



Lifestages KiwiSaver Scheme Significant Financial Hardship Withdrawal Application

Due to the COVID-19 Virus a significant financial hardship (hardship) withdrawal can help during times of financial difficulty. However, the purpose of your KiwiSaver savings is for your retirement so you will have to meet strict criteria to be eligible to withdrawal any of your funds earlier. If your hardship arises as a consequence of COVID-19, please fill out this form.

Please read the following to help you understand if you can apply for a hardship withdrawal before you make an application.

Do any of these apply to you?

- Unable to pay for minimum living expenses such as power, water, and food bills?
- Unable to pay mortgage/rental/board payments?
- Unable to pay to modify your home to meet special needs if you or a dependent family member is disabled?
- Unable to pay for medical treatment for you or a dependent family member for illness, injury, or palliative care?
- Incurred funeral costs as a dependent family member has died?

YES

If you feel you are suffering hardship and have exhausted all other reasonable alternative sources of funds, you can apply for a KiwiSaver early withdrawal.

NO

If you need some help with your finances, you could arrange to visit a Budget Adviser in your area. There are lots of free Budget Advisory Services across New Zealand who can give advice about government support, debt consolidation and finance options.

But what does it all mean?



Minimum living expenses generally include:

- basic food and groceries
- mortgage/rent/board payments
- basic clothing
- utility bills (power, water, phone)
- basic transport costs
- expenses in relation to any financial dependants with special needs.



Minimum living expenses don't include:

- credit card debt relating to non-essential living expenses
- fines or infringement notices
- debt collection agency bills
- hire purchase debt relating to non-essential living expenses
- holidays
- travel to visit a sick relative.



Financial dependants

This includes a partner, children and/or relative.

To be financially dependent, the person must be fully dependent on you.

How do I apply?

If you think you're eligible for a KiwiSaver hardship withdrawal, follow the steps below.

Step 1 Complete the application form in full.



Collect all of the supporting documents listed in the checklist (see page 1 of the application form). We need these to determine your current financial position.



Step 3 You'll need to complete the Statutory Declaration (section 14).



Step 4 You can post or email your completed application to us using the return details at the end of the application form.





What happens once you receive my application?

Step 1 We check your application and supporting documents. If anything is missing we'll let you know that we need more information. We can't continue to the next step until we have everything we need from you.

Step 2 When you've given us all the information we need we'll assess your application.

Step 3 We send your application and supporting documents to the Supervisor for a final decision.

Step 4 We'll let you know the outcome either by phone, email or letter.

Step 5 If your application is approved, we'll make payment to the bank account stated on your application form.

What should I do before I apply?

- Explore all Government assistance packages available to relieve your COVID-19 hardship.
- Explore all mortgage, personal debt and other arrangements where payment "holidays" may be available.
- If you're an employee, once you've been a member of KiwiSaver for 12 months, you can choose to take a break from saving this is called a savings suspension. To do this, please contact Inland Revenue on 0800 549 472.

How much can I apply to withdraw?

You can apply to withdraw all of the funds in your KiwiSaver account excluding any Crown contributions, but this doesn't mean that you'll be entitled to receive this amount.

If your application is approved, you'll receive an amount that, in the Supervisor's opinion, is required to relieve your hardship. Generally this covers any shortfall for your minimum living expenses for three months, plus an amount to pay any overdue bills or arrears.

Who decides if I can withdraw?

The licensed Supervisor who is independent of the manager (also called the provider). Funds Administration New Zealand Limited is your KiwiSaver provider, and our role is to assess your application. However, it is the Supervisor who makes the final decision, taking into account your individual circumstances and the requirements of the KiwiSaver Act.

How long does it take?

If you provide all of the information we need to assess your financial situation we'll be able to give you an outcome in 15 business days from receiving your application and documents. If we have to ask for additional information, this will cause delays in the processing of your application.

Please account for the reduced delivery days by New Zealand Post when sending your applications and documents by post.





Use this form to apply for a withdrawal of KiwiSaver contributions if you are suffering significant financial hardship due to the COVID-19 Virus.

