

SBS Wealth KiwiSaver Scheme Significant Financial Hardship Withdrawal Application



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.

Use this form to apply for a withdrawal of funds from your account on the grounds of **significant financial hardship**. Please read the following to help you understand if you can apply for a hardship withdrawal before you make an application.

Eligibility Criteria

You can apply to make a Significant Financial Hardship Withdrawal if you meet any of the following requirements:

You cannot pay for—

- **Minimum living expenses;** or
- The mortgage repayments on your principal family residence resulting in the mortgagee seeking to enforce the mortgage on the residence; or
- The cost of modifying your residence to meet special needs arising from your or a dependants disability; or
- The cost of medical treatment for an illness or injury to you or a dependant; or
- The cost of palliative care for yourself or your dependant; or
- The cost of a funeral for a dependant.



Minimum living expenses generally include:

- basic food and groceries;
- 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.

What should I do before I apply?

- Ask your bank for help. Whether they can help you or not, we'll need to see evidence that you've talked to your bank.
- Ask Work and Income New Zealand (WINZ) for assistance. Whether they can help you or not, we'll need to see evidence that you've talked to WINZ.
- 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: www.ird.govt.nz/kiwisaver/kiwisaver-individuals/making-changes-to-my-kiwisaver/taking-a-savings-break/apply-for-a-savings-suspension.
- 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.

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 short term hardship.

Who decides if I can withdraw?





The Supervisor, Trustees Executors Limited. The Supervisor makes the final decision, taking into account your individual circumstances and the requirements of the KiwiSaver Act, at its discretion.

How do I apply?

If you think you're eligible for a hardship withdrawal from your KiwiSaver account, follow the steps below:

- Step 1** Complete the application form in full.

- Step 2** Collect all of the supporting documents listed in the checklist (see page 1 of the application form). The Supervisor needs these to determine your current financial position.

- Step 3** Take your application form to a Justice of the Peace or any other authorised person. You'll need to complete the Statutory Declaration (section 15) in front of them and they will witness your declaration.

- Step 4** You must post or courier your completed application to us using the return details at the front 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** We send your application and supporting documents to the Supervisor for a decision. The Supervisor must be reasonably satisfied that you have explored and exhausted all other reasonable alternative sources of funding. The Supervisor may require additional information from you. The omission of any required documents to support your application may result in your application being delayed or declined.

- Step 3** We'll let you know the outcome either by phone, email or letter. The Supervisor is not obliged to disclose the reasons for declining your application, or paying an amount less than you applied for.

- Step 4** If your application is approved, we'll make payment to the bank account stated on your application form. The Supervisor may direct that the amount withdrawn be limited to a specified amount that, in the Supervisor's opinion, is required to alleviate the particular hardship.

- Step 5** 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.

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.

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 your bank account such as a pre-printed bank deposit slip;
- Attach a certified/verified copy of evidence of address (for a full list of acceptable documents, please refer to section 14 of this form);
- Attach a certified/verified copy of acceptable identity verification documents. 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 14 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)

- Evidence of your application for assistance, showing current entitlements or decline from:
 - your bank(s)
 - WINZ
 - Inland Revenue
- 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 certified letter from your landlord.
- Proof of wages or salary:
 - if you're employed, your last 2 payslips;
 - 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 3 months 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 dependant.

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 **K S** _____ DoB **DD** **MM** **YYYY** | IRD number _____

Title _____ Given name(s) _____ Surname _____

Current postal address _____
 _____ Postcode _____

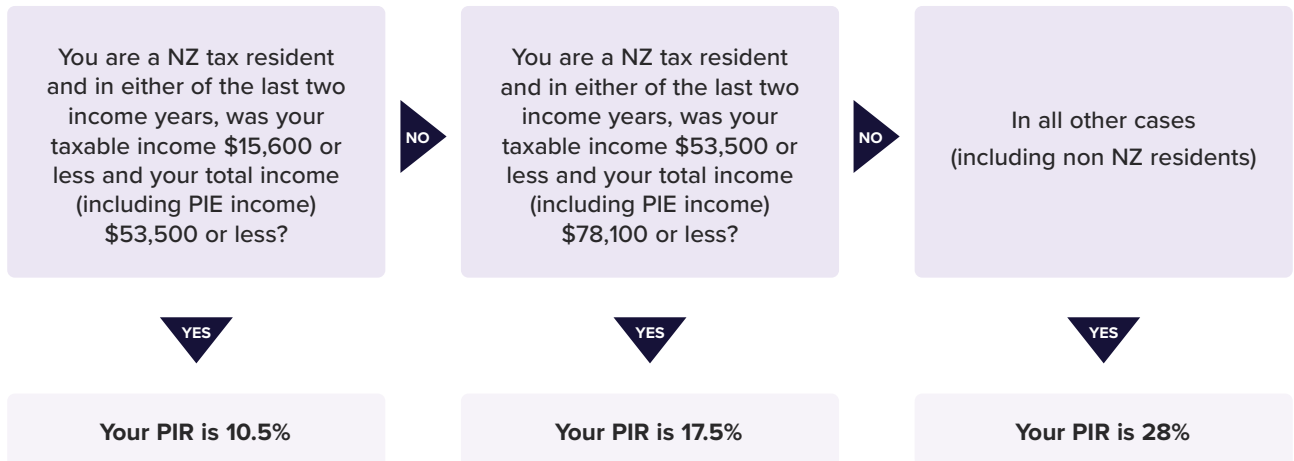
Home phone _____ Work phone _____ Mobile _____

