Generate

Subsequent Retirement Withdrawal, Amendment and Cancellation Form

 $If you would like help completing this form, please email info@generate kiwis aver. co.nz or phone us on 0800\,855\,322.$

Please use this form if you have already made a retirement withdrawal from your Generate KiwiSaver Scheme account and would like to apply for a subsequent withdrawal, set-up or amend a regular withdrawal facility or cancel a regular withdrawal facility.

Member Details			
Title	First Name	Surname	
Date of Birth			
Residential Address			
City	Country	Postcode	
Home Phone		Work Phone	
Mobile		Email	
Generate KiwiSaver M	lember Number GEN	IRD No. If you don't know your IRD number, please call the IRD on 0800 227 774.	
Withdrawal Cancellation			
I would like to::			
Cancel my regular retirement withdrawal (go to Declaration on page 2)			
Your Withdrawal Options			
Please pick one of the following withdrawal options:			
Withdraw all of my savings;			
Withdraw part of	my savings (minimum withdrawal of \$100);		
Amount\$			
Set up or change a regular facility to withdraw my savings (minimum withdrawal of \$100).			
Start Date		Amount\$	
Frequency	Weekly Fortnightly Monthly Qua	arterly Yearly	

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Payment Details
We will only make payments in New Zealand dollars to a New Zealand bank account in your name (held individually or jointly).
Account Holder's Name
Account Number Account Number
Bank Branch
Address/PO Box
Town/City
Proof of your Bank Account
Please provide proof of your bank account name and number by supplying 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 tellers stamp - an online bank account statement with the name of the bank in the header/footer
Declaration
I confirm that the information given in this form is correct. I am a member of the Generate KiwiSaver Scheme and I am applying to the Trustee to withdraw some or all of my KiwiSaver savings from the Generate KiwiSaver Scheme. If I have opted to withdraw all of my KiwiSaver savings, I understand that on payment of my full account balance, I will no longer be a member of KiwiSaver.
Your Signature Date
Where do I send my application to?

Email return: Please scan this application and all supporting documentation and email them to us at info@generatekiwisaver.co.nz or

 $\textbf{Postal return:} \ Please \ send \ this \ application \ and \ any \ supporting \ documentation \ to: \ Generate \ KiwiSaver \ Scheme, \ PO \ Box \ 91609, \ Victoria \ Street \ West, \ Auckland \ 1142 \ Auckl$