

Application for Withdrawal – Permanent Emigration to Australia

Use this form to apply to withdraw funds from your account if you have permanently emigrated to Australia. You will be eligible to transfer your KiwiSaver savings to an Australian complying superannuation scheme if you have left New Zealand to live permanently overseas and the Australian complying superannuation scheme you are transferring to accepts your transfer.

We will also require you to complete an AML Identity Verification form which is available by calling 0800 223 4636 or emailing bcfkiwisaver@mjlw.co.nz.

Section A Your Personal Details

[illegible]

Section B Australian complying superannuation scheme details

Membership number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Australian tax file number (If unknown visit the Australian Tax Office website www.ato.govt.au)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Superannuation Product Identification Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Australian Business Number (ABN)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Australian Provider Name	<input type="text"/>		
Street Address/ PO Box	<input type="text"/>		
	<input type="text"/>		
Suburb or RD	<input type="text"/>		
Town or City	<input type="text"/>		
Country	<input type="text"/>		
Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Email address	<input type="text"/>
		Phone number	<input type="text"/>

Please note: In order to process your transfer we will need to receive a letter from your Australian superannuation provider, on their letterhead, confirming:

- that they are willing to accept a transfer payment from a KiwiSaver scheme into your member account in the scheme; and
- the bank details to be used for the transfer payment (including any reference details needed)

The information in this form is being collected for the purposes of effectively managing your BCF KiwiSaver Scheme account and it will be held by MJW. It may be disclosed to third parties to the extent that is necessary to administer your application and any withdrawal from the BCF KiwiSaver Scheme. You can ask to see the personal information that MJW holds about you by calling us on 0800 223 4636.

Section C Trans-tasman permanent emigration transfer instructions

I have permanently emigrated to Australia and request my KiwiSaver balance to be transferred to my member account in the Australian complying superannuation scheme named above. The bank account details of the Australian superannuation scheme are below.

Bank account name _____ Bank name _____

Bank account no

SWIFT code BSB code

Payment reference number _____

Section D Your declaration

I solemnly and sincerely declare that:

☐ I emigrated from New Zealand on ____/____/____ [insert dates]

and have been resident in Australia since ____/____/____ ; and

☐ I have had my principal residence in New Zealand for the entire period that I have been a member of KiwiSaver; or

☐ I was living overseas for the below dates and I understand I do not qualify to be paid the member tax credit for this period

____/____/____ to ____/____/____ [insert dates]

I apply to the Manager of the Scheme to withdraw the balance of my KiwiSaver account and I understand that:

- a withdrawal of my KiwiSaver account balance in the case of permanent emigration is subject to the Manager's approval; and
- before my application is approved I am required to:
 - complete the statutory declaration contained in this form;
 - provide proof of the date I left New Zealand (e.g., copies of airline tickets, passport other documentation showing departure); and
 - provide evidence of my overseas residential address (e.g., utility bill, bank statement etc.)

I solemnly and sincerely declare that the information I have provided in this Permanent Emigration Request form is true and correct.

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

Signature _____
Your signature

Declared at _____
Location

____ day of _____ 20 ____
Date

Signature _____
Justice of the Peace, Solicitor, or other person authorised to take a statutory declaration

Declaration taker's details/stamp

Section E Consent and signature

The information in this form and any required supporting documentation is being collected so a decision can be made regarding your withdrawal request. The Manager and its associated companies and the Trustee have access to this information. Access is subject to strict security arrangements, and the Trustee and the Manager will comply with the Privacy Act 1993 when dealing with this information. Please read the section titled "Your personal information" of the BCF KiwiSaver Scheme Investment Statement for further details.

- I understand that any information I give to the Manager may be passed on to my chosen Australian superannuation scheme as reasonably required and I authorise the Manager to give such information in relation to this transfer as is requested by my chosen Australian superannuation scheme.
- I acknowledge that there may be tax consequences when transferring my KiwiSaver savings to an Australian superannuation scheme, and that I am liable for any such tax consequences.
- I acknowledge that the Manager 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 my BCF KiwiSaver Scheme account will be closed upon my BCF KiwiSaver Scheme savings being transferred to my chosen Australian superannuation scheme.
- I understand that following a transfer of my KiwiSaver savings to an Australian superannuation scheme I will not be able to transfer them to a third country.
- I understand that my application is subject to the Manager's approval and that the Manager 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 scheme named in section B of this application cannot accept the transferred funds.
- I acknowledge that on the receipt of my funds by the Australian superannuation scheme, the Manager of the BCF KiwiSaver Scheme will be released from all liabilities in respect of my membership in the BCF KiwiSaver Scheme.
- I understand that the "New Zealand sourced" savings in my Australian superannuation scheme will not be able to be accessed until the age of eligibility for New Zealand Superannuation is reached (currently 65).
- I understand that once my BCF KiwiSaver Scheme savings have been transferred to Australia, they will become (with a few exceptions) subject to the standard rules and regulations governing the Australian superannuation scheme.
- I understand the Australian superannuation scheme may require additional information from me before my application is processed.

Signature _____

Date _____

Checklist

- | | | |
|----------|--------------------------|--|
| I have | <input type="checkbox"/> | completed all sections of this form |
| | <input type="checkbox"/> | signed and dated Sections D & E |
| | <input type="checkbox"/> | had Section D duly authorised |
| I attach | <input type="checkbox"/> | proof of the date I left New Zealand (e.g., copies of airline tickets, passport other documentation showing departure) |
| | <input type="checkbox"/> | evidence of my overseas residential address (e.g., utility bill, bank statement etc.) |
| | <input type="checkbox"/> | a letter from my superannuation provider, confirming that they are willing to accept the transfer and their bank account details |
| | <input type="checkbox"/> | a completed Anti-Money Laundering form |

Please return the completed form and documentation to:

BCF KiwiSaver Scheme, C/- MJW, PO Box 11330, Wellington 6142

If you have any questions about completing this form, please call 0800 BCF INFO (0800 223 4636).