

SBS Wealth KiwiSaver Scheme Deceased Estate Withdrawal Application

Use this form to apply for a **full withdrawal from the SBS Wealth KiwiSaver Scheme of a deceased member's investment.**

Before you get started

Executors and Administrators

The deceased's Personal Representatives must complete this form. This means the persons who have been granted:

- > Probate if the deceased member left a Will; or
- > Letters of Administration if the deceased member did not leave a Will.

Balance \$15,000 or less and claimant(s) under section 65, Administration Act 1969

Please note that where Probate/Letters of Administration are not required to be applied for, and will not be applied for, and if the value of the amount available for withdrawal is \$15,000 or less, any of the following persons ("Claimants") can complete this form:

- > the surviving spouse, civil union partner, de facto partner or children of the deceased member;
- > the persons beneficially entitled to estate under the Will or on intestacy;
- > any person appearing to be entitled to obtain administration of estate in New Zealand;
- > any person related by blood, marriage or civil union to the deceased who undertakes to maintain the children of that person who are minors;
- > any person who has and is exercising the role of providing day-to-day care for any of the children of the deceased who are minors.

What happens after you submit the form?

- > We check your application is complete;
- > We refer your application to Inland Revenue to enable release of your Government contributions, if any;
- > Once approved we arrange payment to your account;
- > Payment can normally be expected within 15 working days of receipt of your application.

If you require assistance completing this form then please contact us on **0800 727 935** or email us at **contact@sbswealth.co.nz**.

IMPORTANT CHECKLIST (RETURN WITH FORM)

Before sending us the form please check you:

(Please tick)

- ☐ Are fully aware of the requirements you must meet in order to qualify for this withdrawal;
- ☐ Have completed all sections of this form including the Statutory Declaration;
- ☐ Attach proof of the bank account to be credited such as a pre-printed bank deposit slip;
- ☐ If the bank account for payment is an overseas account you have completed the Swift and/or IBAN number;
- ☐ Attach a certified/verified copy of evidence of address for all personal representatives (for a full list of acceptable documents, please refer to section 6 of this form);
- ☐ Attach a certified/verified copy of acceptable identity verification documents for all personal representatives or claimants. This is usually by way of either: 1. a certified/verified copy of a New Zealand passport; or 2. a certified/verified copy of a New Zealand driver licence showing a photo of the applicant, together with a secondary form of identification. For a full list of acceptable documents, please refer to section 6 of this form.

Executors and Administrators

- ☐ Attach a certified/verified copy of Probate or Letters of Administration.

Balances \$15,000 or less and claims being made under section 65, Administration Act 1969

- ☐ Attach a certified/verified copy of the Death Certificate or Medical Cause of Death Certificate;
- ☐ Attach a certified/verified copy of the Will (if the deceased left a Will);
- ☐ Attach a certified/verified copy of evidence of the relationship to the deceased e.g. Marriage/Birth Certificate.

Return form

Please return the completed form and requested supporting documents to us by post:

Post/courier: SBS Wealth KiwiSaver Scheme, PO Box 10445, Wellington 6143

Section 1: Member's details

Member	<input type="text" value="K S"/>	DoB	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YYYY"/>	IRD number	<input type="text"/>	
Title	<input type="text"/>	Given name(s)	<input type="text"/>			Surname	<input type="text"/>	
Current postal address							<input type="text"/>	
							Postcode	<input type="text"/>

Section 2: Administrator / Executor / Claimant details

Details of Executor acting on behalf of deceased, or Claimant acting on behalf of deceased under Section 65 of the Administration Act 1969.

1st Administrator / Executor / Claimants

Title	<input type="text"/>	Given name(s)	<input type="text"/>			Surname	<input type="text"/>	
Current postal address							<input type="text"/>	
							Postcode	<input type="text"/>
Home phone	<input type="text"/>		Work phone	<input type="text"/>		Mobile	<input type="text"/>	
Email address							<input type="text"/>	
Relationship to deceased							<input type="text"/>	

2nd Administrator / Executor / Claimants

(Please note, you are also required to print and complete the Section 7 Statutory Declaration and attach with the application)

Title	<input type="text"/>	Given name(s)	<input type="text"/>			Surname	<input type="text"/>	
Current postal address							<input type="text"/>	
							Postcode	<input type="text"/>
Home phone	<input type="text"/>		Work phone	<input type="text"/>		Mobile	<input type="text"/>	
Email address							<input type="text"/>	
Relationship to deceased							<input type="text"/>	

Section 3: Bank account details

We will make payments to a New Zealand bank account held in your name or jointly in your name or the solicitor's trust account. If you no longer have a New Zealand bank account we will only pay into your overseas bank account by telegraphic transfer remitted in the currency of the country in which the account resides (less any associated costs for the transfer including foreign exchange conversion). We will adjust your withdrawal amount for any tax liability.

