

Transfer your AustralianSuper account to your KiwiSaver

Follow the instructions on this form to apply to transfer your super to your KiwiSaver account.

Check that you're eligible

To transfer your AustralianSuper account to your KiwiSaver you must:

- › have an active KiwiSaver account and your provider must be able to accept transfers from Australia
- › have permanently emigrated to New Zealand
- › transfer your entire AustralianSuper balance to your KiwiSaver account.

! When your request to transfer has been accepted, your AustralianSuper account will be closed and any insurance cover you have will stop.

Apply to transfer your account

1 Complete the application form

Please complete the attached *Transfer your AustralianSuper account to your KiwiSaver* form.

2 Provide Supporting Documents

To transfer your AustralianSuper account to KiwiSaver you must provide:

- Proof of residence in New Zealand
- Letter of compliance from your Kiwi Saver Scheme
- A signed Statutory Declaration stating you have permanently emigrated to New Zealand
- Proof of your identity (ID)

a) Providing proof of residence in New Zealand

If the document you used to provide proof of your ID doesn't have your current New Zealand address, you will need to provide us with another document e.g. utility bill, council rate notice, bank statements that are less than 12 months old.

b) Provide a letter of compliance

You need to provide a letter of compliance from your KiwiSaver Scheme that confirms the details you provide in steps 2 and 3 of the attached *Transfer your AustralianSuper account to your KiwiSaver* form.

c) Providing a signed Statutory Declaration

You need to complete the New Zealand statutory declaration provided in the attached *Transfer your AustralianSuper account to your KiwiSaver* form, stating you have permanently emigrated to New Zealand.

Declaration forms should be signed in front of a person allowed to witness statutory declarations. This includes New Zealand Justices of the Peace, Notaries Public, Judges, Judges of the Maori Land Court and Lawyers.

For a full list go to legislation.govt.nz/act/public/1957/0088/latest/whole.html#DLM314584

Alternatively you can provide a Commonwealth of Australia Statutory Declaration. For more information and to download a form go to ag.gov.au/Publications/Documents/CommonwealthStatutorydeclarationform.pdf. A Commonwealth of Australia Statutory Declaration made in New Zealand is usually witnessed by an Australian Consular Officer, Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955) or a Notary Public appointed and practicing in New Zealand (there may be a charge).

d) Providing proof of ID

The following information will help you provide the right documentation.

What proof of ID do I need?

- › Certified copy of your current driver's licence, or
- › Certified copy of your current passport

See page 2 for how you can certify documents.

3 Send it all back to us

Send the signed certified copies of your proof of ID documents, proof of residence, letter of compliance and statutory declaration back to us, attached to your form.



Need more help

If you need help or don't know if your proof of ID is acceptable, give us a call before you get started. Call us on 1300 300 273 or overseas callers +61 3 9067 2108, 8am – 8pm AEST/AEDT weekdays.

How to certify your documents

1 Organise your documents

Make photocopies of your ID documents. If you're using your driver's licence and your address appears on the back, you'll need to photocopy both sides.

Take both the original documents and photocopies to someone authorised to certify documents.

2 Get your ID certified in New Zealand

People with the below occupations can certify your document in New Zealand include the following occupations:

- › Justice of the Peace
- › Registered Medical Doctor
- › Registered Teacher
- › Lawyer
- › Notary Public (there may be a charge)
- › Chartered Accountant
- › Kaumātua
- › Member of the Police

They need to:

1. Compare the photocopy to the ORIGINAL
2. Include the following details on the copy:
 - › stamp or write 'I have sighted the original document and certify this to be a true and correct copy of the original document'
 - › their occupation
 - › their name
 - › their address and phone number, and
 - › their signature and the date it was signed.

Privacy Collection Statement

Please read this Privacy Collection Statement to see how AustralianSuper uses your personal information.

AustralianSuper Pty Ltd (ABN 94 006 457 987) of GPO Box 1901, Melbourne Victoria 3001, collects your personal information (PI) to run your super account (including insurance), improve our products and services and keep you informed. If we can't collect your PI we may not be able to provide these services. PI is collected from you but sometimes from third parties like your employer. We will only share your PI where necessary to perform our activities with our administrator (Australian Administration Services Pty Ltd, Link Group), service providers, as required by law or court/tribunal order, or with your permission. Your PI may be accessed overseas by some of our service providers. A list of countries can be found at the URL below. Our Privacy Policy details how to access and change your PI, as well as the privacy complaints process. For complete details go to australiansuper.com/privacy or call us on 1300 300 273.

Transfer your AustralianSuper account to your KiwiSaver



Please complete in pen using CAPITAL letters and print to mark boxes. Read the Privacy Collection Statement on this form to see how AustralianSuper uses your personal information.

