DK11



NEW ZEALAND DEFENCE FORCE KIWISAVER SCHEME

SUBSEQUENT RETIREMENT WITHDRAWAL(S) APPLICATION FORM



KIWISAVER ACCOUNT CLOSURE

Please note that your New Zealand Defence Force KiwiSaver Scheme (the Scheme) account will be closed once the full balance of your accumulated KiwiSaver funds has been paid out. You can join KiwiSaver again at any stage if your circumstances change.

PRIVACY STATEMENT

Information in this form and any requested documents are being collected to enable administration of this account. The Manager abides by the Privacy Act 2020, and you have the right to access and request correction of personal information held about you.

Please print in black or blue pen, in uppercase and 🗸 all that apply.	
STEP 1 - MEMBER DETAILS	
In this section we need to confirm that you are who you say you are, and the below information must match our records. You can check the information we hold for you when you sign into your account at www.nzdfsavings.mil.nz	
Member number	Date of birth
Mr Mrs Ms Other	
First name	Middle name(s)
Surname	
Residential address Number Street Name	Mailing address (if different from residential address) Number Street Name
	Namber Street Name
Suburb	Suburb
City Postcode	City Postcode
Telephone	
Mobile	Daytime Daytime
Email	
STEP 2 - WITHDRAWAL AMOUNT AND PAYMENT I	NSTRUCTIONS
I authorise my KiwiSaver funds to be credited to my bank account and attach a copy of a bank statement printout.	
Tauthorise my NiwiSaver furios to be credited to my bank acco	лин ана анастта сору от а рапк statement printout.
To enable your savings to be credited to your bank account, you must provide details of a personal account in your name. Business accounts, family trust accounts and accounts of another person will not be accepted.	

Member number	
Amount of withdrawal	
Subject to the requirements of the trust deed for the New Zealand Defence Force KiwiSaver Scheme, I request:	
a partial withdrawal of \$ (a maximum of four partial withdrawals can be made per calendar year with a minimum amount of \$500 per withdrawal).	
a regular monthly withdrawal of For regular monthly withdrawals the first and subsequent payments will be processed on the 20th of each month following this request being received and processed. If the 20th falls on weekend or a public holiday, payment will be processed on the next business day.	
a withdrawal of my full balance and closure of my New Zealand Defence Force KiwiSaver Scheme account (please proceed to the next step If applicable, please remember to cancel direct debits or automatic payments to your New Zealand Defence Force KiwiSaver Scheme. If you are employed and you are making a withdrawal of your full balance, please request your employer to stop making contribution deductions.	
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KiwiSaver account balance must remain above \$1,000 after a partial or a regular monthly withdrawal, otherwise the full	
amount will be paid out and your account will be closed.	
In order to calculate your withdrawal amount, we will use the unit prices available at the time we process the withdrawal.	
Withdrawal choice	
If you invest in one investment option only, please proceed to the next step.	
If you invest in more than one investment option, you can withdraw your money proportionally from across your investment options or	
nominate one investment option to withdraw your money from. Please confirm:	
I would like to withdraw my money proportionally from across all the investment options I invest in at the time of the withdrawal.	
OR	
I would like to withdraw my money from one of the following investment options I invest in at the time of the withdrawal (tick one only):	
Shares option Moderate option	
High Growth option Conservative option	
Growth option Cash option	
Balanced option	
STEP 3 - DECLARATION	
• I am entitled to make this claim and that all the information which I have provided in this form and in all included materials is true and correct.	
I have read the privacy information at the beginning of this KiwiSaver Retirement Withdrawal Application Form.	
 I understand that should the information given in this form be incomplete or incorrect the manager of the New Zealand Defence Force KiwiSaver Scheme will not be able to complete its assessment of this application without receiving complete and correct information. 	
• I consent to the use of the personal information provided in this KiwiSaver Retirement Withdrawal Application Form by the manager and the supervisor and their related companies so that they can assess and process my requested withdrawal from the New Zealand Defence Force KiwiSaver Scheme. I understand that access to and correction of my personal information may be requested by me.	
I understand that my withdrawal value will be based on the unit prices available at the time the manager processes the withdrawal.	
I understand that if I withdraw my total New Zealand Defence Force KiwiSaver Scheme account balance that my account will be closed.	
Any changes noted in this form will amend any existing retirement withdrawal instructions (if applicable).	
Your Signature X Date / / /	
CHECKLIST Places tick	
Please tick that you have completed the form correctly:	
 Entered your relevant details and requirements in Steps 1 and 2 Included a bank encoded deposit slip or a copy of your bank statement Please return your completed form to: New Zealand Defence Force KiwiSaver Scheme PO Box 1849	
Signed and dated this application form Wellington 6140 New Zealand	