# State Sector Retirement Savings Scheme Significant Financial Hardship Withdrawal Request Form



Please complete all the sections in the form and use the checklist to make sure you have completed everything that is required. Either email the completed form to <a href="mailto:superlife@superlife.co.nz">superlife@superlife.co.nz</a> or post it to us at P.O. Box 105262, Auckland City 1143. If you need help with the form, call us on 0800 27 87 37.

# ABOUT SIGNIFICANT FINANCIAL HARDSHIP WITHDRAWAL REQUEST

You may be able to withdraw part of your savings if you are experiencing significant financial hardship. Smartshares Limited (Smartshares, we, our or us), the manager of the SuperLife Superannuation Master Trust, will determine if you are eligible after assessing the information you provide with this application.

Significant financial hardship includes significant financial difficulties that arise because you are:

- Not able to meet minimum living expenses
- Not able to meet mortgage repayments on your family home, resulting in your mortgage provider seeking to enforce the mortgage on your property
- Modifying your home to meet special needs arising from you or a dependent family member having a
  disability
- Paying for medical treatment if you or a dependent family member becomes ill, has an injury, or requires palliative care
- · Suffering from a serious illness
- · Incurring funeral costs if a dependent family member dies

Even if one of the above circumstances applies, it does not automatically result in significant financial hardship eligibility. We must also be reasonably satisfied that alternative sources of funding have been explored and been exhausted. Payments from the SuperLife Superannuation Master Trust are a last resort.

If we approve your request to withdraw due to significant financial hardship, the amount that is available to be withdrawn is limited to the amount that, in our opinion, is required to alleviate the financial hardship.

#### **Evidence**

Please refer to the checklist below regarding the specific documentation you will require for us to be able to asses your application.

You **must** supply us with the following for you and any household members who contribute financially to the day-to-day running of your home (where applicable):

Completed application form.

Completed Statutory Declaration, witnessed by any person who is authorised to take statutory declarations.

Completed Identity and Address Verification Form.

Overdue bills (**these must be less than 30 days old**). We need to be able to see the outstanding balance and your regular minimum payments (if applicable):

- utility bill
- credit cards
- finance company loans
- car loans

- store cards
- personal loans
- other overdue accounts

Living arrangements - confirmation of the amount you currently owe and any arrangements for future payments:

- if you're a homeowner, a letter from your mortgage provider
- if you're renting or boarding, a tenancy agreement

# ABOUT SIGNIFICANT FINANCIAL HARDSHIP WITHDRAWAL REQUEST CONTINUED

Proof of wages or salary:

- if you're employed, your **last 3 payslips**
- if you've recently been made redundant, your redundancy letter and final payslip
- if you're self-employed, your most recent summary of earnings

Bank statements for the last 3 months for all accounts in your and your partner's name (individual, joint and business accounts).

Evidence of your application for assistance, showing current entitlements or decline (if applicable) from:

- WINZ
- Inland Revenue
- your debt providers

#### **Guidelines on the process**

- 1. The above documents (where applicable) must be sent together with your application form.
- 2. If you fail to send any of the documents relevant to your application, your application will be placed on hold and will only be considered when it is complete.

# **SECTION 1: PERSONAL DETAILS** Member number Scheme name State Sector Retirement Savings Scheme Title (Mr, Mrs, Miss, Ms, Mx, Dr or Other) Date of birth First name Surname Home phone Work phone Mobile **Email** Home address Street address Suburb Town/city Postcode Country

SECTION 2: TAX DETAILS					
<b>Note:</b> If you have already provided us with your IRD number and PIR, please ignore this section. If your PIR has changed, please tick the correct PIR. If you haven't given us your IRD number and PIR, we will apply a tax rate of 28% to any taxable income applicable to you for the relevant tax year.					
IRD number (Must be supplied) Prescribed Investor Rate (PIR) (Tick one)					
	10.5% 17.5% 28%				
Refer to ird.govt.nz/roles/portfolio-investment-entities/find-my-prescribed-investor-rate to calculate your PIR.					