If you require assistance completing this form then please contact us **0800 727 2265** or email us at **contact@lifestages.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 (section 14) and certificate (if witnessed remotely); 				
Attach proof of your bank account such as a pre-printed bank deposit slip;				
 Attach a certified copy of evidence of address (for a full list of acceptable documents, please refer to section 13 of this form), and 				
Attach a certified copy of acceptable identity verification documents. This is usually by way of either a certified copy of a New Zealand passport or a certified copy of a New Zealand photo driver's licence together with a secondary form of identification (for a full list of acceptable documents, please refer to section 13 of this form).				
You must supply us with the following for you and any household members who contribute financially to the day-to-day running of your home (where applicable): (Please tick)				
Living arrangements – confirmation of the amount you currently owe and any arrangements for future payments:				
if you're a homeowner, a letter from your mortgage provider				
if you're renting or boarding, a tenancy agreement or a letter from your landlord.				
Proof of wages or salary:				
if you're employed, your last month's payslip				
if you've recently been made redundant, your redundancy letter and final payslip				
if you're self-employed, your most recent summary of earnings.				
 Bank statements for the last month for all accounts in your and your partner's name (individual, joint and business accounts): 				
Overdue bills (these must be less than 30 days old). We need to be able to see the outstanding balance and your regular minimum payments:				
utility bills credit cards personal loans other overdue accounts				
store cards car loans finance company loans				
If applicable, you must also supply the following documents that apply to you and any household members who contribute financially to the day-to-day running of your home: (Please tick)				
Two quotes for a car valued at \$5,000 or less and an explanation as to why the car is necessary				
 Two quotes from different companies for any necessary home modifications to meet special needs arising from a disability 				
A medical report and quote or invoice for any necessary medical expenses				
An invoice for funeral expenses for a dependent				
Any receipts for self-isolation expenses (over \$1,500)				

The Supervisor must be reasonably satisfied that you have explored and exhausted all other reasonable alternative sources of funding. The omission of any required documents to support your application may result in your application being delayed or declined.

If the Supervisor approves your application, we will send you confirmation and make payment to your bank account. You should then use the payment to alleviate the claimed hardship. Note: If you make another significant financial hardship claim in the future, you will need to supply evidence that you used any previous payment(s) to alleviate any claimed hardship.

If the Supervisor does not approve your application we will tell you. The Supervisor is not obliged to disclose the reasons for declining your application.





Section 1: Member's details

Member K S DoB D D M	VI YYYY IRD number
Title Given name(s)	Surname
Current postal address	
	Postcode
Home phone Work phone	Mobile
Best time to contact you (please tick one)	noon Evening
Email address	
I consent to receiving all communications regarding the Lifestages Kiv	viSaver Scheme via email (please tick)
Prescribed Investor Rate (PIR*) (please tick one) 10.5% 17.5%	% 28% *Refer to Inland Revenue (www.ird.govt.nz) to determine your PIR.
Note: We will update your account with the details you provide above if they differ fr	om our existing records.
Current employment status (please tick one) Employed full-time	☐ Employed part-time ☐ Not employed
Section of Doubles and Jour dependence	dataila
Section 2: Partner and/or dependants	getails
Name	Age Relationship to you
Current employment status (please tick one) Employed full-time	☐ Employed part-time ☐ Not employed
Name	Age Relationship to you
Current employment status (please tick one) Employed full-time	☐ Employed part-time ☐ Not employed
Name	Age Relationship to you
Current employment status (please tick one) Employed full-time	Employed part-time Not employed
Name	Age Relationship to you
Current employment status (please tick one) Employed full-time	☐ Employed part-time ☐ Not employed
Name	Age Relationship to you
Current employment status (please tick one) Employed full-time	☐ Employed part-time ☐ Not employed
Name	Age Relationship to you
Current employment status (please tick one) Employed full-time	Employed part-time Not employed

If you require more room to explain your circumstances, or to add family members' details please continue on a blank page sheet and include this in your application. Any information missing from your application will cause delays.





