



The Kiwibank KiwiSaver Scheme Deceased Estate Withdrawal Form

Kiwibank Investment Management Limited, Private Bag 39888, Wellington 5045

1 Description

Use this form to apply for a withdrawal of Kiwibank KiwiSaver Scheme contributions if you are the Personal Representative(s) or a Lawyer acting on behalf of a deceased Kiwibank KiwiSaver Scheme member.

This form should be completed where:

- the Deceased left a Will, this means the form will be completed by the person(s) who has been granted Probate, or
- where the Deceased did not leave a Will, the form will be completed by the person(s) who has been granted Letters of Administration.

Balances under \$15,000 (where applicable) and claimants under Section 65 Administration Act 1969.

Please note where Probate/Letter of Administration are not required to be applied for and the value of the amount available for withdrawal is less than \$15,000, any of the persons set out below may be entitled to complete this form:

- Wife
- Husband
- Civil union partner
- Defacto partner
- Child
- Person beneficially entitled to estate under the Will or on intestacy
- Person appearing to be entitled to obtain administration of estate in New Zealand
- Person related by blood, marriage or civil union to the deceased who undertakes to maintain the children of that person who are minors, and
- Person who has custody and control of the children of the deceased who are minors

Where there are more than three Personal Representatives, please complete and attach an additional form.

2 Requirements

This application must include:

- a certified copy of the Death Certificate; and either
 - where the Deceased left a Will a certified copy of the grant of Probate; or
 - where the Deceased did not leave a Will and if balance is over \$15,000 a certified copy of the Letters of Administration
- evidence of the relationship to the deceased e.g. marriage/birth certificate
- certified copies of a passport or drivers licence showing the signature for each claimant or personal representative
- a bank deposit slip for the account to be credited.

Copies of each of the documents must be certified as true copies by a solicitor, Justice of the Peace, Notary Public or any other person authorised to take a statutory declaration.

Please note that the Manager will adjust your withdrawal transaction for any tax liability arising as a result of the withdrawal request.

The withdrawal will be processed at the unit price effective on the day your withdrawal is processed.

If the form doesn't provide enough space for all your information, please attach extra pages.

Please remember to cancel any direct debits or automatics payments to the Kiwibank KiwiSaver Scheme.

3 Privacy

The information in this form is being collected for the purposes of effectively managing the deceased member's Kiwibank KiwiSaver Scheme account and it will be held by Kiwibank Investment Management Limited. It may be disclosed to third parties to the extent that's necessary to administer the deceased member's withdrawal from the Scheme.

4	Deceased member's per	sonal details continued Please print your details clearly in CAPITAL letters, using a pen
	Title	Mr Mrs Ms Dr Other (please specify)
	First name(s)	
	Surname	
	Date of birth	D D M M Y Y Y
	Physical address	Number and street
		Suburb
		City or town Postcode
	Postal address (if different from above)	Number, street and suburb
	Phone numbers	City or town Postcode
		Work Home
	Email address	Mobile
	Kiwibank access number	IRD number
_		
5	Name of Personal	epresentatives or Lawyer acting on behalf Please print your details clearly in CAPITAL letters, using a pen
	Representative:	
	Address	
		Number, street and suburb
		City or town Postcode
	Phone numbers	Work Mobile
	Email address	Mobile
	Name of Personal	
	Representative:	
	Address	Number, street and suburb
	Phone numbers	City or town Postcode
	Thore numbers	Work Mobile
	Email address	
	Name of Personal Representative:	
	Address	
		Number, street and suburb
		City or town Postcode
	Phone numbers	
	Email address	Work Mobile
6	Withdrawal details	
	By credit to the account of $\left[ight.$	
	Account number	
	Bank	Branch Account number Suffix

Payment will only be made to New Zealand bank accounts.

Declaration Please don't complete this section in advance. It must be completed and signed in front of a Justice of the Peace, solicitor, notary public or other person authorised to take a statutory declaration. (insert full name) (insert occupation) of (insert residential address) (insert full name) (insert occupation) of (insert residential address) (insert full name) (insert occupation) of (insert residential address) solemnly and sincerely declare that: I am entitled to make this claim and that all the information provided in this form and in all included materials is true and correct. I will apply the proceeds from the withdrawal in due course of administration as the law requires. I declare that to the best of my knowledge and belief, the deceased's principal place of residence since the deceased first joined a KiwiSaver scheme was in New Zealand. If the deceased did not reside principally in New Zealand for any period since becoming a KiwiSaver member, please specify that period(s): I hereby agree to indemnify the Trustee and the Manager of the Kiwibank KiwiSaver Scheme against any claims, losses, damages, costs and/or expenses whatsoever (including its own legal costs on a solicitor/client basis), which may arise in connection with the said investment or the payment of the balance therefore and also against all amounts the Trustee and the Manager may be called upon to pay and all costs (including its own legal costs on a solicitor/client basis), charges and expenses incurred in connection therewith. I understand that by completing this form I will be providing personal information which will be held securely by the Trustee and/or the Manager of the Kiwibank KiwiSaver Scheme. I have the right to access and correct this information subject to the provisions of the Privacy Act 1993. Balances under \$15,000 and claim being under section 65, Administration Act 1969 (where applicable) I declare that the deceased (select one): left a Will, and Probate has not and will not be applied for; or did not leave a Will, and Letters of Administration have not and will not be applied for. My relationship to the deceased was and I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

Full Name					
Signature					
Declared at		on D D M M Y Y Y			
Before me					
Justice of the Peace, solicitor, notary public or other person authorised to take a statutory declaration. Full Name					
Signature		Date D D M M Y Y Y Y			

Declaration	Declaration continued		
Full Name			
Signature			
Declared at	on D D M M Y Y Y Y		
Before me	Justice of the Peace, solicitor, notary public or other person authorised to take a statutory declaration.		
Full Name	Justice of the Feace, solicitor, florary public of other person authorised to take a statutory dectaration.		
Signature	Date D Date		
Full Name			
6 : .			
Signature			
Declared at	on D D M M Y Y Y Y		
Before me	Justice of the Peace, solicitor, notary public or other person authorised to take a statutory declaration.		
Full Name			
Signature	Date D D M M Y Y Y		
Signature	Date 3 3 4 4 1		
What next?			
Post or email t	his form and all supporting documentation to:		
Kiwibank Limit Private Bag 39			
Wellington 504	5		
	lth Management Team		
or «bksproduc t@	kiwibank.co.nz		
,			
Checklist			
Before returni	ng this application, please ensure that:		
You've c	ompleted all sections of the form and make the statutory declaration in the required manner		
You've p	rovided		
а	certified copy of the Death Certificate; and either		
	where the Deceased left a Will – a certified copy of the grant of Probate; or		
	where the Deceased did not leave a Will and if balance is over \$15,000 – a certified copy of the Letters of Administratio		
Evidence	e of the relationship to the deceased e.g. marriage/birth certificate		
Certified	copies of a passport or drivers licence showing the signature for each claimant or personal representative		
A bank o	leposit slip for the account to be credited.		