# **booster**<sup>\*</sup> making sense of money

# **Booster KiwiSaver Scheme**

# **Application for Withdrawal due to Trans-Tasman Transfer**

Please complete this form and return it to your Adviser or to Booster.

You will be eligible to transfer your KiwiSaver Scheme account balance to an Australian complying superannuation fund if you have left New Zealand to live permanently in Australia and the Australian complying superannuation fund you are transferring to accepts your transfer. You can no longer "cash-up" your KiwiSaver Scheme account balance if you have permanently emigrated to Australia.

Personal details				
Member Number				
Member Name				
Date of Birth /	/			
Current Address				
IRD Number				
Australian Tax File Number				
Prescribed Investor Rate (PIR)*	10.5%	17.5%	28%	
Note: If you have been residing outside of New Zealand for more than				

Note: If you have been residing outside of New Zealand for more than 325 days you will be a non-resident for tax purposes and the highest PIR will apply.

#### Details of the Australian complying superannuation scheme you wish to transfer to

Name of Australian complying superannuation scheme

Name of provider

Provider address

Your Membership number

#### 3 Statutory Declaration

Please note it is an offence to give any altered, false or incomplete or misleading information or to make a false statement or declaration. Any person who does so is liable for imprisonment for up to three years.

A declaration made in a Commonwealth country other than New Zealand shall be made before a Judge, a Commissioner of Oaths, a Notary Public, a Justice of the Peace, or any person authorised by the law of that country to administer an oath there for the purpose of a judicial proceeding, or before a Commonwealth representative, or before a solicitor of the High Court of New Zealand. A declaration made in New Zealand must be completed and signed in front of a Justice of the Peace, Solicitor, Notary Public or other person authorised to take a statutory declaration

(Full Name)

of (Insert Residential Address)

#### Do solemnly and sincerely declare that:

1. I permanently emigrated from New Zealand to Australia.

on (insert the date you departed New Zealand)

- 2. I have no intention of returning to live in New Zealand permanently.
- 3a I have had my principal place of residence in New Zealand for the entire period that I have been a member of KiwiSaver;

#### OR

3b

- I was living overseas for the following periods before I
- permanently emigrated from New Zealand to Australia

/	/	to	/	/
/	/	to	/	/
/	/	to	/	/
/	/	to	/	/

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

Signature of Member (please sign below)

Declared at (location) this day of 20 before me (full name)

Signature of Justice of the Peace, Solicitor, Notary Public or other person authorised to take a statutory declaration (please sign below).

#### Members Acknowledgement

- I understand that by completing this application form I will be providing personal information about me which will be held securely by the Supervisor and/or the Manager of the Booster KiwiSaver Scheme (the Scheme). I have the right to access and correct this information subject to the provisions of the Privacy Act 1993.
- I understand that any information I give to the Manager of the Scheme may be passed on to my chosen Australian complying superannuation fund as reasonably required and I authorise the Manager of the Scheme to give such information in relation to this transfer as requested by my chosen Australian superannuation fund.
- I acknowledge that there may be tax consequences when transferring my KiwiSaver savings to an Australian complying superannuation fund, and that I am liable for any such tax consequences.
- I acknowledge that the Manager of the Scheme has recommended that I seek independent and professional Australian and New Zealand tax advice pertaining to my circumstances in relation to the proposed transfer.
- I understand that any annual Government contribution entitlement I have received during my membership period whilst residing outside of New Zealand will be deducted from my withdrawal amount and returned to the Commissioner of Inland Revenue.
- I understand that my Scheme account will be closed upon the balance of my Scheme account being transferred to my chosen Australian complying superannuation fund.
- I understand that following a transfer of my Scheme account balance to an Australian complying superannuation fund I will not be able to transfer the balance to a third county.
- I understand that my application is subject to the Manager of the Scheme's approval and that the Manager of the Scheme may request additional information in support of this application.
- I understand that my application will be unable to be processed if my chosen Australian complying superannuation fund named in section 2 of this application does not accept the transferred funds.
- I acknowledge that on the receipt of my funds by the Australian complying superannuation fund, the Trustee and Manager of the Scheme will be released from all liabilities in respect of my membership in the Scheme.
- I understand that the "New Zealand sourced" saving in my Australian complying superannuation fund will not be able to be accessed until the age of eligibility to New Zealand Superannuation is reached (currently 65).