Section 3: Bank account details

We will only make payments in New Zealand dollars to a New Zealand bank account held in your name or jointly in your name. We will adjust your withdrawal amount for any tax liability. Bank account name Account number Account number Suffix Bank Name Branch Please provide evidence of your bank account details (please tick) $(attach \, a \, pre-printed \, deposit \, slip, copy \, of \, bank \, statement, \, over-the-counter \, printed \, receipt \, with \, a \, teller's \, stamp \, or \, on-line \, bank \, statement \, containing \, the \, name \, of \, bank \, statement \, containing \, co$ the bank in the header or footer) **Section 4: Previous application for Significant Financial Hardship** Have you made a previous application for significant financial hardship either for this scheme or with any other previous scheme(s) to which you have been a member? (please tick one) ○ No Yes (provide the following details for the last application you have made) Date of application DD MM YYYY Provider name Member number Was your application successful? O No Yes – Did you apply the payment to alleviate the claimed hardship? No* Yes *If No please explain why not **Section 5: Bankruptcy** Have you ever been adjudicated bankrupt or admitted to a No Asset procedure? (please tick one)

Section 6: Privacy

This form collects personal information about you. The information collected will be used and disclosed to enable the Manager and/or the Supervisor to make a decision regarding this form, to access any database (including, without limitation, the New Zealand Transport Agency's database of driver licences and the Department of Internal Affair's database of passports) to verify identity information, and to discharge their respective administrative and regulatory obligations. This information will be held by FANZ at their address set out in the current Product Disclosure Statement for the Lifestages KiwiSaver Scheme. Under the Privacy Act 1993, you have the right to access and to request correction of any personal information about you held by FANZ and/or the Supervisor. The information will only be disclosed to another party to the extent necessary for the purpose set out above, where required by law, or as otherwise authorised by you.

No Yes (please provide details) Date DD MM YYYY Official Assignee Reference/Case Number:





Section 7: Declaration of Significant Financial Hardship

In granting this application we may consider the withdrawal of all or part of the amount you request. We may also request further financial information from you. To enable an assessment of your financial position, you must attach evidence (for example, payslips or a letter from your employer, three months of bank statements, overdue utility bills and ALL other supporting documentation).

Give the reasons you are seeking a significant financial hardship withdrawal. (please tick those circumstances which apply to you)
Unable to pay for minimum living expenses such as power, water, and food bills;
Unable to pay mortgage/rental/board payments;
Unable to pay to modify your home to meet special needs if you or a dependent family member is disabled;
Unable to pay for medical treatment if you or a dependent family member becomes ill, has an injury, or requires palliative care;
 Incurred funeral costs as a dependent family member has died.
Other (specify)
Include an explanation and evidence as to what unforeseen circumstances have arisen which means you can no longer meet Mortgage, Rent, or Minimum Living Expenses – e.g. has someone lost their job, or had hours reduced), including how these items have been affected by the COVID 19 Epidemic or lockdown.
What alternative sources of funding have you explored and what are their limits. (Include evidence such as letters of decline from Banks (e.g. for a mortgage holiday) and Government departments (e.g. WINZ), proof of seeking budgetary assistance including help from non-profit organisations, and any personal loan
debt restructuring under the Credit Contracts and Consumer Finance Act).
How much money are you requiring? (please tick one)
☐ All available funds OR ☐ A partial withdrawal of \$
NOTE: You cannot withdraw any Crown contributions (i.e. \$1,000 kickstart or member tax credits). Any withdrawal will be deducted proportionally from each investment

The Supervisor may direct that the amount withdrawn be limited to a specified amount that, in the Supervisors' opinion, is required to alleviate the particular hardship. The amount of that significant financial hardship withdrawal may, subject to the Supervisors' approval be up to the value of the member's accumulation less the amount

portfolio or fund that you are invested in.

of the Crown contribution on the date of withdrawal.





Section 8: What is your total weekly household income (after tax)?

In this section you need to tell us about the money you and your household have coming in each week. The more information we have, the better we'll be able to assess your individual circumstances.

