

SUBSEQUENT RETIREMENT WITHDRAWAL

APPLICATION FORM



Use this form if you have **previously made a retirement or life-shortening congenital conditions withdrawal**. If you've never made a retirement or life-shortening congenital conditions withdrawal before, please complete the either the [first retirement withdrawal form](#) or the [life-shortening congenital conditions withdrawal form](#).

The fastest way to provide us your form and supporting documents is to email them to withdrawals@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	D	D	M	M	Y	Y	Y	Y			
Country of birth											
Contact number						Email					
IRD number											
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

2.1 Setting up a withdrawal

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. Ensure any direct debits or automatic payments to your KiwiSaver account are cancelled.

☐ a partial withdrawal of \$

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

☐ a regular withdrawal of \$ starting D D M M 2 0 Y Y

and at the following frequency: ☐ fortnightly ☐ monthly ☐ quarterly

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

If you have multiple funds and are choosing a partial or regular withdrawal, the withdrawal will be deducted proportionately across each fund you invest in, unless specified otherwise. If you have a specific withdrawal request, please specify the **fund name(s) and dollar amount(s) below**.

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2.2 Amending an existing regular withdrawal

I would like to amend my existing regular withdrawal instructions to:

☐ a regular withdrawal of \$ starting D D M M 2 0 Y Y

and at the following frequency: ☐ fortnightly ☐ monthly ☐ quarterly

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

If you have multiple funds and have an existing regular withdrawal, the withdrawal has been deducted proportionately across each fund you invest in, unless specified otherwise. If you have a specific withdrawal amendment request, please specify the **fund name(s) and dollar amount(s) below**.

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3. BANK ACCOUNT DETAILS

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

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 have changed your bank account details since your previous withdrawal, we may require evidence that you're the account holder.

If you have listed a non-ANZ bank account, please provide us with a pre-printed deposit slip or bank statement dated within the last six months.

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

4. YOUR AGREEMENT

I understand that:

- if I have multiple funds, and have chosen a partial or a regular withdrawal, the withdrawal will be deducted proportionately across each fund I invest in, unless specified otherwise.
- if I have not made a withdrawal application in the last 12 months, ANZ Investments may request verified/certified copies of my ID and proof of address.
- my funds continue to be invested, and may rise and fall in value, until the withdrawal is approved and payment is processed.
- if applicable, I confirm I have personally affixed my digital signature to this document.

Signature

Date

5. 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.
- If the value of your investment reaches zero at anytime, your account will be closed and you will no longer be a member of a KiwiSaver scheme.

6. HOW LONG WILL IT TAKE

Once we've received your application, we aim to pay your withdrawal within 10 business days. It may take longer if there are public holidays, or we need to ask for additional information from you or Inland Revenue.

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.

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 withdrawals@anzinvestments.co.nz