Signature of Member (please sign below)

/

Documents to be attached to this application

To enable us to assess your application for withdrawal due to trans-tasman transfer please ensure that the following documents are attached to this application:

- Evidence of your departure from New Zealand e.g. copies of tickets, passport evidence, visa;
- Evidence of your permanent residence at an Australian address e.g. copy of a property sale and purchase agreement; tenancy/ leasing agreement; recent utility bill; bank statement;
- Evidence that you are a member of the Australian complying superannuation fund.
- **Verification of Identity**. If you have not previously provided us with verification of your identity please attach ID verification as per the Guidance Notes attached to this withdrawal form.

Please return the completed form and documents to your Adviser or;

Booster Investment Management Limited PO Box 11872 Wellington 6142

or email kiwisaver@booster.co.nz

If you have any questions about completing this form, please contact your Adviser.

Date /

# **Guide to verification and certification of identity documents**

## What identification do I need to provide?

You will need to provide proof of name, date of birth and residential address.

Please ensure that you provide us with the identification from the options in the table below. All forms of identity must be current (i.e. not expired), otherwise your application won't be able to be processed. You will need to provide:

- 1. proof of identity; and
- 2. proof of residential address; and

have the documents either certified by an 'AML Trusted Referee' or verified by an authorised agent of Booster.

## **Proof of Identity**

#### **Option 1**

**One** form of the following primary photographic identification:

- New Zealand passport (including the signature page)
- New Zealand firearms licence
- Passport issued by a foreign government (including the name, date of birth, photograph, New Zealand visa and signature of the person)

#### **OR Option 2**

**One** form of the following primary non photographic identification:

- New Zealand full birth certificate
- Certificate of New Zealand citizenship issued under the Citizenship Act 1977
- Birth certificate issued by a foreign government, the United Nations or an agency of the United Nations

**Plus one** form of the following secondary or supporting form of photographic identification:

- New Zealand driver licence
- 18+ Card
- Valid International driving permit

#### **OR Option 3**

New Zealand driver licence

Plus one of the following:

- Credit, debit or eftpos card, that contains the person's name and signature
- A bank statement issued to the person that is not more than 3 months old issued by a registered bank
- Super Gold Card
- A statement from a government department issued to the person that is not more than 3 months old

### **Proof of Residential Address**

Provide a verified/certified photocopy of one of the following, issued and dated within the last 3 months, showing your current residential address:

- Utility letter
  Rates bill
- Bank account statement Government agency statement (Inland Revenue)
- a print out from www.whitepages.co.nz or from a bank confirming name and address (stamped by the bank).

### Verification of identity documents

All copies of identification must be either certified by an 'AML Trusted Referee' or verified by an authorised agent of Booster. Verified copies must be legible and all photos must be clear. Verification is valid for three months.

The certifier/verifier must view the original document and compare it with the copy. The certifier/verifier can then sign and date the copy and print their name, occupation and a statement as follows:

"I verify that this is a true copy of the original document sighted by me today and represents the identity of the named individual".

#### Persons able to certify documents

- Chartered Accountant
- Registered medical doctor
- Registered teacher
- Kaumatua
- Member of the Police
- An NZ Honorary Consul
- Minister of Religion
- A person who has legal authority to take statutory declarations in New Zealand

# Persons able to certify documents and witness statutory declarations

- Lawyer
- Justice of the Peace
- Notary Public
- Member of Parliament

# Request to transfer KiwiSaver account balance to a complying superannuation fund

The following sections to be completed by the receiving complying superannuation fund

This is a	transfer from	a registered	KiwiSaver sch	ieme

### **Section One**

I/We agree to accept the transfer payment which is to be made to a complying superannuation fund and is a resident regulated superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993

Note:

A transfer to any other type of superannuation fund is not allowed.

Section Two			
Full name of Transferee (mem	ber)		
Membership or Account number			
Full name of Receiving Scheme			
Email address that correspond	lence		
regarding this transfer should be sent to			
Address of Receiving Scheme			

### Section Three

The transfer payment will be made by SWIFT payment. Complete the superannuation fund's bank details below. Attach evidence of the bank account i.e. bank encoded deposit slip or internet banking printout

# Bank Detail For SWIFT Payment

Bank SWIFT code .....

Name and Address of Bank .....

.....

.....

Bank Account Name
BSB and Account Number
Payment Reference

# Section Four

I/We confirm that the scheme that I am signing on behalf of is a complying superannuation fund and is a resident regulated superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993.

I/We confirm that the receiving scheme is willing to accept the transfer payment.

Signed(on behalf of the scheme administrator/trustees of th	
Capacity to sign	Date
Signed (on behalf of the scheme administrator/trustees of th	
Capacity to sign	Date