

# MAS Retirement Savings Scheme

## Retirement Withdrawal Application Form



**Please send completed form and supporting documents by post to:**

MAS Superannuation  
FREEPOST 884  
PO Box 91976  
Victoria Street West, Auckland 1142

**For assistance:**

Phone 0800 627 738  
Email [masinvest@linkmarketservices.com](mailto:masinvest@linkmarketservices.com)

### **i Important information**

Use this form to apply for a retirement withdrawal.

The MAS Retirement Savings Scheme has three Member Sections. The Individual and Workplace Savings Sections are generally locked-in until age 55. Savings in the Superannuation Section are generally locked-in until the age of eligibility for NZ Superannuation (currently 65).

The Individual Section only applies to Members who joined prior to 16 September 2016.

The Workplace Savings Section applies to Members who joined from 16 September 2016 and met the restricted eligibility criteria.

The Superannuation Section applies to Members who joined from 23 June 2021 who did not join the Workplace Savings Section.

For information on applications for early withdrawal, for example due to significant financial hardship, serious illness, permanent disability, permanent emigration, you joined after 19 September 2016 and no longer meet joining criteria, or relationship property separation, please visit [mas.co.nz/retirement-savings](https://mas.co.nz/retirement-savings).

Please complete all sections of this form. An incomplete form may cause delays in the processing of your application.

Please note we will normally process your payment within five business days. We will contact you if we have any issues with your withdrawal request.

Which Section are you applying to withdraw from? (Select one):

Individual or Workplace Savings Section (age 55)

Superannuation Section (age 65)

## 1. Your information

Full name	<input type="text"/>		
	Title	First names (s)	Surname
Member number	Date of birth		<input type="text"/>
			dd-mm-yyyy
Postal Address	<input type="text"/>		
	City		Postcode
Phone number	<input type="text"/>		
	Home	Work	Mobile
Email	<input type="text"/>		
IRD number	<input type="text"/>		
Prescribed investor rate (PIR)	10.5%	17.5%	28%

Please refer to [ird.govt.nz/pir](https://ird.govt.nz/pir) for more information on how to determine your PIR.

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## 2. UK pension transfers

Have you transferred money in from a UK Pension Scheme on or after 6 April 2006?

Yes. Please refer to section 8.

No

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## 3. Setting up or amending your withdrawal

### Setting up a new withdrawal

If my application is approved, I would like to make:

a withdrawal of my full available balance

Please close my account

Please leave my account open

a partial withdrawal

Amount  ( the minimum amount you can withdraw is \$500)

Partial withdrawals will be deducted proportionally from each investment fund you hold unless otherwise selected below:

Cash	Conservative	Moderate	Balanced	Growth	Aggressive	Global Equities
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Regular monthly withdrawal (minimum \$100)

Amount

Start date:  (Please allow at least five working days)

Payments will be processed on the 13<sup>th</sup> of each month with payment made up to two business days after. If the 13th falls on a non-business day, your payment will be processed the next business day with payment made up to two business days after.

### Amending an existing regular withdrawal

I would like to amend my existing regular withdrawal instructions to:

Regular monthly withdrawal of  starting (minimum \$100)

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## 4. Payment details

Please provide the bank account to make payment to. We can only pay your withdrawal to your New Zealand bank account; we can't pay third parties. Please attach proof of bank account, e.g. bank statement, deposit slip or signed screen print of your internet bank accounts. If you have provided us with this verification in the last 12 months, you do need to provide it again.

Bank      Branch      Account number      Suffix

Name of account

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## 5. Acknowledgement

I understand that Medical Funds Management Limited, as Manager of the MAS Retirement Savings Scheme will not be able to complete their assessment of this application if the information given in this form is incomplete or incorrect.

I understand that the withdrawal value will be based upon the unit price(s) applying on the business day my request is approved or accepted and that fees, taxes and expenses may be deducted.

Signature

Date

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## 6. Checklist

Make sure you send us everything listed below, as we can't consider your request without the following:

Your completed application (including Section 8, if applicable).

Proof of bank account.

Signed Acknowledgement Section.

Evidence of your identity and address (as applicable for the option you have selected under section 7).

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## 7. Identification requirements

The Anti-Money Laundering and Countering Financing of Terrorism Act 2009 requires MAS, on behalf of the Manager, to verify the identity of new investors and, periodically, reconfirm information about existing investors.

Please select one of the options below.

### Option One: Electronic Identity Verification and Proof of Address

MAS can confirm the identity and/or New Zealand address of many of our investors electronically, with their permission. Please note that we use a third-party system not owned by MAS to conduct identity checks in this way.

I confirm that I give MAS authority to check my identity and/or address electronically using the documentation provided.

