SIL Mutual Scheme

Withdrawal Request Form



The fastest way to provide us your form and supporting documents is to email them to withdrawals@anzinvestments.co.nz. Alternatively you can post them to ANZ Investments, Freepost 324, PO Box 7149, Victoria Street West, Auckland 1142 or drop them into an ANZ branch.

you can post them to my investments, meepost 32 1,1 0 box 7 1 10, victoria street west, nachana 11 12 or drop them into an my brainers.							
1. Your information							
First name(s)							
Surname							
ANZ customer (or investor) number							
Date of birth							
Country of birth							
Contact phone Email							
Occupation							
IRD number							
Prescribed investor rate 10.5% 28% (see silfunds.co.nz/updatepir for help)							
withdraw all of my investment If you withdraw your full balance, your account will be closed, and you will no longer be a member of the SIL Mutual Scheme. withdraw part of my investment make a regular withdrawal of Frequency for a regular withdrawal (please tick one of the available options): Fortnightly Monthly Quarterly Starting D D M M 2 0 Y Y							
We can only pay your withdrawal amount to your New Zealand bank account, we can't pay third parties.							
Bank Branch Account number Suffix							
Name of bank account holder:							
(leave blank if a bank-encoded deposit slip is attached)							
If you have listed a non-ANZ bank account, please provide us with a pre-printed deposit slip or bank statement dated from the last six months.							

PTO Page 1 of 3

SIL Mutual Scheme

3. Identification

5. What to expect next

have been provided.

As part of your application, you must provide either verified or certified copies of your valid ID and proof of address.

- Verified An ANZ branch or an ANZ Investments approved financial adviser can check your original ID and proof of address documents. They can submit your application at the same time.
- Certified A Notary Public, Justice of the Peace, NZ lawyer, or any other person who has the legal authority can certify a copy of your ID and proof of address documents by checking them against the originals. You can then send in these certified copies with your application form.

See <u>anz.co.nz/myid</u> for more information. An example of correctly certified ID If we need to ask you for further information, this will delay the processing of your application. **Identity documents** Please provide us with: Option 1: ONE of these documents: National ID card New Zealand passport Overseas passport (signed) New Zealand firearms licence Option 2: A New Zealand driver licence AND ONE of these documents (must be dated within the last six months): Bank statement Central Government Agency document (including from ANZ) (issued to you) 1, James Black SuperGold Card New Zealand Defence or Police Photo ID hereby certify that this is a true and correct copy of the original document which I have sighted, and it represents a true likeness of the individual. Option 3: ONE form of primary non-photo ID 15th day of January 2016 Dated the_ New Zealand full birth certificate Certificate of New Zealand citizenship J Flen Overseas birth certificate Overseas citizenship certificate Enrolled barrister and solicitor of the High Court of New Zealand AND ONE form of secondary photo ID Ensure the 'true likeness' wording is New Zealand driver licence New Zealand Defence or Police Photo ID included, that the image of you is 18+ card or Kiwi Access Card clear, and the text can be clearly read. Proof of address Please provide us with ONE of the below acceptable forms of address. The document must be dated within the last six months and show your name and current New Zealand address. Electoral roll papers Utility bill Letter from employer on company letterhead confirming residential address Bank statement or bank document Electronic White/Yellow Pages (including from ANZ) Letter from a lawyer or accountant Insurance policy document confirming your residential address Non-bank financial institution statement Car registration notification/demand Retirement home letter or invoice Educational Institution letter from education Central Government Agency document Letter or invoice from your general facility, must be on letterhead paper e.g. IRD, ACC practitioner (GP) Short-term accommodation letter issued by Local Council/Government letter the accommodation provider and include Signed rental tenancy agreement, flatting your name or sub-letting agreement 4. Checklist Make sure you send us everything listed below, we can only process your application when we have: your completed application certified/verified copies of your ID and proof of address

· Once you've submitted your withdrawal application, you'll receive an email confirming it's been received and that we're checking all documents

• If the value of your investment should reach zero at anytime, your account will be closed and you will no longer be a member of the SIL Mutual Scheme.

• If we require any additional information or documents we'll contact you using the mobile, email and/or postal address you have provided us.

Once we have all the documents required we'll begin processing your application.
If your application is approved we will send you a text/email with a confirmation.

Page 2 of 3

SIL Mutual Scheme

6. How long will it take

Once we've received your application, we aim to pay your withdrawal within 10 business days. It may take longer if there are public holidays, or we need to ask you for additional information.

7. Your agreement

I agree to withdraw my investment as indicated above. If signed under power of attorney, that attorney confirms that he/she has not received notice of revocation of that power.

I understand that my funds continue to be invested, and may rise and fall in value, until the withdrawal is approved and payment is processed.

I understand that I have chosen to save for my retirement by contributing to the SIL Mutual Scheme, which is a regulated superannuation product that is subject to superannuation scheme rules.

If applicable, I have personally affixed my digital signature to this document.

Signature								
	Date	D D	М	М	2	0	Υ	Υ

8. Privacy

You agree we can collect, use and disclose your information to process your application in accordance with our Privacy Statement, which is the same as ANZ Bank New Zealand Limited's and can be found at anz.co.nz/privacy. If you prefer a print version, it is available to download as a PDF or from any branch.

We take your privacy seriously, and understand the need to keep your information confidential and secure. You can access or correct your personal information by calling 0800 736 034 or asking at any ANZ branch. We may charge you a fee to access the information we have about you.

INTERNAL USE – ANZ STAFF ONLY							
1	(staff full name)	Branch Stamp					
hereby verify that this is the original document.							
Date D D M M Z O Y Y							
Signature							
Staff job role							
Branch name							

 $Once \ completed - staff \ must \ scan \ this \ form \ and \ all \ required \ supporting \ documents \ in \ the \ checklist \ to \ with \ drawals@anzinvestments.co.nz$