If we need to ask you for further information, this will delay the processing of your application.

You:	Your partner:	
Salary/Wages	\$ Salary/Wages	\$
Commission	\$ Commission	\$
Self-employed income	\$ Self-employed income	\$
Pension/Superannuation	\$ Pension/Superannuation	\$
Benefit	\$ Benefit	\$
Child support received	\$ Child support received	\$
Working for Families Tax Credits	\$ Working for Families Tax Credits	\$
ACC	\$ ACC	\$
Rental/Board income	\$ Rental/Board income	\$
Interest/Dividends	\$ Interest/Dividends	\$
Other (specify)	\$ Other (specify)	\$
Your total weekly income	\$ Partner's total weekly income	\$

Section 9: What assets/savings does your household have?

In this section you need to tell us about the things you and your household own, and their current market value.

Your partner (if ownership is separate from yours): You (or jointly owned): \$ \$ Family home Family home \$ \$ Investment property/Holiday home Investment property/Holiday home Household contents (value) \$ Household contents (value) \$ Vehicles inc. boats and motorbikes \$ Vehicles inc. boats and motorbikes \$ \$ \$ Bank accounts (details to be provided) Bank accounts (details to be provided) Shares \$ Shares \$ \$ \$ Term deposits Term deposits \$ \$ Bonus bonds Bonus bonds \$ \$ Superannuation Superannuation \$ \$ Other (specify) Other (specify) \$ \$ Life insurance policies* Life insurance policies* Your total assets \$ Partner's total assets \$

^{*}Some older life insurance policies can be cashed in, and so are classified as assets. If you're unsure, check with your provider.





Section 10: Please provide details of the bank accounts your household have?

Please provide bank account details of the amounts disclosed in the previous section. You are also required to attach copies of the bank statements for these accounts for the last 3 months. Your application cannot be assessed without them.

Bank account name			Account balance \$
Account number	Bank Branch	- L	Suffix
Bank Name		Branch	City
Bank account name			Account balance \$
Account number	Bank Branch	- Laccount number	Suffix
Bank Name		Branch	City
Bank account name			Account balance \$
Account number	Bank Branch	- L	Suffix
Bank Name		Branch	City
Bank account name			Account balance \$
Account number	Bank Branch	- Account number	Suffix
Bank Name		Branch	City
Bank account name			Account balance \$
Account number	Bank Branch	Account number	Suffix
Bank Name		Branch	City





Section 11: What total weekly expenses does your household have?

In this section you need to tell us about the money you and your household have going out each week. The more information we have, the better we'll be able to assess your individual circumstances. You'll need to provide evidence of all of the items you list below. The evidence you provide must be less than 30 days old.

To convert monthly payments into weekly payments multiply payment by 12 and divide result by 52. To convert annual payments into weekly payments divide by 52.

For guidelines for budget preparation and evidence, please see the next page.

How much you and your partner pay each week for:

Mortgage/rent/board	\$ Children's clothing	\$
Land rates	\$ Child support/maintenance	\$
Water bill	\$ Child care	\$
Electricity bill	\$ Credit card 1	\$
Gas bill	\$ Credit card 2	\$
Home maintenance	\$ Credit card 3	\$
Phone bill	\$ Store card 1	\$
Internet bill	\$ Store card 2	\$
TV/Sky bill	\$ Store card 3	\$
Food/groceries	\$ Personal loan 1	\$
Doctor/dentist/optician	\$ Personal loan 2	\$
Pharmacy/medication	\$ Personal loan 3	\$
House/contents insurance	\$ Hire purchase payment 1	\$
Life insurance	\$ Hire purchase payment 2	\$
Medical insurance	\$ Hire purchase payment 3	\$
Vehicle/Boat insurance	\$ Finance company 1	\$
Petrol/road user charges	\$ Finance company 2	\$
Public transport	\$ Finance company 3	\$
Taxi fares	\$ Bank overdraft 1	\$
Registration/WOF	\$ Bank overdraft 2	\$
Car maintenance	\$ Bank overdraft 3	\$
AA membership	\$ Other 1 (specify)	\$
Children's education	\$ Other 2 (specify)	\$
	Total household weekly payments	\$





Budget preparation and evidence:

> Reasonable amounts for essential costs which are included in the application and covered by the statutory declaration but not evidenced to the current standard will be accepted on the basis of the statutory declaration without seeking additional support from you.

