direct debit service agreement

This service agreement explains how your direct debit arrangement with the Trustee will work.

Be sure to read it so you understand your obligations and what you can expect from this arrangement.

Definitions

**your account** means the account held at your financial institution from which we are authorised to arrange for funds to be debited.

**agreement** means this direct debit service agreement between you and us.

**business day** means a day other than a Saturday, Sunday or public holiday listed throughout Australia.

**debit day** means the day that payment by you to HESTA is due.

**debit payment** means a particular transaction where a debit is made.

**direct debit request** means the direct debit request between you and us.

**us, we or our** means H.E.S.T. Australia Ltd, the Trustee of HESTA.

**you or your** means the customer who signed the Member direct debit request.

**your financial institution** is the financial institution where you hold the account that you have authorised us to debit.

1. Debiting your account

1.1 By signing a Member direct debit request, you have authorised us to arrange for funds to be debited from your account. You should refer to the Member direct debit request and this service agreement for the terms of the arrangement between you and us.

1.2 We will only arrange for funds to be debited from your account as authorised in the Member direct debit request. Please note: funds will be debited from your account around the 21st of the month of your nominated frequency.

1.3 If the debit day falls on a day that is not a business day, we may direct your financial institution to debit your account on the following business day. If you are unsure about which day your account has been/ will be debited, you should ask your financial institution.

2. Changes by us

2.1 We may vary any details of this service agreement or a Member direct debit request at any time by giving you at least fourteen (14) days written notice.

3. Changes by you

3.1 Subject to 3.2. and 3.3, you may change the arrangements made under a Member direct debit request by contacting us on 1800 813 327.

3.2 To stop or defer a debit payment, you must notify us in writing at least fourteen (14) days before the next debit day. This notice should be given to us in the first instance.

3.3 You may cancel your authority for us to debit your account at any time by giving us fourteen (14) days notice in writing before the next debit day. This notice should be given to us in the first instance.

3.4 To change your financial institution details, you must complete a new Member direct debit request and return it to us.

4. Your obligations

4.1 It is your responsibility to ensure there are sufficient clear funds available in your account to allow a debit payment to be made in accordance with the Member direct debit request.

4.2 If there are insufficient clear funds in your account to meet a debit payment:

a) you may be charged a fee and/or interest by your financial institution

b) you may also incur fees or charges imposed or incurred by us or our financial institution

c) you must arrange for the debit payment to be made by another method or arrange for sufficient clear funds to be in your account by an agreed time so we can process the debit payment

d) we may cease further debits.

4.3 You should check your account statement to verify that the amounts debited from your account are correct.

5. Dispute

5.1 If you believe there has been an error in debiting your account, you should notify us directly on 1800 813 327 and confirm in writing with us as soon as possible so we can resolve your query quickly.

5.2 If we conclude that your account has been incorrectly debited, we will respond by arranging for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.

5.3 If we conclude as a result of our investigations that your account has not been incorrectly debited we will respond by providing you with reasons and any evidence for this finding.
5.4 Any queries you may have about an error made in debiting your account should be directed to us in the first instance so we can attempt to resolve the matter between you and us. If we cannot resolve the matter you can still refer it to your financial institution, which will obtain details from you of the disputed transaction and may lodge a claim on your behalf.

6. Accounts

6.1 You should check:
   a) with your financial institution whether direct debiting is available from your account, as direct debiting is not available on all accounts offered by financial institutions
   b) that the account details you have provided to us are correct, by checking them against a recent account statement
   c) with us if you have any queries about how to complete the Member direct debit request.

7. Confidentiality

7.1 The information you provide in this direct debit request is collected by and held for us by our administrator Australian Administration Services Pty Limited ABN 62 003 429 114. The information you provide on this form, and any subsequent information you provide to us or our service providers in relation to this form, is collected in accordance with the HESTA Privacy Collection Statement available at hesta.com.au/privacy or by calling 1800 813 327.

7.2 We will keep any information you supply (including your account details) on your Member direct debit request confidential. We will make reasonable efforts to keep any such information we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.

7.3 We will only disclose information that we have about you:
   a) to the extent specifically required by law
   b) for the purposes of this agreement (including disclosing any information in connection with any query or claim).

8. Notice

8.1 If you wish to notify us in writing about anything relating to this agreement, write to us at: Locked Bag 5136, Parramatta, NSW 2124.

8.2 We will notify you by sending a notice in the post to the address you have given us in the Member direct debit request.

8.3 Any notice will be deemed to have been received two business days after it is posted.
Use this form to make regular after-tax contributions from your bank account into your HESTA super account via direct debit. Complete all parts of this form in capital letters using a black or blue pen and mail to HESTA Locked Bag 5136, Parramatta, NSW 2124.

1 Request and authority to debit

Mark with an X the option that fits your situation.

Members must satisfy one of the following criteria to make after-tax contributions to their super. If your circumstances change, it is important you contact us immediately.

☐ I am aged under 65 years.
☐ I am between age 65 and 75 years, and have been gainfully employed for at least 40 hours over 30 consecutive days during the financial year.

2 Tax file number (TFN)

We are authorised by law to ask for your TFN. You do not have to provide it but if you don’t, you may end up paying more tax than you need to. You must supply your TFN to enable your HESTA account to accept after-tax contributions. See Why we ask for your TFN on page 2 of this form for details. You can also authorise us to use your TFN to help find your lost super and consolidate your super accounts.

Tax file number:

☐ I consent to, and authorise the Trustee of HESTA, to use my TFN to facilitate the consolidation of my superannuation by contacting the Australian Tax Office (ATO) and other superannuation entities to find out if I have other superannuation monies.

3 Member details

Request and authority to debit the account named in sections 4 and 5 to pay HESTA.

Title: Ms ☐ Mrs ☐ Miss ☐ Mr ☐ Dr ☐ Other ☐
Gender: F ☐ M ☐
HESTA member number: 

Given name/s: 

Family name: 

Postal address:
PO Box/Unit number/Street number 
Street name 
Suburb 
State/Terr. Postcode

4 Financial institution where account is held

Financial institution name: 

Postal address:
PO Box/Unit number/Street number 
Street name 
Suburb 
State/Terr. Postcode

5 Details of account to be debited

Name of account holder: 

BSB: 

Account number: 

Is this request to override an existing direct debit arrangement with HESTA?

☐ Yes ☐ No 

Note: Credit card payments cannot be accepted.
6  Direct debit instruction

Amount to be deducted ($):

$ __________, __________, __________, __________

Amount to be deducted (in words):

Frequency (mark one):

☐ monthly  ☐ quarterly
☐ six-monthly  ☐ annually

⚠️ Debits occur around the 21st of the month of your nominated frequency. We must receive your signed and dated form 10 working days prior to the first time the direct debit is to begin. Forms received later will not be processed until the following month.

7  Acknowledgement

By signing this direct debit request you acknowledge having read and understood the terms and conditions governing the debit arrangement between you and the Trustee as set out in this request and in the Member direct debit service agreement.

When making after-tax contributions to superannuation, you should consider the contribution cap that applies to the amount of these contributions that can be made in any one year. There are significant tax implications if this cap is exceeded. For more information on contribution caps visit ato.gov.au/super

Applicant’s signature:

Date:

D  M  Y  Y  Y  Y  Y

Second signatory:

If you have a joint bank account, please ensure the other account holder signs here.

Date:

D  M  Y  Y  Y  Y  Y

contact us

hesta@hesta.com.au  |  1800 813 327  |  Locked Bag 5136, Parramatta NSW 2124  |  hesta.com.au

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