Please pay (please tick one) ☐ To a New Zealand bank account ☐ To an overseas bank account by Telegraphic Transfer

Bank account name

Account number - - -
 Bank Branch Account number Suffix

Bank Name Branch City

☐ **Please provide evidence of your bank account details** (please tick)

(attach a pre-printed deposit slip, copy of bank statement, over-the-counter printed receipt with a teller's stamp or on-line bank statement containing the name of the bank in the header or footer)

Overseas bank details (in addition to the above details please complete the following swift and/or IBAN details if the payment is to an overseas account)

Swift number IBAN number

Section 4: Confirmation of New Zealand residency

Government contributions made to the deceased's account cannot be withdrawn until you provide a Statutory Declaration confirming whether the deceased's principal place of residence was New Zealand for the duration of the deceased's KiwiSaver membership. If the deceased lived or worked overseas and received Government contributions, we must refund that portion back to Inland Revenue.

To the best of my knowledge and belief (please tick one)

☐ New Zealand has been the deceased's principal place of residence for the entire period they have been a member of KiwiSaver; **OR**

☐ The deceased was living overseas for the following periods and outside of these periods, the deceased's principal place of residence was in New Zealand.

From DD MM YYYY To DD MM YYYY From DD MM YYYY To DD MM YYYY

Section 5: Privacy policy

For the latest version of our Privacy Policy please see www.sbswealth.co.nz/privacy-policy/.

I confirm that I have read and understood the Privacy Policy and consent to the collection, use, disclosure and retention of my personal information for the purposes of processing this application, managing my membership of the Scheme and as otherwise in accordance with the terms of the Privacy Policy.

Section 6: Identification details

Your application must be submitted with one of the address options and one of the identity sets below.

Present the following original documents in person to your local SBS Bank branch or approved distribution partner. Where presentation of the original documents is not possible, please provide certified copies of original documents by a Trusted Referee. Please refer to the Document Certification table for a list on who may certify original documents.

Approved Identification Documents

Please provide one of the following sets of Name and Date of Birth Identification Documents:

- ☐ Set One – one primary identification document from Set One; **OR**
- ☐ Set Two – one primary and one secondary identification document from Set Two; **OR**
- ☐ Set Three – one primary and one secondary identification document from Set Three.

	Identity Verification – Primary (Must be signed [where relevant] and current)	Identity Verification – Secondary (Must be signed [where relevant] and current)
Set One	<input type="checkbox"/> New Zealand passport <input type="checkbox"/> Overseas passport (with photo & signed) <input type="checkbox"/> New Zealand firearms licence	– None required
Set Two	<input type="checkbox"/> New Zealand drivers licence	<input type="checkbox"/> SuperGold Card (signed) <input type="checkbox"/> NZ registered Bank/Credit card (Name embossed & signed) <input type="checkbox"/> NZ registered Bank statement issued in the last 12 months <input type="checkbox"/> Document issued by NZ Government (e.g. marriage licence) <input type="checkbox"/> Statement issued by NZ Government agency (e.g. WINZ, IRD) issued in the last 12 months
Set Three	<input type="checkbox"/> New Zealand full birth certificate <input type="checkbox"/> Overseas full birth certificate <input type="checkbox"/> Certificate of New Zealand citizenship <input type="checkbox"/> Overseas citizenship certificate	<input type="checkbox"/> New Zealand drivers licence <input type="checkbox"/> Overseas drivers licence (with photo) <input type="checkbox"/> 18+ Card/Kiwi Access card <input type="checkbox"/> SuperGold Card (with photo & signed)

Approved address verification document

Please provide one of the following Address Identification Documents:

Must be addressed to you personally and, include your current physical address, and be dated within 12 months of presentation.

Electronic copies are acceptable if they show the same physical address that they otherwise would have been posted to.

- ☐ Bank statement from NZ registered bank issued in last 12 months
- ☐ Utility Bill (Power, Phone, Internet, Gas, Water)
- ☐ A signed Tenancy Agreement
- ☐ Local authority rates bill
- ☐ Current Vehicle registration
- ☐ Document issued by NZ Government authority
- ☐ Insurance Policy (dwelling)
- ☐ Non-bank Financial Institution statement or correspondence (e.g. Building Societies and AML/CFT reporting entities)
- ☐ Electronic White Pages
- ☐ Sales and Purchase Agreement
- ☐ Letter from a New Zealand education institution
- ☐ Rest/Retirement Home statement or correspondence

Document certification

If you are unable to present original documents in person then certified copies of original documents may be presented. These must be certified by a Trusted Referee.