Email address* _____

*Supply email address if you wish to receive all communications regarding the SBS Wealth KiwiSaver Scheme via email.

Guide to calculate your PIR

Start



Prescribed Investor Rate ("PIR") (please tick one) 10.5% 17.5% 28%

Refer to Inland Revenue (www.ird.govt.nz/roles/portfolio-investment-entities/find-my-prescribed-investor-rate) for more information.

Note: We will update your account with the contact details and PIR you provide above if they differ from our existing records.

Current employment status (please tick one) Employed full-time Employed part-time Not employed

Section 2: Partner* and/or dependants details

* Includes a civil union partner or de facto partner.

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

In this section, you need to tell us about the money you and your household receive each week. The more information you provide, the faster it is for an assessment of your application to be processed.

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

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

Section 4: What assets or savings do you have? What do you own?

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

You (or jointly owned):	\$	Your partner (if ownership is separate from yours):	\$
Family home	<input type="text"/>	Family home	<input type="text"/>
Investment property/Holiday home	<input type="text"/>	Investment property/Holiday home	<input type="text"/>
Household contents (value)	<input type="text"/>	Household contents (value)	<input type="text"/>
Vehicles inc. boats and motorbikes	<input type="text"/>	Vehicles inc. boats and motorbikes	<input type="text"/>
Bank accounts (<i>details to be provided</i>)	<input type="text"/>	Bank accounts (<i>details to be provided</i>)	<input type="text"/>
Shares	<input type="text"/>	Shares	<input type="text"/>
Term deposits	<input type="text"/>	Term deposits	<input type="text"/>
Bonus bonds	<input type="text"/>	Bonus bonds	<input type="text"/>
Superannuation	<input type="text"/>	Superannuation	<input type="text"/>
Other (<i>specify</i>) <input type="text"/>	<input type="text"/>	Other (<i>specify</i>) <input type="text"/>	<input type="text"/>
Life insurance policies*	<input type="text"/>	Life insurance policies*	<input type="text"/>
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 5: 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 Account number 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 _____

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 6: What total weekly expenses does your household have?

In this section, you need to tell us how much money you and your household spend each week. The more information there is the better it is for an assessment of 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 from:

- monthly payments – multiply payment by 12 and divide result by 52;
- annual payments – divide by 52.

How much you and your partner pay each week for:

Mortgage/rent/board	\$	Children's clothing	\$
Land rates	\$	Child support/maintenance	\$
Water	\$	Child care	\$
Electricity	\$	Credit card 1	\$
Gas	\$	Credit card 2	\$
Home maintenance	\$	Credit card 3	\$
Phone	\$	Store card 1	\$
Internet	\$	Store card 2	\$
Streaming service/Sky	\$	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/Ride share service	\$	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	\$

Section 7: 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	\$	Credit card 2	\$
Electricity	\$	Credit card 3	\$
Gas	\$	Store card 1	\$
Home maintenance	\$	Store card 2	\$
Phone	\$	Store card 3	\$
Internet	\$	Personal loan 1	\$
Streaming service/Sky	\$	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 (<i>specify</i>)	\$
Children's clothing	\$	Other 2 (<i>specify</i>)	\$
Child support/maintenance	\$	Total household debt	\$

Section 8: Bank account details

We will make payments to a New Zealand bank account held in your name or jointly in your name. 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 9: Previous application for Significant Financial Hardship

Have you previously made an application for a significant financial hardship withdrawal from any KiwiSaver scheme?

No (*go to section 10*)

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? No (*go to section 10*) Yes

Did you apply the payment to alleviate the claimed hardship? No* Yes (*go to section 10*)

*If "No", please explain why not.

