

The fastest way to provide us your form and supporting documents is to email them to registry@anzinvestments.co.nz. Alternatively you can post them to ANZ Investments, Freepost 324, PO Box 7149, Victoria Street West, Auckland 1142 or drop them into an ANZ branch.

1. YOUR INFORMATION

<input type="checkbox"/> Mr	<input type="checkbox"/> Miss	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Other	<input type="text"/>
<input type="text"/>					
<input type="text"/>					
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ANZ customer (or investor) number	<input type="text"/>				(if known)
IRD number	<input type="text"/>	<input type="text"/>	<input type="text"/>	(please call Inland Revenue on 0800 775 247 for help)	

2. WHAT WOULD YOU LIKE TO DO?

- ☐ Update my details (complete sections 3 and 5)
- ☐ Change how my KiwiSaver savings are invested (complete sections 4 and 5)
- ☐ Confirm my identity and residential address details (complete sections 3, 5 and 8)

3. UPDATE YOUR DETAILS

<input type="text"/>	
<input type="text"/>	<input type="text"/>
<input type="text"/>	
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<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/OA-pirupdate for help)
Employee contribution rate	<input type="checkbox"/> 3% <input type="checkbox"/> 4% <input type="checkbox"/> 6% <input type="checkbox"/> 8% <input type="checkbox"/> 10%

When you select a contribution rate, we'll provide this to Inland Revenue who will let your employer know. Your employer will deduct this percentage from your after-tax pay.

If you're self-employed, a contractor or not working, then this section is not applicable. Instead, you can make voluntary contributions at any time. If you're employed and don't choose a contribution rate, you'll contribute 3%.

CHANGE FORM

4. CHANGE HOW YOUR KIWISAVER SAVINGS ARE INVESTED

- ☐ Select the Lifetimes option **OR**
- ☐ Switch my current savings to another fund(s) and keep my future contributions in my existing fund(s) **(complete column A)**
- ☐ Switch my future contributions to another fund(s) and keep my current savings in my existing fund(s) **(complete column B)**
- ☐ Switch both my current savings and future contributions to another fund(s) **(complete columns A and B)**

	A. Current savings		B. Future contributions
High Growth Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Growth Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Balanced Growth Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Balanced Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Conservative Balanced Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Conservative Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Cash Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
New Zealand Fixed Interest Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
International Fixed Interest Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Australasian Property Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
International Property Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Australasian Share Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
International Share Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Sustainable International Share Fund	<input type="text" value=""/>	% or \$ <input type="text" value=""/>	<input type="text" value=""/> %
Total	<input type="text" value="100%"/>	% or \$ <input type="text" value=""/>	<input type="text" value="100%"/>

Note: Before splitting your investment between multiple funds, we recommend that you seek personalised advice from your financial adviser.

5. YOUR AGREEMENT

By signing this Change Form, I agree to be bound by the OneAnswer KiwiSaver Scheme's terms and conditions. These are set out in the governing document and the guide and product disclosure statement. I confirm I understand that, by providing my email address and/or mobile number, I will receive emails or texts from ANZ Investments (or its related companies) about my investment (including annual reports by email) and, from time to time, any other relevant product or service offers.

If applicable, I confirm I have personally affixed my digital signature to this document.

If I am changing how my KiwiSaver savings are invested, I understand that my funds continue to be invested, and may rise and fall in value, until the transaction is approved and switch is completed.

Signature

Date

D

D

M

M

2

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Y

Y

6. HOW LONG WILL IT TAKE

Once we've received your form, we aim to action your request and show it in ANZ goMoney and Internet Banking within 5 business days. It may take longer if there are public holidays, or we need to ask you for additional information.

7. PRIVACY

You agree we can collect, use and disclose your information to process your application in accordance with our Privacy Statement, which is the same as ANZ Bank New Zealand Limited's and can be found at anz.co.nz/privacy. If you prefer a print version, it is available to download as a PDF or from any branch.

