

Subsequent Retirement Withdrawal Form

About this form

This form is for applying for a retirement withdrawal or to set-up a regular withdrawal from your Pie KiwiSaver Scheme account if you have already made a least one retirement withdrawal.

For help completing this form, phone **0800 586 657**. Once complete, please email an electronic copy to **withdrawals@piefunds.co.nz** or post the completed form to: **Pie KiwiSaver Scheme, PO BOX 33 1079, Takapuna, Auckland 0622**

You can withdraw part or all of your retirement savings or set up a regular withdrawal on or after you turn 65. However, if you joined KiwiSaver (or a complying superannuation fund) prior to 1 July 2019 and were aged 60-64 at the time, you may miss out on future government and compulsory employer contributions by withdrawing before you have been a KiwiSaver member for five years.

You do not have to withdraw all or any of your KiwiSaver savings immediately when you retire and there are many options (see Section 2) to help you with your retirement objectives. If you choose to do nothing, your savings will continue to be invested as they are currently. You can also continue to contribute to your account if you wish.

Access to Australian Sourced Savings

If you have transferred funds from an Australian complying superannuation scheme, you can withdraw your Australian sourced savings from your Pie KiwiSaver Scheme account when you meet the following criteria:

- You are aged 60 years or over; and
- You have retired from being gainfully employed and you do not intend to be gainfully employed in future, on a full-time or part-time basis.

Please note, it can take up to 15 working days for the application to be reviewed and processed.

Checklist

Please complete the checklist below and supply the relevant documents to support your request.

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| <input type="checkbox"/> Sections 1-3: Complete | <input type="checkbox"/> Section 5: Read the privacy statement |
| <input type="checkbox"/> Section 4: Provide proof of bank account (if applicable) | <input type="checkbox"/> Section 6: Complete the Declaration |

Section 1: Investor details

Title	First name/s	Last name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	IRD number	Pie KiwiSaver Scheme account number (if known)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email address	Physical address	
<input type="text"/>	<input type="text"/>	
Postal address	City	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Home number	Work number	Mobile number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 2: Your KiwiSaver withdrawal options

Partial withdrawal

Yes \$

Regular withdrawal

Yes Start date

\$ Weekly Fortnightly Monthly Quarterly Annually

Note: Please note this is the date your withdrawal will be priced, it will be paid 2-5 working days after this date Full withdrawal

Full withdrawal

Yes Withdraw my full account balance and close my Pie KiwiSaver Scheme account. Your final Member Tax Credit claim will be processed by Inland Revenue before your withdrawal is actioned, so payment may take up to 10 working days from receipt of this form.

Section 3: Payment details

We will only make payments in New Zealand dollars to a New Zealand bank account in your name (held individually or jointly). We will adjust your withdrawal amount for any tax liability.

Account name Name of bank

Account number

Branch address City Postcode

Section 4: Proof of bank account

You only need to provide this if your account details have changed since your last withdrawal.

Please provide proof of your bank account name and number by supplying a certified copy of any one of the following:

- a pre-coded deposit slip
- a copy of a cheque
- a copy of a bank statement
- an over-the-counter printed receipt with a teller's stamp
- an online bank account statement with the name of the bank in the header/footer

Section 5: Privacy statement

Any information that you provide may be used by Pie Funds Management Limited (as manager of the Pie KiwiSaver Scheme) and the Supervisor (Trustees Executors Limited) and any of their respective related entities, and by other service providers to the Scheme to provide services in relation to your request. You have the right to access the information held by us and you may also request that it be corrected. If you do not provide your information, we may not be able to process your request.

Our privacy policy is available at
www.piefunds.co.nz/Investor-Documents

Section 6: Declaration

By signing below, I agree/confirm the following:

- Completed Statutory Declaration witnessed by any person, within the last three months, who is authorised to take Statutory Declarations
- I am a member of the Pie KiwiSaver Scheme.
- I am applying to withdraw some or all of my KiwiSaver savings from my Pie KiwiSaver Scheme account. I understand that on full payment of my full account balance, I will no longer be a member of KiwiSaver and my KiwiSaver account cannot be reopened. I agree to release all claims that have been made by me on the Manager and/or Supervisor in relation to the Pie KiwiSaver Scheme.
- 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 Pie KiwiSaver Scheme account.
- The information given in this form, including any attachments, is complete, true and correct. I acknowledge that the Manager (Pie Funds Management Limited) and the Supervisor (Trustees Executors Limited) of the Pie 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 omission).
- I understand that the Manager (Pie Funds Management Limited) and/or Supervisor (Trustees Executors Limited) of the Pie KiwiSaver Scheme will not be able to complete its assessment of this application if the information given in this form is incomplete or incorrect.
- 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.
- I have read the privacy statement in this form.

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

Signature of applicant Date