

# Family law form 6

## Prescribed form of declaration

Family Law Act 1975 subsection 90XZB(2)

B09



right by your side

### Declaration by applicant for information about a superannuation interest.

1. Insert the name and address of person making the declaration

|                |                                |          |
|----------------|--------------------------------|----------|
| I,             | Born on (date of birth)<br>/ / |          |
| Postal Address |                                |          |
| Suburb         | State                          | Postcode |

make the following declaration in support of my application to the trustee of Brighter Super for information about a superannuation interest of my super interest or a superannuation interest of the below Brighter Super member:

|                                |
|--------------------------------|
| Full name of member spouse     |
| Date of birth of member spouse |

2. \*Delete paragraphs that are not applicable.

#### who is a member of Brighter Super.

##### 1. I am:

- \***(a)** a member of Brighter Super
- \***(b)** the spouse of the person named above, who is a member of Brighter Super
- \***(c)** intending to enter into a superannuation agreement under Part VIIIB of the Family Law Act 1975 with the person named above who is a member of Brighter Super

##### 2. I require the information to:

- \***(a)** assist me to properly negotiate a superannuation agreement
- \***(b)** assist me in connection with the operation of Part VIIIB of the Family Law Act 1975.

Please provide information as at

|  |             |
|--|-------------|
| Date (Note: The information will be provided as at the earlier of the date requested or the date Brighter Super receives this form.) |             |
| Signature  | Date<br>/ / |

3. If you do not provide information in this section, we will send all correspondence to the postal address provided above. I authorise all correspondence to be sent to the following address either by post, email to myself, or Solicitor:

|                               |       |          |
|-------------------------------|-------|----------|
| Applicant or Solicitor's name |       |          |
| Postal address                |       |          |
| Suburb                        | State | Postcode |
| Personal email                |       |          |

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