STEP 1. PROVIDE YOUR PERSONAL DETAILS

| | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|-------------------------|--|--|--|--|---|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---|---|---|
| Last name | | | | | | | | | | Mr | Ms | Mrs | Miss | Dr | | | |
| <input type="text"/> | | | | | | | | | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | |
| First name | | | | | | | | | | Date of birth | | | | | | | |
| <input type="text"/> | | | | | | | | | | D | D | M | M | Y | Y | Y | Y |
| Member number | | | | | | | | | | Male | | Female | | | | | |
| <input type="text"/> | | | | | | | | | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | | | | |
| Current New Zealand Address: Street address (no P.O. Boxes) | | | | | | | | | | | | | | | | | |
| <input type="text"/> | | | | | | | | | | | | | | | | | |
| Suburb | | | | | | | | | | | | | | | | | |
| <input type="text"/> | | | | | | | | | | | | | | | | | |
| Town/city | | | | | Country | | | | | Postcode | | | | | | | |
| <input type="text"/> | | | | | N E W Z E A L A N D | | | | | <input type="text"/> | | | | | | | |
| Previous Australian Address held by AustralianSuper | | | | | | | | | | | | | | | | | |
| <input type="text"/> | | | | | | | | | | | | | | | | | |
| Town/city | | | | | Country | | | | | Postcode | | | | | | | |
| <input type="text"/> | | | | | A U S T R A L I A | | | | | <input type="text"/> | | | | | | | |
| Telephone (business hours) | | | | | Telephone (after hours) | | | | | Mobile | | | | | | | |
| <input type="text"/> | | | | | <input type="text"/> | | | | | <input type="text"/> | | | | | | | |
| Email | | | | | | | | | | Name of the last employer contributing into AustralianSuper for you | | | | | | | |
| <input type="text"/> | | | | | | | | | | <input type="text"/> | | | | | | | |
| Tax file number* | | | | | IRD Number | | | | | | | | | | | | |
| <input type="text"/> | | | | | <input type="text"/> | | | | | | | | | | | | |

* The law allows super funds to ask for TFNs. It's a good idea to provide your TFN. If we don't have it, your before-tax contributions and withdrawals are taxed at a higher rate and we can't accept after-tax contributions from you. For more information about how we use your TFN, go to australiansuper.com/RefTFN

STEP 2. FUND DETAILS

FROM:

| | | |
|----------------------------------|----------------------|--|
| Fund name | Member number | Phone number |
| AUSTRALIANSUPER | <input type="text"/> | 1 3 0 0 3 0 0 2 7 3 |
| Australian Business Number (ABN) | | Unique Superannuation Identifier (USI) |
| 6 5 7 1 4 3 9 4 8 9 8 | | S T A 0 1 0 0 A U |

TO (RECEIVING FUND):

| | | | | | | | | | | | | | | |
|--------------------------------|--|--|--|--|--|--|--|--|--|-------------------------|--|--|--|--|
| *KiwiSaver Scheme name | | | | | | | | | | | | | | |
| <input type="text"/> | | | | | | | | | | | | | | |
| *KiwiSaver registration number | | | | | | | | | | *KiwiSaver phone number | | | | |
| <input type="text"/> | | | | | | | | | | <input type="text"/> | | | | |
| *KiwiSaver Membership number | | | | | | | | | | | | | | |
| <input type="text"/> | | | | | | | | | | | | | | |
| *KiwiSaver Scheme address | | | | | | | | | | | | | | |
| <input type="text"/> | | | | | | | | | | | | | | |
| <input type="text"/> | | | | | | | | | | | | | | |

If you have multiple accounts with AustralianSuper, you must complete a separate form for each account you wish to transfer.

STEP 3. KIWI SAVER BANK DETAILS

Please provide the following bank account details of your KiwiSaver Scheme:

Bank SWIFT Number

Bank name

Bank address

Town/City

Postcode

Beneficiary name

Beneficiary address

Town/City

Postcode

Beneficiary account number

Bank

Branch

Account number

Suffix

Unless advised otherwise, we will make payment electronically in New Zealand dollars. The exchange rate will be calculated at the date of transfer.

STEP 4. SUPPORTING DOCUMENT CHECKLIST

I have:

Attached a certified copy of my proof of identity

AND

Completed the Statutory Declaration on the back of this form, or attached a Commonwealth of Australia Statutory Declaration appropriately witnessed, stating I have permanently emigrated to New Zealand

AND

Attached proof of residence in NZ showing address e.g. utility bill, council rates etc. if my primary source of identification doesn't show my current New Zealand address.

AND

Attached an original letter of compliance from my KiwiSaver Scheme that confirms the details provided in Steps 2 and 3.

STEP 5. AUTHORISATION

By signing this form, I acknowledge that:

- › I have read the Privacy Collection Statement and I understand how AustralianSuper will use my personal information.
- › I may ask AustralianSuper for information about any fees or charges that may apply, or any other information that may affect my super, and have obtained or do not require this information.
- › My AustralianSuper account will close and any Death, Total & Permanent Disablement and Income Protection cover will end. AustralianSuper will no longer have any responsibility for the account.
- › I consent to the transfer of my entire super balance from AustralianSuper to my KiwiSaver Scheme.
- › I have permanently emigrated to New Zealand.
- › My KiwiSaver provider can accept this transfer.

Sign here



Date

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