

FIRST RETIREMENT WITHDRAWAL APPLICATION FORM



Use this form to apply for your **first retirement withdrawal**. If you want to make a **subsequent** retirement withdrawal, or amend a regular withdrawal, please complete the subsequent retirement withdrawal form.

You can take this completed form into any ANZ branch, or post it to ANZ Investments, Freepost 324, PO Box 7149, Wellesley Street, Auckland 1141.

1. YOUR INFORMATION

First name(s)			
Surname			
ANZ customer (or investor) number			
Date of birth	<input type="text" value="D"/> <input type="text" value="D"/>	<input type="text" value="M"/> <input type="text" value="M"/>	<input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Country of birth			
Contact number			Email
IRD number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Prescribed investor rate	<input type="checkbox"/> 10.5%	<input type="checkbox"/> 17.5%	<input type="checkbox"/> 28% (see anz.co.nz/pirupdate for help)

2. WITHDRAWAL AMOUNT

If my application is approved, I would like to make:

a withdrawal of my full available balance

If I withdraw my full balance, my KiwiSaver account will be closed, and I will no longer be a member of a KiwiSaver scheme.

a partial withdrawal of \$

The minimum amount you can withdraw is \$1,000.

a regular withdrawal of \$ starting
and at the following frequency: fortnightly monthly quarterly

Minimum of \$200 a fortnight, \$400 a month or \$1,000 a quarter.

3. BANK ACCOUNT DETAILS

We can only pay your withdrawal amount to you; we can't pay to a third party.

If my application is approved, please pay my withdrawal amount into my New Zealand bank account below:

	Bank	Branch	Account number	Suffix
Payment account	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of bank account holder				

If you'd like your withdrawal amount paid to an overseas bank account, please complete an International Money Transfer (IMT) form available from anz.co.nz/kiwisaverforms

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4. IDENTIFICATION

As part of your application, you must provide certified/verified copies of your ID and proof of address. All photocopied documents must be verified or certified by an authorised person, such as a Justice of the Peace, before sending them to us.

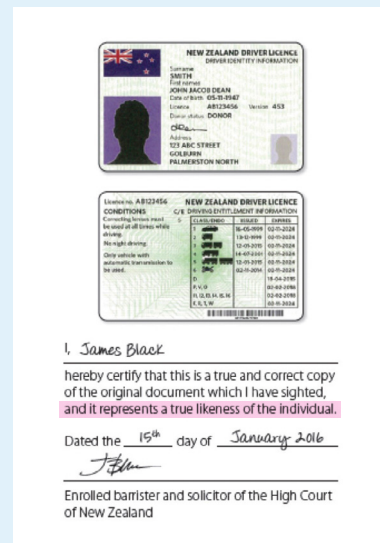
If we need to ask you for further information, this will delay the processing of your application.

Please provide us with a certified/verified copy of one of the following:

- your current passport (page showing your name, date of birth, photograph and signature), or
- your current driver licence showing your name, signature and expiry date and a bank account statement issued to you by a registered bank (excluding ANZ), or
- your current firearms licence.

AND a certified/verified copy (which can't be more than six months old) of one of the following:

- a bank statement issued to you by a registered bank (excluding ANZ), or
- your utility bill, or
- an insurance policy document issued to you, or
- a Government agency document issued to you.



See anz.co.nz/myid for a full list of acceptable documents and ways documents can be certified or verified.

5. CHECKLIST

Make sure you send us everything listed below, we can only process your application when we have:

- your completed application
- certified/verified copies of your ID and proof of address
- your original statutory declaration signed by you, and witnessed by a person authorised to take statutory declarations (note: if you were aged 65 years or over when you first enrolled in KiwiSaver, you do not need to complete the statutory declaration).

6. YOUR AGREEMENT

I understand that:

- If I am subject to the five-year membership period (i.e. I joined KiwiSaver prior to 1 July 2019 aged between 60 and 64), by making a retirement withdrawal I agree to opt out of the five-year membership period. This means I will no longer be eligible to receive any Government contributions and my employer can stop their contributions.
- Once the correct documentation is received, the withdrawal is usually processed and paid to my bank account within **10 business days** of receiving my request. ANZ Investments will contact me to confirm the outcome of my application.
- If I choose a partial or a regular withdrawal, and have multiple funds, the withdrawal will be deducted proportionately from each fund I invest in.
- It is not possible to time my withdrawal request for a specific unit price, the unit price received for my withdrawal request will be the unit price that is available on the business day that my withdrawal request is processed.

Signature

Date

You don't need to complete this statutory declaration if you joined KiwiSaver on or after 1 July 2019 and were aged 65 years or over at the time.

ANZ branch staff can't take statutory declarations. A solicitor, Justice of the Peace or Registrar of a New Zealand Court can take this statutory declaration for you. For more information about who can take statutory declarations, see anz.co.nz/myid.

1. YOUR INFORMATION

Full name	<input type="text"/>								
ANZ customer (or investor) number	<input type="text"/>								
Date of birth	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		

2. ELIGIBILITY FOR GOVERNMENT CONTRIBUTIONS

To be eligible to withdraw Government contributions you have received during your KiwiSaver membership, you must have had your principal place of residence in New Zealand over that time. Please complete the following question to assess your eligibility.

During your KiwiSaver membership, were there any periods when you lived overseas and did not have a permanent residence in New Zealand?

No (continue to section 3)

Yes. List below the periods when you lived overseas and did not have a permanent residence in New Zealand:

I lived in	<input type="text"/>	from	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	to	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y														
D	D	M	M	Y	Y	Y	Y														
I lived in	<input type="text"/>	from	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	to	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y														
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D	D	M	M	Y	Y	Y	Y														
D	D	M	M	Y	Y	Y	Y														

If you were working overseas as an employee of the New Zealand Government or as a volunteer for certain charitable organisations, you are eligible for Government contributions. If this applies please provide evidence with your application, such as a letter on your employer's letterhead confirming the period you were employed.

STATUTORY DECLARATION

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3. STATUTORY DECLARATION

Include your occupation. If you, the member, are either retired or unemployed please note this in the occupation box.

I	Full name of the person making the declaration	
of	Address	
		Postcode
and	Occupation	

solemnly and sincerely declare that:

I understand that if I have not had a principal place of residence in New Zealand during my KiwiSaver membership, I will not be entitled to withdraw any Government contributions received during that period. Any Government contributions claimed on my behalf during any such period will be returned to the Commissioner of Inland Revenue. The information I have provided in section 2 (above) is correct to the best of my knowledge.

AND I MAKE this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

Signature of the person **making** the declaration (the applicant)

Declared at _____ this _____ day of _____ 20

Before me: (signature, name, occupation and address of the person in front of whom the declaration is made)

Full name

Residential address

Postcode

Occupation

Signature of the person **taking** the declaration

INTERNAL USE - ANZ STAFF ONLY

I _____ (staff full name) Branch Stamp

verify that this is the original document.

Date

D	D	M	M	2	0	Y	Y
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Signature

Job role

Branch name

Once completed – staff must scan this form and all supporting documents in the checklist to withdrawals@anzinvestments.co.nz