A Trusted Referee must be over 16 years of age and can be any of the following:

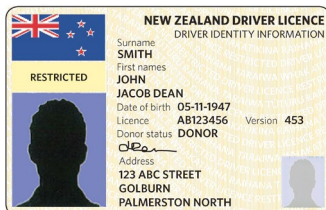
- > New Zealand Lawyer
- > Notary Public
- > Justice of the Peace
- > New Zealand Honorary Consul
- > New Zealand Chartered Accountant
- > A person who has the legal authority to take statutory declarations or the equivalent in New Zealand

The Trusted Referee must not be:

- > Related to the customer; for example, a trusted referee cannot be their parent, child, brother, sister, aunt, uncle or cousin
- > The spouse or partner of the customer
- > A person who lives at the same address as the customer
- > A Person involved in the transaction or business requiring the certification

The Trusted Referee must sight the original document and provide a written statement to the effect that the copy provided is a true and correct copy of the original which they have sighted, and where a photograph is included, represents your identity. Certification must include the name, occupation, signature of the Trusted Referee and the date of certification. Where possible the document should be stamped or sealed noting the authority of that person (i.e. Justice of the Peace stamp). The certification must be provided to us within 3 months of its dating.

Example of certified driver licence



Must not be expired

Required Certification statement for photographic document

I certify this to be a true and correct copy of the original, which I have sighted, and the photo represents a true likeness of the individual.

Name: Jane Doe

Occupation: Justice of the Peace

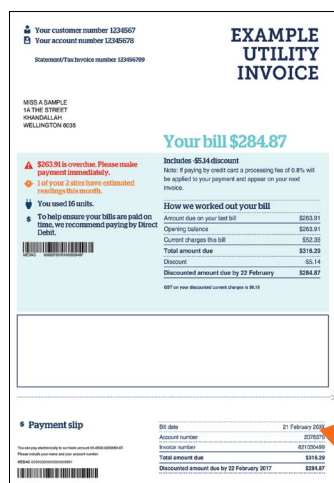
Signature: J Doe

Date: 20 03 20XX

Must be dated within the previous 3 months



Example of certified address document



Must be dated within the previous 12 months

Required Certification statement for non-photographic documents

I certify this to be a true and correct copy of the original document, which I have sighted.

Name: Jane Doe

Occupation: Justice of the Peace

Signature: J Doe

Date: 20 03 20XX

Must be dated within the previous 3 months



Section 7: Statutory declaration

I (full name)

Of (address)

Occupation

solemnly and sincerely declare and agree that:

1. I am entitled to make this claim.
2. I am applying to withdrawal all of the deceased member's SBS Wealth KiwiSaver Scheme account savings. I understand that upon payment, the deceased member will no longer be a member of the SBS Wealth KiwiSaver Scheme.
3. I will apply the proceeds from the withdrawal in due course of administration as the law requires and will pay and discharge any debts that may be proved in the estate of the deceased.
4. I agree to release all claims that have been made by me or the deceased member on the Manager and/or Supervisor in relation to the SBS Wealth KiwiSaver Scheme.
5. I understand that my withdrawal value will or might fluctuate based on the unit price(s) which applies when the withdrawal is processed and that fees, taxes and expenses may be deducted from my SBS Wealth KiwiSaver Scheme account including where applicable any associated costs for the telegraphic transfer of the withdrawal to be remitted in the currency of the country in which the account resides and is subject to the requirements of the trust deed and KiwiSaver Act.
6. The information provided by me in this form is true and correct. I acknowledge that the Manager and the Supervisor of the SBS Wealth KiwiSaver Scheme will rely on information provided in (or in connection with) this form and accordingly agree to indemnify them against and claims, liability, losses, damages, costs and expenses whatsoever which may arise directly or indirectly as a result of any information provided in (or in connection with) this form being untrue or misleading (including by omission).
7. I understand that the Manager and/or Supervisor of the SBS Wealth KiwiSaver Scheme will not be able to complete its assessment of this application if the information given in this form is incomplete or incorrect.
8. I understand that the Manager and/or Supervisor of the SBS Wealth KiwiSaver Scheme may request additional information from me relating to this application.
9. I understand the information supplied by me with this application can be used to electronically verify my identity and address (where necessary) and may be disclosed for these purposes to third parties where relevant including a government agency or reliable, independent source.
10. I have read the privacy statement in this form.
11. I understand that once the Supervisor has received my withdrawal request, that request is irrevocable, whether it be by this form, a facsimile of this form, or any other means that may be acceptable to the Supervisor from time to time.

Balances \$15,000 or less and claims being made 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.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957. **Note:** Do not complete the following section until you are with the person witnessing your declaration.

Your signature

Declared at (Place, for example town or city)

Date

Before me (Name of official witness)

Signature of official witness

Stamp

Staff cannot take statutory declarations. A solicitor, Justice of the Peace or Registrar of a New Zealand Court can take this statutory declaration for you. What you sign must be true. You can be prosecuted if you make a false declaration.