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# Telstra Bereavement Support.

#### Here's how to complete the form.

Losing a loved one is difficult, so we want to make managing their Telstra services as simple as possible.

#### Part A - Who can be a representative of a Deceased customer?

Representatives aren't required to provide a copy of the death certificate, but they must be one of the following:

- The Executor, Trustee, or Administrator of the estate;
- The Deceased's next of kin;
- · Power of attorney;
- A lawyer or solicitor administering the will; or
- An authorised representative listed on the Telstra account.

#### Part B - Service(s)

In Part B, list all the service(s) to be cancelled or transferred. We will notify you on how to return leased Foxtel equipment to Foxtel directly, as this cannot be returned to Telstra stores or the address on this form.

Please note that we're unable to refund any unused Pre-Paid mobile credits.

#### Part C - Transfer details

Please complete Part C to have any services from Part B transferred to the new account holder.

If services are being transferred to different people, please submit separate forms with only the information relevant to the incoming customer.

#### Identification - Mobile Service(s) only

If you haven't been an existing Telstra customer for more than six months, you'll need to provide at least 100 points of identification according to Table A and Table B on page 6 (with at least one form of identification from Table A).

This form lets the representative of a Deceased customer cancel or transfer their Telstra services. If you are the account holder and someone that used a service on your account has passed, you can also use this form to cancel or transfer that service.

Where a customer is critically ill or in palliative care, please contact Telstra on 13 22 00 and say "Critical Illness".

Please complete all the relevant sections so that we can assist you as soon as possible. Ensure that you select if you wish to transfer or cancel for every service on the account. If you require additional information on the Telstra services that are in the name of the Deceased, details are at the end of this form.

Once you've returned this form, we may contact you to discuss any further details, such as Foxtel equipment return.

For assistance in completing this form, please contact Telstra on 13 22 00 and say 'Bereavement Support'.

You can return this form by:



**Email** Scan a copy of the form, add 'Bereavement Support' in the subject line and email to <a href="mailto:bereavement@support-team.telstra.com">bereavement@support-team.telstra.com</a>



Mail Telstra Bereavement Support Locked Bag 20026, Melbourne VIC 3001

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### Part A - The representative

Your name		Date of birth		
I confirm that I act on behalf of the Deceased in the capacity of (please tick):				
Executor	Next of Kin	Solicitor/Lawyer administering the Will		
Trustee	Administrator			
If we need to confirm more	details, how would you prefer t	to be contacted?		
Phone Email	Letter			
Your phone number	Y	our email		
Final bill address or email				
The Deceased Customer				
Name				
Date of birth		Date of death		
Was the Deceased the account holder or a user of a service on your account?				
Account holder	Service user			
I confirm that I'm the Representative of the Deceased customer named above ('Estate') and I'm authorised to deal with Telstra on behalf of the Estate. I agree to compensate Telstra for any liability or loss arising from or in connection with Telstra acting on my instructions.				
Representative's signature	•	Date signed		



#### Part B - Service(s)

Complete this part with all the service(s) on the account.
For the account to be finalised, the service(s) must either be cancelled or transferred.

We will contact you on how to return any Foxtel equipment, as this remains the property of Foxtel.

Please provide the <u>number</u> or <u>ID</u> for each of the Deceased's Telstra services, including Home phone, Mobiles, Pre-Paid services, Foxtel, Internet and email addresses. If you are unsure, review a recent bill or contact us on 132200 and say 'Bereavement Support'.

Service(s)	Transfer	Cancel

#### Would you like a copy of the voicemail greeting of any of the services listed?

Yes Number(s) with voicemail

Not required

#### How would you like to receive the recording?

Email CD

#### Please note

Most plans can be transferred, however, if the plan is not available we will contact you to discuss alternatives. Home Phone and Mobile custom settings will reset to default. This means voicemail greetings and other custom settings will be permanently deleted.

#### **Telstra Plus**

Telstra Plus is our rewards program that recognises you for being with us. You can earn points based on your eligible spend and use your points towards discounts on products in the Rewards Store.