# SECTION 3: ABOUT YOUR PARTNER AND/OR DEPENDANTS

Name	Age	Relationship to you	Are they em	Are they employed?	
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	

SECTION 4: REASON FOR APPLYING				
Amount requested: \$ (specify amount)				
Please tick the box which applies to you.				
Unable to pay for minimum living expenses such as power, water, and food bills;				
Unable to pay mortgage/rental/board payments;				
Unable to pay to modify your home to meet special needs if you or a dependent family member is disables;				
Unable to pay for medical treatment if you or a dependent family member becomes ill, has an injury, or requires palliative care;				
Incurred funeral costs as a dependent family member has died.				
If you feel you are suffering (or likely to suffer) from hardship for any other reason, please explain your circumstances below:				
SECTION 5: BANK ACCOUNT DETAILS				
If you have not already provided SuperLife with your bank account details, please provide details of your bank account for any payment that will be made to you. Please attach a pre-printed bank deposit slip or bank statement.				
Details of the bank account that any payment payable to me are:				
Name of bank account holder				
Account number Branch name				
Bank Branch Account number Suffix				

# **SECTION 6: INCOME & EXPENDITURE STATEMENT**

If we need to ask you further information, this will delay the processing of your application.

## What is your total weekly household income?

In this section you need to tell us about the money you and your household have coming in each week. The more information we have, the better we'll be able to assess your individual circumstances.

You:	Your partner:	
Salary/wages	\$ Salary/wages	\$
Commission	\$ Commission	\$
Self-employed income	\$ Self-employed income	\$
Pension/superannuation	\$ Pension/superannuation	\$
Benefit (WINZ + IRD)	\$ Benefit (WINZ + IRD)	\$
Child support	\$ Child support	\$
ACC	\$ ACC	\$
Rental/board income	\$ Rental/board income	\$
Interest/dividends	\$ Interest/dividends	\$
Other	\$ Other	\$
Total for you:	\$ Total for your partner:	\$

# What assets/savings do you have?

In this section you need to tell us about the things you and your household own, and their current value.

You:	Your partner:	
Family home	\$ Family home	\$
Investment property/ holiday home	\$ Investment property/ holiday home	\$
Household contents (value)	\$ Household contents (value)	\$
Vehicles inc. boats	\$ Vehicles inc. boats	\$
Bank accounts	\$ Bank accounts	\$
Shares	\$ Shares	\$
Term deposits	\$ Term deposits	\$
Bonus bonds	\$ Bonus bonds	\$
Superannuation	\$ Superannuation	\$
Other	\$ Other	\$
Life insurance policies	\$ Life insurance policies	\$
Total for you:	\$ Total for your partner:	\$

## **SECTION 6: INCOME & EXPENDITURE STATEMENT CONTINUED**

## What is your total weekly household expenditure?

In this section you need to tell us about the money you and your household have going out each week, as well as the balance of any accounts you are paying and any arrears that you owe. The more information we have, the better we'll be able to assess your individual circumstances. You'll need to provide evidence of all of the items you list below. The evidence you provide must be **less than 30 days old**.

**Paying per week:** record how much you and your partner pay per week towards your expenses and debts.

**Arrears:** record and provide evidence of any amount you owe that is overdue because of missed payments (e.g. overdue phone or power bills overdue account, mortgage/rent arrears).

**Note:** Remember to include evidence of your household expenditure, living arrangements and evidence of your arrears with your application. Significant financial hardship withdrawals cannot be used to clear the balance of debts you owe. If approved, they can only pay towards what you owe in arrears. Any information missing from your application will cause delays.

		Paying per week	Arrears
Mortgage/rent/board	\$		\$
Land rates	\$		\$
Water bill	\$		\$
Electricity bill	\$		\$
Gas bill	\$		\$
Home maintenance	\$		\$
Phone bill	\$		\$
Internet bill	\$		\$
Doctor/dentist/optician	\$		\$
Pharmacy/medication	\$		\$
House/contents insurance	\$		\$
Medical insurance	\$		\$
Vehicle/boat insurance	\$		\$
Public transport	\$		\$
Registration/WOF	\$		\$
Car maintenance	\$		\$
Children's school education	\$		\$
Child maintenance	\$		\$
Childcare	\$		\$
Other	\$		\$
Other	\$		\$
		Weekly expenses	Arrears
	Total \$		\$

We use industry provided standard costs for essentials such as food, power, phone, mobile, internet, transportation, rates, water, clothing and medical expenses. You do not need to specify these amounts unless you believe any of these expenses for you or your family are higher than average.

# **SECTION 6: INCOME & EXPENDITURE STATEMENT CONTINUED**

#### What amounts and overdue bills do you have (what do you owe)?

In this section you need to tell us about the debts you and your household have, including the balance that you owe, how much you pay per week, and any arrears that you owe.

**Balance:** record the total amount owing on any accounts you are paying off over time (e.g. your credit card or personal loan).

**Paying per week:** record how much you and your partner pay per week towards your expenses and debts.

**Arrears:** record any amount you owe that is overdue because of missed payments (e.g. overdue credit card or loan payments).

