

First or second chance home withdrawal form

Summer
My Plan

Complete this form and return it (along with additional supporting documentation) to
Salt Investment Funds Limited via email: info@summer.co.nz. Or by mail to PO Box 2673, Auckland 1140.

My details

Full name:		
Date of Birth:		
Day	Month	Year
Primary contact number:		
Email:		
Residential address:		
Street no./Name/PO Box:		
Suburb/RD no.:		
Town/City:	Postcode:	
Country:	New Zealand	Other (please state):

What can be withdrawn?

*If a first home purchase withdrawal is permitted then you can withdraw everything from your account other than:

- \$1,000
- any amount transferred to KiwiSaver from a UK pension scheme, or an Australian complying superannuation scheme

Second-Chance Home

Withdrawal: This applies if you have held an estate in land before but no longer have a share in property. If you are applying for a second-chance home withdrawal you will need to attach confirmation from Housing New Zealand that you qualify.

Withdrawal details

Type of withdrawal (please tick one)

First Home withdrawal

or

Second-Chance Home withdrawal

Amount of withdrawal

Subject to the requirements of the KiwiSaver Act 2006 and the Trust Deed for the Scheme, I request:

A partial withdrawal of \$	from my Scheme account; or
A withdrawal of all available* funds from my Scheme account.	

How withdrawal amount permitted will be applied (please tick one)

The funds withdrawn will be applied (in the first instance towards paying a deposit on the property); or

The funds withdrawn will be applied solely towards paying the purchase price of the property at settlement.

Solicitor Details

Solicitor name:	
Solicitor's company name:	
Mailing address:	
Street no./Name/PO Box:	
Suburb/RD no.:	
Town/City:	Postcode:
Country: New Zealand	
Email:	

Please turn over

Identity: We share this information securely and confidentially with our identification providers to verify your identity (as required by law). Please see our privacy policy for more detail. You can view this online at www.summer.co.nz/privacy-policy or call us on 0800 11 55 66 to request a copy. **If you do not have New Zealand Identity documents, please provide a certified copy of your overseas passport or call us on 09 243 1020.**

Verification of identity

To get your Summer KiwiSaver scheme withdrawal underway we need to verify your identity. To help us do this, in the following section, please provide as much information as possible. It is necessary to complete at least one of the two options.

NZ Driver licence number:

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Driver licence version:

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Vehicle registration number:

Vehicle registration number:

NZ Passport number:

NZ Passport number:

Passport
issue date:

Day		Month		Year			

Passport
expiry date:

Day		Month		Year			

Agreement and statutory declaration

1.

(full name of person making declaration)

Of:

(address of person making declaration)

Occupation:

Occupation:

(occupation of person making declaration)

solemnly and sincerely declare that:

1. for the period for which I was a member of a KiwiSaver scheme and/or a 'complying superannuation fund', my principal place of residence was in New Zealand, except for the periods outlined below (if any):

From:

Day		Month		Year				

To:

Day		Month		Year			

From:

Day		Month			Year				

To:

Day		Month		Year			

From:

Day		Month		Year					

To:

Day		Month		Year			

From:

Day		Month		Year			

To:

Day		Month		Year					

2. I have never made a withdrawal from a KiwiSaver scheme (whether this Scheme or any scheme to which I previously belonged) for a first or second chance home withdrawal before.
3. I understand that should I transfer to another KiwiSaver scheme, the Summer KiwiSaver scheme will pass information about this first home withdrawal to my new provider.
4. I understand that the amount withdrawn will be deducted proportionally from each Fund that I have invested in and, if this is a partial withdrawal of funds, my member contributions will be withdrawn first, then any Government contributions in order to meet the amount specified in the Withdrawal details section.
5. I understand that in the event that a claw back of Government contributions is required, and having received these as part of my First Home Withdrawal, my member accumulation remaining in the Scheme will be adjusted to the extent necessary to cover any overpayment of Government contributions.
6. I have been a member of a KiwiSaver scheme for three years or more;
7. The property I am purchasing is located in New Zealand and it is intended to be my principal place of residence.
8. I understand that any information I give to Salt Investment Funds Limited or its affiliates may be passed on to an entity that is involved in the administration or management of the Summer KiwiSaver scheme (including the Inland Revenue) and I authorise Salt Investment Funds Limited or its affiliates to give such information in relation to this withdrawal. For details on the entities involved in the management or administration of the Summer KiwiSaver scheme see the Summer Other Material Information document on the register of offers of financial products at <https://disclose-register.companiesoffice.govt.nz/>.
9. I authorise Salt Investment Funds Limited to update my Summer KiwiSaver scheme account details in accordance with the information provided on this form, where they differ from that which are currently held, and in accordance with the terms and conditions of my account.