If the Deceased had Telstra Plus points, would you like them transferred to your account?

Yes No

(Please note that you will need to sign up for a Telstra ID at <u>id.telstra.com.au/register</u> prior to the points been transferred.)



#### Part C - Transfer Details

If services are being transferred to different people, please submit separate forms with only the information relevant to the incoming customer.

Title (Mr, Mrs, etc.) Full name Date of birth

Do you have an existing Telstra account you would like the service(s) transferred to? (not the Deceased's account number)

Yes No

If Yes, please state the account or service number

How would you like to receive your bill? Email Mail Other (Braille, A3)

Bill address

#### **Credit Check Details**

Transfer of services is contingent upon Credit Approval.

Driver's licence/Passport number State/Country of issue

Concession type (if applicable) Concession number

**Current address** 

Residential status Rent Own Board Duration at current address Years Months

If current address duration is less than five years, we require details of previous address:

**Previous address** 

**Duration at previous address** Years Months

Occupation Employer

Length of employment Years Months Employer phone number

If employment duration is less than five years, we require details of previous employment:

Previous employer Length of employment Years Months

#### Please select your Primary Source of Income

Permanent full-time employment Permanent part-time employment

Casual employment Another family member

Centrelink (Pension - Aged, Veterans, Disability, etc.)

Centrelink (Benefits/Allowances - Newstart, Youth Allowance, etc.)

Superannuation/Annuities Investments (Interest/Dividends/Rent/Capital Gains)

Business/Partnership/Trust Profits



#### **Home Phone Transfers Only**

#### **Priority Assistance**

As a part of Telstra's fixed line service, we offer priority assistance to customers with a life-threatening medical condition. If you would like more information on this, please tick this box.

#### **Directory Listing**

Would you like your name, address and phone number to be published in the printed and online White Pages® and available via Directory Assistance?

No - Don't list my details

Yes - List my details

Preferred listing name (e.g. Smith, John)

#### **Caller Identification**

Would you like your phone number to be visible to people when you call from your landline?

Yes – Your phone number will be visible when you call others.

No - Your phone number will not be visible when you call others.

#### **Mobile Transfers Only**

If you haven't been an existing Telstra customer for more than six months, you'll need to attend a store with 100 points of identification and this form.

Aged Pensioners can show Seniors card or Aged Pension card combined with Medicare card as 100 points. Customers with a disability can show three forms of identity from Table B (for example, a Disability Support Pension Card combined with Medicare card). Please see table on following page for acceptable forms of ID.

Primary Identification from Table A (must have at least one)

DOCUMENT TYPE DOCUMENT NUMBER EXPIRY DATE

Secondary Identification from Table B

DOCUMENT TYPE DOCUMENT NUMBER EXPIRY DATE

Sighted by (staff ID)



By signing this form, I agree that I will be responsible for paying any fees or charges for this service and any associated devices or accessories:

- (a) that haven't already been paid before transfer; or
- (b) that become payable after the time of transfer.

I will be liable to pay all outstanding (whether or not already billed) fees and charges, including minimum monthly spend and access fees for each of the services listed above that are transferred and any additional fees or charges incurred by or applicable to the products or services as and when they fall due.

New Owner's signature

Date signed

TABLE A	Points
Australian driver's licence	(60 pts)
Australian passport	(70 pts)
Government-issued proof of age card combined with Medicare card	(60 pts)
Australian Learner's permit combined with Medicare card	(60 pts)
Overseas passport with valid visa	(35 pts)
Valid shooter's/firearms licence	(60 pts)
Valid police/defence force ID with photo	(60 pts)

TABLE B	Points
Medicare card	(40 pts)
Credit, debit, ATM cards — Australian only	(40 pts)
Birth certificate or original extract	(40 pts)
Valid Working with Children card (must include photograph)	(50 pts)
Valid Australian Government-issued benefits card	(40 pts)
Utility bill, vehicle registration or rates notice	(25 pts)
Valid tertiary student ID card with photo	(25 pts)
Private health insurance membership card	(25 pts)

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