Section 10: Bankruptcy

Have you ever been adjudicated bankrupt or admitted to a No Asset procedure? (*please tick one*)

No Yes (*please provide details*) Date DD MM YYYY

Official Assignee Reference/Case Number: _____

Section 11: 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 dependant family member is disabled;
- Unable to pay for medical treatment if you or a dependant family member becomes ill, has an injury, or requires palliative care;
- Incurred funeral costs as a dependant 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.

What alternative sources of funding have you explored and what are their limits.

Include evidence such as letters of decline from your bank(s) (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.

Section 12: How much are you applying for?

Please note:

- The amount available to withdraw will be your KiwiSaver balance on the date of withdrawal
Less:
 - Any Crown contributions received to your account (e.g., \$1,000 kickstart or Government contributions);
 - Subject to maintaining a minimum balance of \$500.
- The Supervisor may direct that the amount withdrawn be limited to a specified amount that, in the Supervisor's opinion, is required to alleviate the particular hardship;
- Units will be redeemed sufficient to pay out the amount approved by the Supervisor and any tax liability and other expenses, if any;
- Units will be deducted proportionally from each investment portfolio or fund that you are invested in according to your investment profile.

How much are you applying for? *(please tick one)*

All available funds; OR A partial withdrawal of \$ _____

Section 13: 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 14: 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 <i>(Must be signed [where relevant] and current)</i>	Identity Verification – Secondary <i>(Must be signed [where relevant] and current)</i>
Set One	<input type="checkbox"/> New Zealand passport <input type="checkbox"/> Overseas passport <i>(with photo & signed)</i> <input type="checkbox"/> New Zealand firearms licence	– None required
Set Two	<input type="checkbox"/> New Zealand driver licence	<input type="checkbox"/> SuperGold Card <i>(signed)</i> <input type="checkbox"/> NZ registered bank/credit card <i>(Name embossed & signed)</i> <input type="checkbox"/> NZ registered bank statement issued in the last 12 months <input type="checkbox"/> Document issued by NZ Government <i>(e.g. marriage licence)</i> <input type="checkbox"/> Statement issued by NZ Government agency <i>(e.g. WINZ, IRD) issued in the last 12 months)</i>
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 driver licence <input type="checkbox"/> Overseas driver licence <i>(with photo)</i> <input type="checkbox"/> 18+ Card/Kiwi Access card <input type="checkbox"/> SuperGold Card <i>(with photo & signed)</i>

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)
- Local authority rates bill
- Document issued by NZ Government authority
- Letter from a New Zealand education institution
- Non-bank Financial Institution statement or correspondence *(e.g. Building Societies and AML/CFT reporting entities)*
- A signed tenancy agreement
- Current vehicle registration
- Insurance policy (dwelling)
- Electronic White Pages
- Sales and Purchase Agreement
- 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:

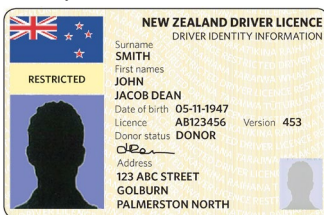
- New Zealand Lawyer
- Notary Public
- Justice of the Peace
- New Zealand Honorary Consul
- New Zealand Chartered Accountant
- A person who has the legal authority to take statutory declarations or the equivalent in New Zealand

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

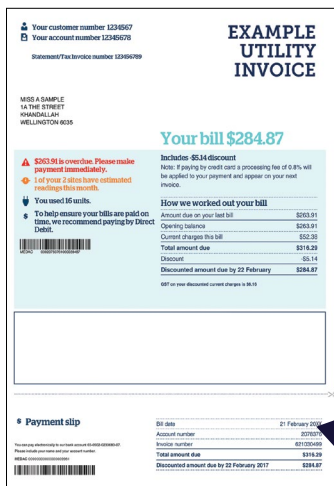
Signature: J Doe

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 15: Statutory declaration

I (full name) _____
 Of (address) _____
 Occupation _____

solemnly and sincerely declare and agree that:

1. I am suffering a Significant Financial Hardship as defined in the KiwiSaver Act 2006, and I am applying to the Supervisor for a withdrawal from my SBS Wealth KiwiSaver Scheme account as detailed in this form to be paid to the bank account as specified in this form.
2. I understand that if I am making a withdrawal for Significant Financial Hardship, the Supervisor may direct that the amount withdrawn be limited to a specific amount that the Supervisor's opinion, is required to remedy the particular hardship.
3. I understand that acceptance of this application is at the discretion of the Supervisor.
4. I agree to release all claims that have been made by me 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 and attached to 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.

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

DD	MM	YYYY
----	----	------

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.