

# AMP KiwiSaver Scheme

## Permanent emigration application (excluding Australia)

Use this form to apply for a withdrawal of your KiwiSaver savings for the reason of permanent emigration to another country (excluding Australia).

We're here to help. If you have any questions when completing this form, please call us on **0800 267 5494** (+64 4 439 5858) or email **kiwisaver@amp.co.nz**.

### How to complete this form:

1. Complete the withdrawal form sections (a) – (d). You can complete this form on screen by typing directly into the PDF.
2. Complete section (e) in front of a person authorised to take statutory declarations. Make sure they certify your identification and address.
3. Include all documents listed below with your application.
4. Please email the completed form and supporting documents to: **kiwisaver@amp.co.nz**

or post to:

**AMP KiwiSaver Scheme**  
**Freepost 170, PO Box 55**  
**Shortland Street,**  
**Auckland 1140**  
**New Zealand**

Freepost within New Zealand only

### Document checklist:

- certified copy(s) of your identification\*
- certified copy of your residential address\*
- bank account evidence (original pre-encoded deposit slip or certified bank statement\*)
- proof of your departure from New Zealand
- proof of overseas address after 12 months of emigration.

\*Must be initialled and dated by the person taking your statutory declaration.

### How long does it take?

When all requirements have been fulfilled and we have received confirmation from Inland Revenue regarding Government contributions (allow 7 - 10 working days for this), we'll process your withdrawal within 8 working days.

If payment is being made to your overseas bank account, please allow up to 15 days from date of payment for the funds to clear.

### Important information



#### Eligibility

You can apply to withdraw your savings one year after you have permanently emigrated from New Zealand.



#### Permanently emigrating to Australia?

There is a different form to fill out. Please complete the Permanent Emigration to Australia Transfer Application form ([amp.co.nz/amp/forms](http://amp.co.nz/amp/forms)).



#### Funds that cannot be withdrawn

A withdrawal due to permanent emigration excludes:

- Government contributions.
- Funds transferred from an Australian complying superannuation fund.



#### Statutory declaration and certifying your documents

We are required by law to verify your identity and current residential address before processing a withdrawal. This is a requirement of the Anti-Money Laundering and Counter Financing of Terrorism Act 2009.

Please ensure the person who takes the statutory declaration in section (e) also certifies your identification, address and bank statement.



#### Completing this form overseas?



Please refer to the lists in section (e) to view people able to complete statutory declarations in your country.



#### Bank account

We can only make payments in New Zealand dollars to either a New Zealand bank account or international bank account held in your name (either individually or jointly).

### We're here to help

-  **0800 267 5494**
-  **kiwisaver@amp.co.nz**
-  **amp.co.nz**



## (d) Your identity documents

Have the original document(s) ready to be certified by the authorised person completing your Statutory Declaration (next page). We're here to help if you need us. Call **0800 267 5494** (+64 4 439 5858) or email **kiwisaver@amp.co.nz**.

### Proof of identity – please complete one

**Option 1** ONE document from this section:

|  |   |
|--|---|
| <input type="checkbox"/> NZ passport (identity page)       | <input type="checkbox"/> NZ firearms licence        |
| <input type="checkbox"/> Overseas passport (identity page) | <input type="checkbox"/> NZ certificate of identity |

OR;

**Option 2**  NZ driver's licence **PLUS** (ONE of the of the documents from this section):

|  |  |
|--|--|
| <input type="checkbox"/> Super Gold card   | <input type="checkbox"/> NZ full birth certificate/birth certificate issued by foreign government              |
| <input type="checkbox"/> NZ citizenship certificate/citizenship certificate issued by foreign government | <input type="checkbox"/> Bank statement or Inland Revenue statement issued in your name in the last six months |

OR;

**Option 3**  18+ identity or Kiwi Access card **PLUS** (ONE of the documents from this section):

|   |  |
|---|--|
| <input type="checkbox"/> NZ full birth certificate/birth certificate issued by foreign government | <input type="checkbox"/> NZ citizenship certificate/citizenship certificate issued by foreign government |
|---|--|

**IMPORTANT: Please provide a certified copy of your identity documents. These copies must have been certified within the last three months.**

### Proof of address

Please provide one of the documents below as proof of your **residential address**. The document must be **addressed to you**, and dated within the **last six months**.