Reasonable amounts may be:

- Accommodation.
- Insurance
- Transport costs
- Utilities
- Medical, and support costs for family members with special needs are to be raised for discussion on a case by case basis.
- > We will require only last month's bank statements/current balance.
- > We will require only the latest month's payslip or a notice of termination or reduced hours of work.
- > We will not require confirmation that they are seeking any form of government assistance, (if confirmation of redundancy or reduced hours have been provided) including the targeted measures that have been announced. However, any noted subsidies should be included in the budget.
- > Where you indicate a rental arrear, we will accept rental or mortgage arrears equivalent of **eight** weeks or less with minimal evidence.
- > Where you indicate arrears on essential services, we will accept **eight** weeks arrears on utilities and essentials with minimal evidence, this includes;
 - Power and gas
 - Water
 - Rates
- > Where you indicate on financial arrangements, we will accept **four** weeks arrears with no or minimal evidence.

We ask that you consider raising the budgeted amounts provided for food, heating and power costs.

One off expenses relating to the COVID-19 event:

Where you have previously paid for services or products which have been cancelled or will not be delivered and that will not be reimbursed, such as is happening with some travel and education costs, the reimbursement of these costs should not be included in the budget. However, any additional fees or expenses to be paid may be included.

All reasonable and direct one off costs to be paid out to facilitate you or your family's repatriation to New Zealand, such as flights and hotel accommodation should be included in the budget; evidence should be provided.

All reasonable and direct costs to be paid out to support you or your family's self-isolation, such as additional accommodation, that is included in the budget; evidence should be provided.

 $All \, reasonable \, and \, necessary \, one \, off \, costs \, associated \, with \, you \, or \, a \, family \, member \, enabling \, themselves \, to \, them \, to \, work \, from \, home \, that \, is \, included \, in \, the \, budget; \, evidence \, should \, be \, provided.$





Section 12: What debts does your household have (what do you owe)?

In this section you need to tell us about the debts you have.

How much you and your partner owe in total for:

Mortgage/rent/board	\$ Child care	\$
Land rates	\$ Credit card 1	\$
Water bill	\$ Credit card 2	\$
Electricity bill	\$ Credit card 3	\$
Gas bill	\$ Store card 1	\$
Home maintenance	\$ Store card 2	\$
Phone bill	\$ Store card 3	\$
Internet bill	\$ Personal loan 1	\$
TV/Sky bill	\$ Personal loan 2	\$
Doctor/dentist/optician	\$ Personal loan 3	\$
Pharmacy/medication	\$ Hire purchase payment 1	\$
House/contents insurance	\$ Hire purchase payment 2	\$
Life insurance	\$ Hire purchase payment 3	\$
Medical insurance	\$ Finance company 1	\$
Vehicle/Boat insurance	\$ Finance company 2	\$
Petrol/road user charges	\$ Finance company 3	\$
Registration/WOF	\$ Bank overdraft 1	\$
Car maintenance	\$ Bank overdraft 2	\$
AA membership	\$ Bank overdraft 3	\$
Children's education	\$ Other 1 (specify)	\$
Children's clothing	\$ Other 2 (specify)	\$
Child support/maintenance	\$ Total household debt	\$





Section 13: Identification details (Your withdrawal request must be submitted with one of the identity options below)

Present the following documents in person to an SBS Bank or FANZ staff member, or your authorised financial adviser. Where presentation of original documents is not possible, please provide certified copies of original documents by a Trusted Referee.

Where you are unable to contact a Trusted Referee due to self-isolation please see the notes for completion of the Statutory Declaration (section 14).

