

MAS KiwiSaver Scheme Retirement Withdrawal Application Form

Please send completed form and supporting documents by post to:

MAS Superannuation FREEPOST 884 PO Box 91976 Victoria Street West, Auckland 1142

For assistance:

Phone 0800 627 738 Email masinvest@linkmarketservices.com

(i) Important information

This form can be used to apply for a retirement withdrawal or amend an existing retirement withdrawal.

Under the KiwiSaver Act 2006, you are eligible for a retirement withdrawal if you have reached the age of eligibility for NZ Superannuation (currently 65).

In certain circumstances, such as significant financial hardship, serious illness, life-shortening congenital condition, permanent emigration, or relationship property separation, you can apply to make a withdrawal before age 65. For further information visit mas.co.nz/kiwisaver-documents

Please note we will normally process your payment within five business days. We will contact you if we have any issues with your withdrawal request.

1. Your information									
Full name	Title	First names (s)	Surname						
Member number			Date of birth	dd-mm-yyyy					
Postal Address									
			City	Postcode					
Phone number	Home	Work		Mobile					
Email									
Prescribed investor	r rate (PIR)	10.5%	17.5%	28%					
Please refer to <u>ird.govt.nz/pir</u> for more information on how to determine your PIR.									

2. Payment details

Please provide the bank account to make payment to. We can only pay your withdrawal to your New Zealand bank account; we can't pay third parties. Please attach proof of bank account, e.g. bank statement, deposit slip or signed screen print of your internet bank accounts. If you have provided us with this verification in the last 12 months, you do not need to provide it again.

Bank	Branch	Account number	Suffix
Name o	of account		

Please proceed to section 3

3. Setting up or amending your withdrawal

Setting up a new withdrawal

Postal Address

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If m	v appl	ication	is ap	proved, I	would	like to	make:
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a withdrawal of my full available balance

Note: A	۱ ful	I with	drawal	may	take	up to	o ten	bus	iness	days	to p	proces	s as	we i	may	not l	nave	recei	ived	all	l empl	oyee	and
employ	er o	contril	outions	s or fi	nal (Gove	rnme	nt c	ontrib	oution	ра	yments	s fro	m Ir	nland	d Rev	/enue	э.					

employer co	ontributions or final	Government co	ontribution payme	ents from inland	Revenue.	
a parti	al withdrawal	Amount	\$	(the minimum	amount you car	n withdraw is \$500)
Partial withd	lrawals will be dedu	icted proportion	nally from each ir	ovestment fund y	ou hold unless o	therwise
Cash	Conservative	ive Moderate Balanced		Growth	Aggressive	Global Equities
\$	\$	\$	\$	\$	\$	\$
Regula	r monthly withdraw	val (minimum \$1	00) Amoun	t \$		
			Start dat	e: dd-mm-yyyy	(Please allogive working	
	III be processed on t siness day, your pay					rs after. If the 13th fall up to two business
Amending a	n existing regular	withdrawal				
I would like t	o amend my existin	g regular withdr	awal instructions	to:		
Regular mor	nthly withdrawal (m	inimum \$100)	\$		starting \$	
declaration I You of Re and Oc	r first retirement with full. ur full name sidential address ccupation and sincerely decl					
	had my principal re		Zealand for the e	ntire period that I	have been a mei	mber of KiwiSaver
Or	riad my principal re-	orderioe iii ivew i	Zediana for the ci	ntire period triat i	nave been a mei	modi of Riwiodvei.
I was li	iving overseas for th	ne following date	dd-mm-yyyy		to dd-mm-yy	уу
I understand Government Department	olemn declaration	ed to withdraw a med on my beha	alf during any suc	ch period will be i	returned to the Ir	nland Revenue
Signature				Declared at L	ocation	
Witnessed b	у					
Occupation						

Please note: The declaration may only be witnessed by a Justice of the Peace, solicitor or other person autho	rised to
take a statutory declaration as set out in the Oaths and Declarations Act 1957.	

Signature	Date	dd-mm-vvvv

5. Acknowledgement

I understand that Medical Funds Management Limited as Manager of the MAS KiwiSaver Scheme will not be able to complete their assessment of this application if the information given in this form is incomplete or incorrect.

I understand that the withdrawal value will be based upon the unit price(s) applying on the business day my request is approved or accepted and that fees, taxes and expenses may be deducted.

I understand that if I withdraw my total available balance, my employer contributions will stop, my KiwiSaver account will be closed, and I will no longer be a member of KiwiSaver.

Signature	Date	dd-mm-yyyy
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6. Identification requirements

The Anti-Money Laundering and Countering Financing of Terrorism Act 2009 requires MAS, on behalf of the Manager, to verify the identity of new investors and, periodically, reconfirm information about existing investors.

Please select one of the options below.

Option One: Electronic Identity Verification and Proof of Address

MAS can confirm the identity and/or New Zealand address of many of our investors electronically, with their permission. Please note that we use a third-party system not owned by MAS to conduct identity checks in this way.

I confirm that I give MAS authority to check my identity and/or address electronically using the documentation provided.

I have included a copy of my current NZ Passport (page showing name, date of birth, photo and signature) or NZ Driver Licence (front & back).

Please note, if this method fails to identify you, we will contact you to provide physical documents, as per Option 2 below.

OR

Option Two: Certified copies of identity and address documents

If you have opted not to use Electronic Identity Verification, then you will need to provide certified copies of the following documentation:

Please provide us with either

A certified copy of your current passport (page showing your name, date of birth, photo, and signature).

A certified copy of your New Zealand driver licence showing your name, signature and expiry date along with one of: certified copy of a bank statement issued to you by a registered NZ bank (dated within the last 12 months); valid credit or debit card with name embossed and signature; birth certificate; citizenship certificate; Government agency letter (e.g.IRD, Electoral Commission, etc.) dated within the last 12 months; SuperGold card with photo, name and signature.

A certified copy of your New Zealand firearms licence.

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AND one of the following showing your name and residential address (which can't be more than 12 months old):

A certified copy of a utility bill (power, gas, water, landline phone, SKY or internet service).

A certified copy of a document issued to you by a NZ Government agency e.g (IRD, ACC, Ministry of Justice NZQA, or WINZ).

A certified copy of a NZ council rates notice/valuation.

A certified copy of a residential rental agreement.

Who can certify your documents?

A MAS employee can verify your ID and proof of address. Alternatively, the following people can certify photocopies of original documents:

- · Registered medical doctor
- Notary Public
- · Justice of the Peace
- Member of the Police
- New Zealand lawyer
- New Zealand Chartered Accountant
- · A person who has legal authority to take statutory declarations (or equivalent) in New Zealand.

The certifier must:

- See the original document and make a statement to the effect that the documents provided are true and correct copies and confirm the identity of the named individual;
- State their full name and their capacity to act as a certifier; and
- Date the certification (no more than three months prior to the date of the application).

The certifier cannot be related to you or a person living at the same address, or a party of the application.

When certification occurs overseas, copies of the required documentation must be certified by a person authorised by law to take statutory declarations.

Please note carefully the requirements above. If we need to ask for further information, this will delay the processing of your application.

7. Checklist

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

Your completed application.

Proof of bank account.

If this is your first retirement withdrawal (excluding a withdrawal of Australian sourced funds), your original Retirement Withdrawal Statutory Declaration signed by you, and witnessed by a person authorised to take statutory declarations.

Signed Acknowledgement Section.

Evidence of your identity and address (as applicable for the option you have selected under section 6).

mas.co.nz KSS15 11/24