- letter or invoice from utility company (eg. electricity, gas, phone, Sky TV)
- bank statement
- insurance policy or investment portfolio document
- current rental tenancy agreement
- letter from government agency (e.g. Inland Revenue, rates bill, vehicle registration)

**Statutory declaration is on the following page.**

**(e) Statutory declaration**

This page must be completed in front of an authorised person who will witness the declaration and certify your documents.

Who can witness me making the declaration and certify my documents?

**In New Zealand**

- Justice of the Peace  
visit [justiceofthepeace.org.nz](http://justiceofthepeace.org.nz) or Yellow Pages [yellow.co.nz](http://yellow.co.nz) to find one near you
- New Zealand solicitor
- Notary public
- Registry of Deputy Registrar of the High Court or of any District Court

**In a Commonwealth country**

- Judge
- Commissioner of Oaths
- Notary public
- Justice of the Peace
- Any person authorised by the law of that country to administer an oath there for the purpose of a judicial proceeding
- Commonwealth representative

**In a non-Commonwealth country**

- Commonwealth representative
- Judge
- Notary public

I (full name of member)

B L O C K L E T T E R S

of (address)

B L O C K L E T T E R S

B L O C K L E T T E R S

Occupation

B L O C K L E T T E R S

solemnly and sincerely declare that all the information provided in or with this application is true and correct and that:

- I have permanently emigrated from New Zealand over one year ago and am applying to withdraw my savings less Government contributions, from the AMP KiwiSaver Scheme.
- I am currently living in .
- I confirm that any payment relating to my membership in the AMP KiwiSaver Scheme, will not be reinvested in New Zealand.
- I certify that all the information I have supplied in this application (and any attachments to this application) is true and correct.
- I understand that acceptance of this application is at the discretion of AMP and that fees may apply.
- I understand that AMP or the Supervisor may request additional information from me relating to this application.
- I acknowledge that I have rights of access to, and correction of, the information held by AMP or the Supervisor of the AMP KiwiSaver Scheme subject to the provisions of the Privacy Act 1993 and amending legislation. I understand that the information supplied by me with this application and any other information provided in connection with my membership or my account, either by me, my employer, the Inland Revenue or any other party, will be used by AMP and the Administration Manager and/or any parties related to them to verify my identity, process this application and to administer my membership, and to operate, the AMP KiwiSaver Scheme and may be disclosed for these purposes to other parties where relevant, including the Supervisor, the Financial Markets Authority, the Inland Revenue, my employer, an adviser or other intermediary or to any other party as required. I also understand that these parties may share and disclose information to each other and any other parties for the purpose of administering my membership, and to operate, the AMP KiwiSaver Scheme. The information may also be used by AMP or third parties to offer me other products or services made available by the AMP group, and for market research purposes. I can access and if required correct my personal information by contacting AMP. I authorise AMP and/or the Supervisor to obtain additional information in relation to this application from any third party/entity.
- I understand that if this application is approved by the Manager and a full payment of the Member's Accumulation (as defined in the Act), less the Government contributions, is made to me or transferred to an approved foreign superannuation scheme, my membership of the AMP KiwiSaver Scheme will end.
- I confirm that I am not an undischarged bankrupt or incapable of managing my financial affairs and that I am properly entitled to any payment made pursuant to this application and that no other person has any claim against it.
- I indemnify the Supervisor, AMP and any of their related companies against all claims, actions, demands, proceedings, costs or expenses, damages or liability arising and discharge them from any liability in respect of my membership of the AMP KiwiSaver Scheme and/or any withdrawal payment made (or transferred to a foreign superannuation scheme).

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

**Member's signature**

SIGN HERE

Declared at

PLACE

**Before me, authorised person to take a statutory declaration (refer to the above list):**

Full name, title/office of person taking declaration

of city (where signing)

Occupation

I have sighted, **initialled and dated** today the original of each document listed below, verifying the identity and address of the person named in section (a) of this form. I confirm that the documents attached to this statement are true copies of those documents and that the documents provided represent the identity of the person named in section (a) of this form.

Documents to be certified:  Identification (section d)  Proof of address (section d)  Bank statement (section b)

I am not related to and do not live at the same address as the person named in section (a) of this form.

**Signature of person authorised to take declaration**

SIGN HERE

Date

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