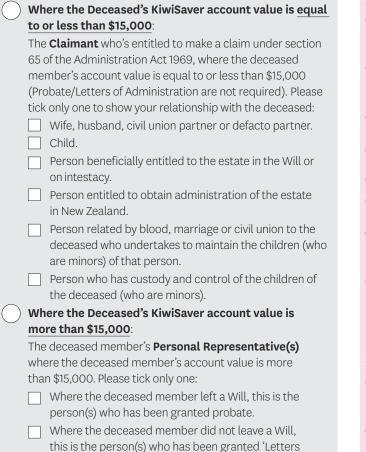
Westpac KiwiSaver Scheme Deceased Estate Withdrawal Application

How do I qualify?

To be eligible for this withdrawal, you must be:



What can I withdraw?

If approved, you'll be transferring the full available balance of the deceased member's Westpac KiwiSaver Scheme account.

When can I expect payment?

of Administration'.

Generally, once your completed application form and all supporting documents have been received, your payment will be made to your nominated bank account within 10 business days of your request being approved. We'll let the primary Claimant/ Personal Representative know the outcome of your withdrawal request.

Need help?

If you need help completing this form or would like an update on your application, call **0508 972 254** (+**64 9 375 9978** from overseas) weekdays between 8.30am and 5pm NZ time. Alternatively, email us at **kiwisaverhelp@westpac.co.nz**

How do I apply?

- 1. Primary Claimant/Personal Representative to complete all sections of the form.
- Then send the form and supporting documents to: Courier: Westpac KiwiSaver Scheme, Level 4 Cityside, Westpac on Takutai Square, 53 Galway Street, Auckland 1010, New Zealand

Post: Westpac KiwiSaver Scheme, PO Box 695, Wellington 6140 **Visit:** any Westpac branch



Your checklist

If the withdrawal amount is <u>equal to or less than \$15,000</u>, you'll need:

- Fully completed application form by the primary Claimant under section 65 of the Administration Act 1969 (see 'How do I qualify?').
- Check the primary Claimant has completed and signed the statutory declaration, and it has been witnessed and signed by a person authorised to take statutory declarations.
- Check the secondary Claimant has signed the back page of the form (only if applicable)
- Certified copy of the death certificate or Medical Cause of Death Certificate.
- Certified copy of the Will (if the deceased left a Will).
- Certified copy of the evidence of the relationship to the deceased e.g. marriage or birth certificate.
- Certified copy or original bank statement/deposit slip, if the bank account you've provided for payment is not a Westpac New Zealand bank account.
- Certified copy of all Claimants' acceptable identity documentation (such as the photo and signature pages of your current signed passport, or both sides of your current New Zealand driver licence).

If the withdrawal amount is <u>more than \$15,000</u>, you'll need:

- Fully completed application form by the deceased's Personal Representative, i.e. granted probate or 'Letters of Administration' (see 'How do I qualify?').
- Check the primary Personal Representative has completed and signed the statutory declaration and it has been witnessed and signed by a person authorised to take statutory declarations.
- Check the secondary Personal Representative has signed the back page of the form (only if applicable).
- Certified copy of the death certificate or Medical Cause of Death Certificate.
- Certified copy of Probate or Letters of Administration.
- Certified copy or original bank statement/deposit slip if the bank account you've provided for payment is not a Westpac New Zealand bank account.
- Certified copy of all Personal Representative's acceptable identity documentation (such as the photo and signature pages of your current signed passport, or both sides of your current New Zealand driver licence).

For a full list of acceptable identification and proof of address, go to **westpac.co.nz/AML**

What's a certified copy?

A certified copy is a copy of an original document on which an authorised person (such as a Justice of the Peace, solicitor or other legally authorised person) has confirmed it is a true copy of the original. All certified copies must include:

- The certifier's name, occupation, signature and date.
- The following or equivalent wording: "I certify this to be a true copy of the original document as sighted by me on [date]"
- For identity documents only, add: "and it represents the true likeness and identity of the individual"

The certifier can't be: someone you're related to, your spouse/ partner, or someone who lives at the same address.

Deceased details

Mr Mrs Miss Ms Other (pl	ease specify)			Date of birth DD / MM / YYYY
Name FIRST	MIDDLE		LAST	
Physical address NUMBER & STREET			SUBURB	
TOWN/CITY			POSTCODE	
Postal address (if different) NUMBER & STREET			SUBURB	
TOWN/CITY			POSTCODE	
IRD number				
Westpac KiwiSaver Scheme member number	S			
Claimant/Personal Representative?	s details			
Primary Claimant/Personal Representative's det This is where confirmation of your withdrawal reque Mr Mrs Miss Ms Other		Secondary Claim (if applicable): Mr Mrs	ant/Personal	Representative's details

(please specify) Date of birth	DD / MM / YYYY	(please specify) Date of birth	DD / MM / YYYY
Name FIRST MIDDLE	LAST	Name FIRST MIDDLE	LAST
Physical address NUMBER & STREET	SUBURB	Physical address NUMBER & STREET	SUBURB
TOWN/CITY	POSTCODE	TOWN/CITY	POSTCODE
Postal address (if different) NUMBER & STREET	SUBURB	Postal address (if different) NUMBER & STREET	SUBURB
TOWN/CITY	POSTCODE	TOWN/CITY	POSTCODE
Phone HOME MOBILE		Phone HOME MOBILE	
Email		Email	
Occupation		Occupation	
Relationship to deceased		Relationship to deceased	

Your payment details

Please provide us with a New Zealand bank account that is either solely or jointly held in the Primary Claimant/Personal Representative's name (i.e. not a Trust account or business account). If approved, the withdrawal will be paid to your nominated account. If the bank account below is not a Westpac New Zealand bank account, you'll need to supply a certified copy or original bank statement/deposit slip.