O	ot	ion	one	(please	tick	one)

	New Zealand passport	New Zealand Firearms Licence	Overseas passport* (with photo and signed)
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One of the above is required in conjunction with address verification, as follows:

- > Utility Bill (phone, power, gas)
- > Local Authority Rates Bill
- > Insurance Policy (Dwelling)
- > IRD Tax Notice/Certificate

- > NZ Bank Statement (not issued by SBS)
- > NZ Government authority issued documentation
- > Local Council Notification
- > Sale & Purchase Agreement

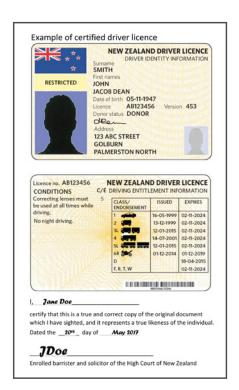
(The address verification from above must be issued within the last 12 months).

Option two

- Current Drivers Licence along with one of the following
 - > NZ Bank Statement (excluding SBS) issued within the last 12 months
 - > NZ Bank Embossed Card (excluding SBS) signed
 - > Document issued by NZ Government (e.g. marriage licence)
- > NZ or Overseas Birth Certificate*
- > SuperGold Card
- > Statement issued by NZ Government agency (e.g. WINZ, IRD) within the last 12 months

Along with one form of address verification from above and again issued within the last 12 months.

 $^{{\}rm *If you\, are\, supplying\, foreign\, identity\, documents\, you\, must\, also\, supply\, proof\, of\, New\, Zealand\, residency.}$



All documents can be verified by an SBS Bank or FANZ staff member, or an Authorised Financial Adviser. If you are unable to present original documents, then certified copies of original documents may be presented. Copies of original documents must be certified by a Trusted Referee, namely one of the following:

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

In addition, the trusted referee must be over 16 years of age and must not be any of the following:

 $\,>\,$ 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 and represents your identity. Certification must include the name, occupation, signature of the trusted referee and the date of certification.

^{*} If you are supplying foreign identity documents you must also supply proof of New Zealand residency.





Section 14: Statutory declaration

I (full name)	
Of (address)	
Occupation	

solemnly and sincerely declare and agree that:

- 1. I am a member of the Lifestages KiwiSaver Scheme.
- 2. I am suffering a Significant Financial Hardship as defined in the KiwiSaver Act 2006, due to the COVID-19 Epidemic and the Government mandated lockdown and I am applying to the Supervisor for withdrawal from my Lifestages KiwiSaver Scheme account as detailed above to be paid to the bank account as specified in this form.
- 3. I have correctly completed Sections 1, 3 and 5 setting out certain personal information about me and my membership of the Lifestages KiwiSaver Scheme (**Scheme**).
- 4. I have explored and exhausted all reasonable alternative sources of funding for meeting my needs including those particular needs arising from the COVID-19 Epidemic, including all Government assistance programmes and subsidies.
- 5. A statement of my income, expenditure, assets and liabilities is attached and, where relevant, I have indicated how they have been affected by the Covid 19 Epidemic. Documents supporting this statement are attached. To the extent supporting documents are not attached, this is as a result of illness, self-isolation or the lockdown arising from or related to the Covid 19 Epidemic.
- 6. Information regarding my circumstances, supporting this significant financial hardship withdrawal application is set out in Section 7.
- 7. I understand that acceptance of this application is at the discretion of the Supervisor and may require further information from me or any other person or organisation that the Supervisor considers appropriate for the purpose of checking the information in this application and to assist in assessing this application. I consent to information about me being disclosed to the Trustee/Supervisor and Manager of the Scheme, their agents, and to the Inland Revenue Department.
- 8. I acknowledge that I may apply to withdraw an amount no greater than the value of my contributions, and those of my employer (where relevant) but excluding any initial Crown contribution and any member tax credits.
- 9. I understand that the Supervisor may limit the amount that is paid to an amount that in its opinion is required to alleviate my financial hardship, which may be less than the amount I am applying for.
- 10. 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 Lifestages KiwiSaver Scheme account and is subject to the requirements of the trust deed and KiwiSaver Act.
- 11. The information provided by me and attached to this form is true and correct. I acknowledge that the Manager and the Supervisor of the Lifestages 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).
- 12. I understand that the Manager and/or Supervisor of the Lifestages KiwiSaver Scheme will not be able to complete its assessment of this application if the information given in this form is incomplete or incorrect.
- 13. I understand that the Manager and/or Supervisor of the Lifestages KiwiSaver Scheme may request additional information from me relating to this application
- 14. 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.
- 15. I have read the privacy statement in this form.