We take your privacy seriously, and understand the need to keep your information confidential and secure. You can access or correct your personal information by calling 0800 736 034 or asking at any ANZ branch. We may charge you a fee to access the information we have about you.

CHANGE FORM

8. IDENTIFICATION

As part of your application, you must provide either verified or certified copies of your valid ID and proof of address.

- **Verified** – An ANZ branch or an ANZ Investments approved financial adviser can check your original ID and proof of address documents. They can submit your application at the same time.
- **Certified** – A Notary Public, Justice of the Peace, NZ lawyer, or any other person who has the legal authority can certify a copy of your ID and proof of address documents by checking them against the originals. You can then send in these certified copies with your application form.

See anz.co.nz/myid for more information.

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

Identity documents

Please provide us with:

☐ Option 1: ONE of these documents:

- | | |
|---|---|
| <input type="checkbox"/> New Zealand passport | <input type="checkbox"/> National ID card |
| <input type="checkbox"/> Overseas passport (signed) | <input type="checkbox"/> New Zealand firearms licence |

☐ Option 2: A New Zealand driver licence AND ONE of these documents (must be dated within the last six months):

- | | |
|---|--|
| <input type="checkbox"/> Bank statement
(including from ANZ) | <input type="checkbox"/> Central Government Agency document
(issued to you) |
| <input type="checkbox"/> SuperGold Card | <input type="checkbox"/> New Zealand Defence or Police Photo ID |

☐ Option 3: ONE form of primary non-photo ID

- | | |
|---|---|
| <input type="checkbox"/> New Zealand full birth certificate | <input type="checkbox"/> Certificate of New Zealand citizenship |
| <input type="checkbox"/> Overseas birth certificate | <input type="checkbox"/> Overseas citizenship certificate |

AND

ONE form of secondary photo ID

- | | |
|---|---|
| <input type="checkbox"/> New Zealand driver licence | <input type="checkbox"/> New Zealand Defence or Police Photo ID |
| <input type="checkbox"/> 18+ card or Kiwi Access Card | |

Proof of address

Please provide us with **ONE** of the below acceptable forms of address. The document must be dated within the last six months and show your name and current New Zealand address.

- | | | |
|---|--|---|
| <input type="checkbox"/> Utility bill | <input type="checkbox"/> Signed rental tenancy agreement, flatting or sub-letting agreement | <input type="checkbox"/> Short-term accommodation letter issued by the accommodation provider and include your name |
| <input type="checkbox"/> Bank statement or bank document (including from ANZ) | <input type="checkbox"/> Electoral roll papers | <input type="checkbox"/> Letter from employer on company letterhead confirming residential address |
| <input type="checkbox"/> Non-bank financial institution statement or document | <input type="checkbox"/> Electronic White/Yellow Pages | <input type="checkbox"/> Letter from a lawyer or accountant confirming your residential address |
| <input type="checkbox"/> Central Government Agency document e.g. IRD, ACC | <input type="checkbox"/> Insurance policy document | <input type="checkbox"/> Retirement home letter or invoice |
| <input type="checkbox"/> Local Council/Government letter | <input type="checkbox"/> Car registration notification/demand | <input type="checkbox"/> Letter or invoice from your general practitioner (GP) |
| | <input type="checkbox"/> Educational Institution letter from education facility, must be on letterhead paper | |

An example of correctly certified ID



I, James Black

hereby certify that this is a true and correct copy of the original document which I have sighted, and it represents a true likeness of the individual.

Dated the 15th day of January 2016

[Signature]

Enrolled barrister and solicitor of the High Court of New Zealand

Ensure the 'true likeness' wording is included, that the image of you is clear, and the text can be clearly read.

INTERNAL USE – ANZ STAFF ONLY

I (staff full name)

hereby verify that this is the original document.

Date

Signature

Staff job role

Branch name

Branch Stamp

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