Account holder's name	FIRST	MIDDLE	LAST
Account number	BANK BRANCH	ACCOUNT NUMBER	SUFFIX

Privacy statement

The personal information which you provide in (or in connection with) this form will be held securely by BT Funds Management (NZ) Limited (Manager) and/or The New Zealand Guardian Trust Company Limited (Supervisor), at the address of Trustees Executors Limited, the registry provider, and may be disclosed to Westpac Banking Corporation ABN 33 007 457 141 (Westpac), Westpac New Zealand Limited (Westpac NZ) and any other entity that is involved in the administration and management of the Westpac KiwiSaver Scheme (including Inland Revenue and any regulatory body). You have the right to access and correct this information subject to the provisions of the Privacy Act 2020. Your personal information may otherwise be collected, used and disclosed in accordance with Westpac's Privacy Policy (available at **westpac.co.nz/privacy**).

Westpac branch use – branch checklist	Branch name	Staff name
Form is complete Customer is AML c	ompliant, current ID and pr	roof of address has been verified/certified and loaded into Sales Customer (Assist)

Statutory declaration

PRIMARY CLAIMANT/PERSONAL REPRESENTATIVE TO PRINT THIS FORM AND SIGN THE STATUTORY DECLARATION IN FRONT OF YOUR WITNESS.

1. Eligibility to withdraw government contributions

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.*

Yes (continue to the 'Your statutory declaration' below)				
No (list below, excluding any overseas holidays where the deceased remained a New Zealand resident. Then continue to the 'Your statutory declaration' below)				
Г				
Lived in L	from	Date DD / MM / YYYY to Date DD / MM / YYYY		
Lived in [from	Date DD / MM / YYYY to Date DD / MM / YYYY		

*If the deceased worked overseas as a government employee or as a charity volunteer, this withdrawal may still be eligible for government contributions. Please provide evidence with your application, such as a letter from their employer confirming the period they were employed.

2. Your statutory declaration

It must be completed and signed in front of a Justice of the Peace, a Solicitor, Notary Public or other person authorised to take a statutory declaration. Please note that Westpac staff cannot complete this statutory declaration.

PRIMARY CLAIMANT/REPRESENTATIVE NAME	OCCUPATION

of ADDRESS

Solemnly and sincerely declare that:

- I have read and understood the Privacy Statement.
- I understand that if the information in this application is incomplete or incorrect, the Manager of the Westpac KiwiSaver Scheme will not be able to complete its assessment of this application.
- I understand that the withdrawal value will be based on the unit price(s) applying at the date that this withdrawal request is processed, so may be subject to change. It can be affected by market volatility, PIE tax rebates or deductions and additional contributions received (withdrawal amount).
- The account holder permanently resided in New Zealand for the full duration of their Kiwisaver membership, other than the periods (if any) listed in the 'Eligibility to withdraw government contributions' section.
- I am entitled to make this claim and that all the information provided in this form (and any included materials) is true and complete.
- In consideration of the Manager paying out the withdrawal amount I personally undertake to indemnify the Manager, the Supervisor, Trustees Executors Limited, Westpac and Westpac NZ against any claims, liability, losses, damages, costs and expenses whatsoever that may be incurred or suffered by the Manager, the Supervisor, Trustees Executors Limited, Westpac and Westpac NZ, by reason of the Manager, the Supervisor, Trustees Executors Limited, Westpac and Westpac NZ relying on the above information and releasing the withdrawal amount as requested.
- I will apply the withdrawal amount proceeds from the withdrawal in the course of the administration as the law requires.

Balances \$15,000 or less and claim being under section 65, Administration Act 1969 (where applicable). I declare that the deceased (please tick only 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.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

Declared at TOWN/CITY

Date DD / MM / YYYY

Before me (a person authorised to take a statutory declaration in accordance with the New Zealand Oaths and Declarations Act 1957 - see above for further information):

Name of witness			
Declared at TOWN/CITY	Occupation	Date DD / MM / YYYY	STAMP
Signature of witness			
Secondary Claimant/Personal Re I have sighted this form and confirm			
SECONDARY CLAIMANT/REPRESE	NTATIVE NAME		
SIGNATURE SECONDARY			Date DD / MM / YYYY

BT Funds Management (NZ) Limited is the scheme provider and Westpac New Zealand Limited is a distributor, of the Westpac KiwiSaver Scheme. Westpac New Zealand Limited.