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

Applicant's signature			
Declared at		Date	DD MM YYYY
Before	Occupation/capacity		
Signature of person takir	ng the declaration		

Please see the next page for notes for completing the Statutory declaration.





Notes for Completing the Statutory declaration and identification documents

SBS 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.

In light of COVID-19, you may be in self-isolation. The Statutory declaration is generally signed before an authorised witness. In this instance, statutory declarations may be completed and witnessed through a video call as long as both counterparts to the form are forwarded to us. There may be other methods of taking the statutory declaration.

If you are having difficulties finding some-one to witness your statutory declaration or certify your identification documents, please contact us at contact@lifestages.co.nz and specify you wish to use this service and we will arrange for a solicitor to attend to these matters at no cost to you.

Take a photo of your current Passport or Drivers Licence and attach to your email. In addition attach an address document (dated no less than the past 12 months). We will use these documents to identify you and the Solicitor we arrange will ask you to produce the same documents when they contact you.

In the event that your statutory declaration is completed remotely, the application must be accompanied by the following form of certificate on the next page. A word version is available at: https://www.lifestages.co.nz/forms/lifestages-kiwisaver/





Certificate Concerning Administration of Oath or Declaration

I [], barrister and solicitor, of [certify as follows:

- On [time and date] I was asked by a person [known to me as/ who identified
 themselves to me as] [deponent's name appearing in the affidavit or other
 document] ("the deponent") to administer that person's
 [oath/declaration/affirmation] on a document described to me as [for example: an
 affidavit to be filed in the Family Court].
- Because of the mandatory isolation requirements and restrictions on movement resulting from the government's Covid-19 virus Alert Level 4, and the consequences of the Epidemic Preparedness (Covid-19) Notice 2020 issued by the Prime Minister on 25 March 2020, I was not present with the deponent when I was asked to administer that person's [oath/declaration].
- 3. I attended to a form of attestation adopting the following procedure:

[For example ...]

- (a) The deponent and I met by audio-visual link at [eg 10am on Tuesday 31 March 2020]. The audio-visual link system we used was [eg Zoom/Skype];
- (b) I asked the deponent to identify him/herself to me by name and to hold up to the camera his/her photograph and personal identification page from his/her passport. I observed the [eg passport/driver's licence] and satisfied myself that the person in the photograph was the person meeting with me by [eg Zoom/Skype];

[Alternatively, I know the deponent because [eg they are a regular client of mine and have been for the last 10 years.]

- (c) I asked the depondent to expose to the camera the document intended to be attested including the affidavit/declaration itself and the exhibits. I observed the document to be the unsigned affidavit of [deponent] in the [eg Family Court at Auckland, file no. FAM XXX-2020];
- (d) I then watched the deponent place the document down on a desk in view of the camera and I witnessed the deponent signing the jurat page and initialling each preceding page. The deponent held each page of the signed or initialled document up to the camera. I then asked the deponent to scan the document and send it to me. I received it at [time and date];
- (e) I was satisfied that this was the same document that I had seen the deponent sign, as far as it was possible for me to do so by following these procedures. I attested a copy of the scanned document and then sent it back to the deponent.
- 4. I am unaware of any circumstances to show either that:
 - (a) The deponent was not the person identified to me; or
 - (b) The signature on the document was not the deponent's signature.

Signed:	Barrister and Solicito
Dated:	

Return form

Please return the completed form and any requested supporting documents to us by mail or email:

Mail: Lifestages KiwiSaver Scheme Email: contact@lifestages.co.nz

PO Box 10445, Wellington 6143

Please call us on ${\bf 08007272265}$ if you need any help.