I have included a copy of my current NZ Passport (page showing name, date of birth, photo and signature) or NZ Driver Licence (front & back).

Please note, if this method fails to identify you, we will contact you to provide physical documents, as per Option 2 below.

OR

### Option Two: Certified copies of identity and address documents

If you have opted not to use Electronic Identity Verification, then you will need to provide certified copies of the following documentation:

#### Please provide us with either

A certified copy of your current passport (page showing your name, date of birth, photo, and signature).

A certified copy of your New Zealand driver licence showing your name, signature and expiry date along with one of: certified copy of a bank statement issued to you by a registered NZ bank (dated within the last 12 months); valid credit or debit card with name embossed and signature; birth certificate; citizenship certificate; Government agency letter (e.g. IRD, Electoral Commission, etc.) dated within the last 12 months; SuperGold card with photo, name and signature.

A certified copy of your New Zealand firearms licence.

#### AND one of the following showing your name and residential address (which can't be more than 12 months old):

A certified copy of a utility bill (power, gas, water, landline phone, SKY or internet service).

A certified copy of a document issued to you by a NZ Government agency e.g (IRD, ACC, Ministry of Justice NZQA, or WINZ).

A certified copy of a NZ council rates notice/valuation.

A certified copy of a residential rental agreement.

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**Who can certify your documents?**

A MAS employee can verify your ID and proof of address. Alternatively, the following people can certify photocopies of original documents:

- Registered medical doctor
- Notary Public
- Justice of the Peace
- Member of the Police
- New Zealand lawyer
- New Zealand Chartered Accountant
- A person who has legal authority to take statutory declarations (or equivalent) in New Zealand.

**The certifier must:**

- See the original document and make a statement to the effect that the documents provided are true and correct copies and confirm the identity of the named individual;
- State their full name and their capacity to act as a certifier; and
- Date the certification (no more than three months prior to the date of the application).

The certifier cannot be related to you or a person living at the same address, or a party of the application.

When certification occurs overseas, copies of the required documentation must be certified by a person authorised by law to take statutory declarations.

Please note carefully the requirements above. If we need to ask for further information, this will delay the processing of your application.

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## 8. UK pension transfers

### For Members who have transferred funds into their account from a UK pension scheme on or after 6 April 2006

#### Important note

You should ensure that you understand what the NZ and UK tax implications are for you before you receive a benefit from the MAS Retirement Savings Scheme.

The Manager, Medical Funds Management Limited, recommend that you seek tax advice in relation to the NZ and UK tax consequences that may arise on making a withdrawal from the MAS Retirement Savings Scheme.

The Manager does not accept responsibility for any NZ and UK tax consequences that may arise from you making a withdrawal from the MAS Retirement Savings Scheme.

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### Please complete the following

What is your UK National Insurance Number?

Please advise the date of your UK pension transfer

dd-mm-yyyy

Have you been resident in the UK for UK tax purposes at any time during the current UK tax year or in the 5 UK tax years immediately preceding the current UK tax year? Or 10 UK tax years if you transferred on or after 6 April 2017?

Yes

No

Please advise the date in which you ceased living in the UK:      Day                      Month                      Year

Approximately how much time have you spent in the UK in the last 6 years?

Less than 6 months

More than 6 months

If your UK pension transfer occurred before 6 April 2017 you may withdraw funds from the MAS KiwiSaver Scheme without being subject to UK tax law if you have not been a UK taxpayer for the current and any previous five full UK tax years.

For withdrawals where your UK pension transfer took place on or after 6 April 2017 you may withdraw funds from the MAS KiwiSaver Scheme without being subject to UK tax law if:

- you have not been a UK taxpayer for the current and any previous 10 full UK tax years, and
- it has been 5 full UK tax years since you transferred.

All withdrawals from your account are required to be reported to UK pension authorities for the 10 years from your effective transfer date or within 10 years of you being a UK tax resident.

In making reports to HMRC on withdrawals and transfers from the MAS KiwiSaver Scheme, we will treat any withdrawal or transfer as begin first from the UK pension transfer component of your balance.

You may only make a withdrawal or transfer in accordance with UK law. This includes meeting the usual minimum pension age in the UK (currently age 55), and ensuring any transfer is only to another recognised overseas pension scheme.

You can find out more at [mas.co.nz/uk-pension-transfers](https://mas.co.nz/uk-pension-transfers) or by contacting MAS on **0800 800 627**.

I acknowledge that I have read and understood the information set out above.

Investor's Signature

Date

dd-mm-yyyy

**For assistance:**  
Phone **0800 627 738**  
Email [masinvest@linkmarketservices.com](mailto:masinvest@linkmarketservices.com)