**Note:** Remember to include evidence of your debts and any arrears with your application. Any information missing from your application will cause delays.

	Provider	Balance	Paying per week	Arrears
Mortgage		\$	\$	\$
Mortgage		\$	\$	\$
Mortgage		\$	\$	\$
Credit card		\$	\$	\$
Credit card		\$	\$	\$
Credit card		\$	\$	\$
Store card		\$	\$	\$
Store card		\$	\$	\$
Store card		\$	\$	\$
Personal loan		\$	\$	\$
Personal loan		\$	\$	\$
Hire purchase		\$	\$	\$
Hire purchase		\$	\$	\$
Finance company		\$	\$	\$
Finance company		\$	\$	\$
Finance company		\$	\$	\$
Bank overdraft		\$	\$	\$
Bank overdraft		\$	\$	\$
Bank overdraft		\$	\$	\$
Other		\$	\$	\$
Other		\$	\$	\$
Other		\$	\$	\$
Other		\$	\$	\$
Other		\$	\$	\$
		Balance	Paying per week	Arrears
	Total	\$	\$	\$
			Paying per week	Arrears
	Combined	<b>Total</b> (page 6 and 7)	\$	\$

# Are you in the process or contemplating the process of NAP or bankruptcy? Yes No SECTION 8: BUDGETARY HELP AND ADVICE Are you currently getting budgetary advice or help? Yes No If yes, give details:

## **SECTION 9: PRIVACY AUTHORISATION**

SECTION 7: NO ASSET PROCEDURE (NAP) OR BANKRUPTCY

The personal information you provide in this form, and any information you provide to us in the future, will be collected by Smartshares Limited (Smartshares), as Manager of the SuperLife Superannuation Master Trust, for purposes relating to the administration, operation, management and marketing of the scheme. Your personal information will be collected, used, stored and disclosed in accordance with the Privacy Act 2020 and SuperLife's Privacy Policy, which is available at <a href="mailto:superlife.co.nz/legal/privacy-policy">superlife.co.nz/legal/privacy-policy</a>.

You have the right to access and request correction to any personal information that you have supplied to Smartshares, by contacting <a href="mailto:superlife@superlife.co.nz">superlife@superlife.co.nz</a>.

## **SECTION 10: DECLARATION**

(insert name of person making the declaration)

of

(insert address and occupation of person making the declaration)

solemnly and sincerely declare that:

- I am suffering from significant financial hardship for one or more reasons as indicated in this form, and I am applying to Smartshares for a withdrawal from my SuperLife Superannuation Master Trust account(s).
- The information I have provided in this form and the attached documents represent a complete, true and correct record of my current financial position.
- I acknowledge that Smartshares will rely on information provided in (or in connection with) this form and accordingly agree to indemnify Smartshares against any claims, liability, losses, damages, costs and expenses which may arise directly or indirectly as a result of any information provided being untrue or misleading (including any omissions).

#### **SECTION 10: DECLARATION CONTINUED**

- I understand that acceptance of this application is at the discretion of Smartshares, the manager of the SuperLife Superannuation Master Trust.
- I understand that Smartshares will not be able to complete its assessment of this application if the information given in this form is incomplete or incorrect and I understand that Smartshares may request additional information from me relating to this application.
- I understand that Smartshares may decide that the amount withdrawn be limited to a specific amount, that in Smartshares' opinion is required to remedy the particular financial hardship.
- I understand that my withdrawal value may fluctuate based on the unit price(s) which applies when the withdrawal is processed and that fees, taxes and other expenses may be deducted.
- I authorise Smartshares to contact any third parties for verification of information that I have provided.
- I acknowledge that Smartshares must be reasonably satisfied that I have explored and exhausted all other reasonable alternative sources of funding.
- I have read and understood the Privacy Authorisation set out in section 9 of this form.

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

Signature of person making the declaration				
Declared at	this		day of	20
<b>before me:</b> (person before whom the declaration is made)	da)			
	ue)			
Signature of witness		Address		
Full name				
Occupation				

A Statutory Declaration under the Oaths And Declarations Act 1957 that is made in New Zealand must be made before an eligible person described in Section 9 of the Act including:

- a justice of the peace;
- · a barrister or solicitor of the High Court;
- a notary public;
- the Registrar or Deputy Registrar of the High Court or of any District Court;
- a member of Parliament;
- officers of the Crown or of a local authority within the meaning of the Local Government Act 2002, authorised for that purpose by the Minister of Justice from time to time;
- an employee of Public Trust constituted under the Public Trust Act 2001, authorised for that purpose by the Minister of Justice from time to time.