Please turn over

10. I have:
- not held an estate in land before; or
 - held an estate in land before, but it was a leasehold estate, or I held it as (a) a bare trustee; or (b) as a trustee who (i) is a discretionary, contingent, or vested beneficiary under the relevant trust; but (ii) had no reasonable expectation of being entitled to occupy the land as my or my family's principal place of residence until the death of the person who then currently occupied the land (the occupier) or the death of the occupier's survivor; or
 - held an estate in land before, and I attach a notice in my name, signed by the Minister of Housing or delegate, which states that the Minister of Housing or delegate is satisfied that my income, assets, and liabilities represent a financial position that would be expected of a person that has never held an estate in land.
- I understand that should the information given within this withdrawal form be incomplete or incorrect, the Manager will not be able to complete its assessment of my application without receiving the complete and correct information.
11. I understand that my application for a first or second-chance home withdrawal is subject to the approval of the Manager, and the Manager receiving:
- a pre-printed bank deposit slip for my solicitor's trust account; and
 - a certificate from my solicitor containing an undertaking (in a form acceptable to the Manager) relating to the unconditional nature of the sale and purchase agreement and the application of funds withdrawn and enclosing a copy of the sale and purchase agreement which clearly shows me as the purchaser.
12. I understand that my withdrawal value will be based upon the unit price(s) at the date my request is processed.
13. I agree that any solicitor who has or will provide information about my first or second-chance home withdrawal may be approached by the Manager, and I hereby authorise such solicitor to give such further information in relation to this purchase as requested by the Manager. A photocopy of this authorisation shall be read as the original.
14. I solemnly and sincerely declare that the information provided by me is true and correct.

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

Signature:	Date: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center; font-size: 8px;">Day</td> <td style="text-align: center; font-size: 8px;">Month</td> <td colspan="6" style="text-align: center; font-size: 8px;">Year</td> </tr> </table>									Day	Month	Year					
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place	date	month	year														

Witness: A statutory declaration must be made before a person entitled to witness a statutory declaration under the Oaths and Declarations Act 1957. This includes a barrister and solicitor of the High Court, a Justice of the Peace, a notary public, the Registrar or Deputy Registrar of the High Court or of any District Court and a Member of Parliament. Please contact us if you require further information.

Witness

Witness to complete (being a person authorised under the Oaths and Declarations Act 1957):

Name:																	
Occupation:																	
Address:																	
Signature of Witness:	Date: <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center; font-size: 8px;">Day</td> <td style="text-align: center; font-size: 8px;">Month</td> <td colspan="6" style="text-align: center; font-size: 8px;">Year</td> </tr> </table>									Day	Month	Year					
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Checklist

Please check that you have included the below with your application prior to returning the form (and supporting documentation) to Salt Investment Funds Limited via email: info@summer.co.nz. Or by mail to PO Box 2673, Auckland 1140.

Please provide a certified copy of identity following our guidelines (see following page)

Signed and witnessed statutory declaration (see the Witness section for more information on persons authorised to witness statutory declarations)

Copy of Sale and Purchase Agreement

An original solicitors certificate for deposit or settlement, on the solicitor's letterhead

A bank encoded deposit slip for the solicitors trust account

A confirmation letter of eligibility from Housing New Zealand (if you have previously owned a house and are applying under second chance provisions)

Please turn over

Certification guidelines

- Acceptable documents – current passport (including your photo and signature pages) or Drivers Licence (back and front). If these are foreign documents, they need to be translated into English.
- Certification must be within the last twelve months.
- The certifier must be: a JP; Chartered Accountant; Lawyer; Police Officer; Registered Teacher; Registered Doctor, or any other person who has legal authority to take statutory declarations. The certifier cannot be your spouse, partner, relative, or living at the same address as you.
- Upon comparing the copy with the original document, the certifier must write on the copy their name, occupation, their signature, the date and the following statement: "I certify this to be a true copy of the original document and confirm that it represents the identity of [full name of person being identified]."

Fraudulent documents

Given the emerging trend of altered or fake documents being submitted, please be reminded of the following:

- A statutory declaration is a legal document made under the Oaths and Declarations Act 1957.
- Knowingly making a false declaration is an offence under section 111 of the Act.
- A conviction may result in fines or imprisonment (up to three years).
- Making a false document with the intent that it be acted upon as genuine is an offence under the Crimes Act 1961.
- A conviction may result in fines or imprisonment (up to ten years).
- If we have confirmation that an application contains altered or fake documents, we may decline part or all of the application. We are conscious that there may still be genuine hardship, so will try and take a balanced approach in this determination.

For Office Use Only:

Account number:

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Member records updated where applicable for new contact details