

Important information

You may be able to make an early withdrawal from your KiwiSaver savings if you have an injury, illness or disability that means you are:

- totally and permanently unable to work at a job that your education, training or experience makes you suited to, or
- at serious risk of dying very soon (generally within 18 months and often called a terminal illness).

The supervisor New Zealand Guardian Trust will determine if you're eligible for a serious illness withdrawal. If successful, you will be able to withdraw all or part of your KiwiSaver savings.

If you want to make a withdrawal to pay medical costs for yourself or a dependant family member because of illness, injury, or palliative care, please refer to the significant financial hardship information at anz.co.nz/kiwisaverwithdrawals.

 Call us:
0800 736 034

 Email us:
service@anzinvestments.co.nz

 For more information visit
anz.co.nz/kiwisaverwithdrawals

The fastest way to provide us your form and supporting documents is to email them to earlywithdrawals@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

First name(s)			
Surname			
ANZ customer (or investor) number			
Date of birth	<input type="text" value="D D"/>	<input type="text" value="M M"/>	<input type="text" value="Y Y Y Y"/>
Country of birth			
Contact number	<input type="text" value="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 you withdraw your full balance, your KiwiSaver account will be closed, and you will no longer be a member of a KiwiSaver scheme.

- a partial withdrawal of \$

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

If you opt for a partial withdrawal and require additional funds in the future, you will need to make a new application with updated supporting documentation.

Serious illness withdrawal application form

3. Bank account details

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

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

Payment account
Bank Branch number Account number Suffix

Name of bank account holder

If you have listed a non-ANZ bank account above, then please provide us with a bank statement dated within the last six months.

4. Identification

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

- **Verified** – An ANZ branch or an ANZ Investments approved financial adviser can check your original ID document(s). 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 document(s) by checking them against the original(s). 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:

- New Zealand passport National ID card
 Overseas passport (signed) New Zealand firearms licence

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

- Bank statement (including from ANZ)
 Central Government Agency document (issued to you)
 SuperGold Card
 New Zealand Defence or Police Photo ID

Option 3: ONE form of primary non-photo ID

- New Zealand full birth certificate Certificate of New Zealand citizenship
 Overseas birth certificate Overseas citizenship certificate

AND ONE form of secondary photo ID

- New Zealand driver licence 18+ card or Kiwi Access Card
 New Zealand Defence or Police Photo ID

Example of correctly certified ID



I, James Black

herby 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

James Black

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.

Serious illness withdrawal application form

5. Medical certificate

To: ANZ Investments, Freepost 324, PO Box 7149
Victoria Street West, Auckland 1142

Attention: Funds Management Operations

To be completed by your medical practitioner.

You can email this form and all required supporting documents to earlywithdrawals@anzinvestments.co.nz.

Patient's full name

Patient's date of birth

D D

M M

Y Y Y Y

Patient's address

Postcode

I Medical practitioner's full name

of Address of practice

Postcode

Contact number

Email

Confirm that:

1. I am a registered medical practitioner (includes nurse practitioners).
2. The above-named is my patient and I've recently conducted a full medical examination on them.
3. In my opinion, the patient has an injury, illness or disability that: (please select one option)
 - results in the patient being totally and permanently unable to engage in work for which they are suited by reason of experience, education or training, or any combination of these things, or
 - poses a serious and imminent risk of death.

OR

 - In my opinion, the member does not meet either of the criteria above.

Detailed summary of condition (including date of diagnosis, treatment in place and how this illness results in the patient being permanently unable to work again).

Registered medical practitioner's signature

Registered medical practitioner/practice stamp

Date

D D

M M

2 0 Y Y

This page must be stamped to be valid.

Medical Council registration number

Serious illness withdrawal application form

6. Eligibility for Government Contributions

To be eligible to withdraw all of your Government contributions, you must have had your principal place of residence in New Zealand for the duration of 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 7) Yes. List the periods below:

I lived in	from	<table border="1"><tr><td>D</td><td>D</td></tr></table>	D	D	<table border="1"><tr><td>M</td><td>M</td></tr></table>	M	M	<table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	Y	Y	Y	Y	to	<table border="1"><tr><td>D</td><td>D</td></tr></table>	D	D	<table border="1"><tr><td>M</td><td>M</td></tr></table>	M	M	<table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	Y	Y	Y	Y
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Y	Y	Y	Y																					
D	D																							
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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. If you have lived overseas, we'll need to contact Inland Revenue regarding your Government contributions. This may take up to 10 business days.

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.

Call 0800 736 034 (+64 9 356 4000 if overseas) or email service@anzinvestments.co.nz if you have any questions.

Serious illness withdrawal application form

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

All of the boxes must be completed. Any errors will require a new statutory declaration, potentially delaying your application.

7. Statutory declaration

I	Full name of the person making the declaration	
of	Residential address	
		Postcode
and	Occupation (enter unemployed or retired if applicable)	

do solemnly and sincerely declare that:

The information I have provided in section 6 above is correct to the best of my knowledge and 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 same period. Any Government contributions claimed on my behalf during any such period will be returned to Inland Revenue.
- if I withdraw my full balance, my KiwiSaver account will be closed, and I will no longer be a member of KiwiSaver.
- if I have funds transferred from an Australian complying superannuation fund, and I am paid a partial withdrawal, the withdrawal must be applied to my KiwiSaver funds first.
- ANZ Investments and/or the supervisor may contact the medical practitioner providing the medical certificate on page 3 to gain clarity of my condition if required. I consent to that medical practitioner providing my personal information to ANZ Investments and/or the supervisor for that purpose.
- my funds continue to be invested, and may rise or fall in value, until the withdrawal is approved and payment is completed.

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 (location)								
	on this date <table><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>2</td><td>0</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	2	0	Y	Y
D	D	M	M	2	0	Y	Y		

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

Full name	
Address	
	Postcode
Occupation	
Signature of the person taking the declaration	

Serious illness withdrawal application form

8. Checklist

Make sure you send us everything listed below, as we can't consider your request without the following:

- Your completed application.
- Your completed statutory declaration, signed by you and witnessed by a person authorised to take statutory declarations within the last three months.
- Certified or verified evidence of your identity (if applicable, see section 4 of this form).
- Your medical declaration signed and stamped by your medical practitioner (see section 5 of this form).

If your email submission exceeds 20MB, please separate your submission into multiple emails.

9. What to expect next

- Once you've submitted your withdrawal application, you'll receive a text/email confirming it's been received and that we're checking all documents have been provided.
- If we require any additional information or documents we'll contact you using the mobile, email and/or postal address you have provided us.
- Once we have all the documents required we'll begin processing your application.
- If your application is approved we will send you a text/email with a confirmation.

10. How long will it take

Once we've received your application, we aim to pay your withdrawal within 15 business days. It may take longer if there are public holidays, or we need to ask for additional information from you or Inland Revenue.

11. 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.

Internal use – ANZ staff only

hereby verify that this is the original document

Bank stamp

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

Date