

PERMANENT EMIGRATION BENEFIT PAYMENT REQUEST

Please read this section before you start completing this form.

If you permanently emigrate from New Zealand, you may apply to the Trustee to transfer your total account balances to an overseas superannuation scheme. Alternatively, you may apply to withdraw your total account balances 12 months after the date of your permanent emigration. You are required to provide evidence of your permanent emigration to the Trustee.

Member to complete Steps 1 to 6 (please use BLOCK letters).

Step 1. Complete yo	ur personal details	
Mr Mrs Ms	Miss Other (please specify)
Surname/family name		Given names
Home/private address:		
Number Street Name		
Suburb	City	Postcode
Work phone		Home phone
Mobile		E-mail*
MoE number		Date of birth
School employed at		School number
annual report) electronically.		enting to receiving information about the Scheme (including the information electronically, or should my email address change, inistration manager.

MoE number		
Step 2. Mem	ber to complete A <u>or</u> B	
A. Request for tr	ansfer of funds	
		I wish to transfer my total account balance to an overseas
	tion scheme (as approved by the Secreta verseas superannuation scheme:	ry for Education) and exit the Scheme.
Scheme nam	•	Scheme email
Scheme pos	tal address:	
Number St	reet Name	
Suburb	City	Postcode
Guburb	City	T GStoods
State		Country
Scheme pho	ne number	Your membership/customer number
· ·	igrating to Australia, please also provide the	
Australian bu	siness number (ABN)	Superannuation product identification number (SPIN)
Important: T	ne superannuation scheme to which you wish	n to transfer your total account balance must be approved by
the Secretary		e trustees of your new superannuation scheme to ensure they
OR	ing transfer prior to submitting this request.	
B. Request for w	ithdrawal of funds	
		w Zealand and have been overseas for a period of
	or more and wish to withdraw my total ac ed deposit slip or copy of a bank statemo	count balance and exit the Scheme. I <u>attach</u> a ent print out.
I have resid	ed at the following overseas address for	the period shown below.
Number	Street Name	
Suburb	City	Postcode
State		Country
From:		To: / / / / / / / / / / / / / / / / / / /
Step 3. Conf	irmation of your identity and res	idential address
	Anti-Money Laundering and Countering Fina	ion of your identity and residential address. This information is ancing of Terrorism Act. We cannot make any benefit payment
For details of what	t is required, including completing the Confirm	mation of identity and residential address form (Form 11), refer section of the Scheme website, www.teachersretire.org.nz.
		deticit of the continue washing, www.cacherororginz.
Please tick one:		document of the domains we parts, www.icadonerorori.ci.org.in2.
I have previou	usly provided confirmation of my identity and	
I have previou	the completed Confirmation of identity and r	

loE number
Step 4. Member to provide supporting documentation
Evidence of permanent emigration
Please provide the following documentation with this application:
Proof of departure from New Zealand (e.g. plane ticket, copy of passport showing entry stamp or other travel documents), and
Proof that you have lived at an overseas address (e.g. utility bill, bank statement, rental agreement etc) at some time during the year after your departure from New Zealand, and
Proof of your visa for living in another country, if applicable (i.e. a photocopy of the visa), and
If you have requested a withdrawal of your total account balance under Step 2B and evidence you are supplying indicates you have temporarily returned to New Zealand since permanently emigrating (e.g. for a holiday), please indicate the reasons for the return, on the document.
Important: Supporting evidence must be sighted, and this form must be signed, by a person authorised to take a statutory declaration. (Refer to Step 5 for a list of people authorised to take a statutory declaration.)
Charles Manakan ta annual ata tha atautu ta mual a lamatian in fuant af an tha aireal na man
Step 5. Member to complete the statutory declaration in front of authorised person
Complete the statutory declaration Please complete this section in front of a person authorised to take a statutory declaration (being one of the persons listed below).
i) A declaration made in a Commonwealth country outside New Zealand may be made before a notary public, a Justice of the Peace, a Judge, a Commissioner of Oaths or any other person authorised by the law of that country to administer an oath for the purpose of a judicial proceeding, or before a Commonwealth representative, or before a solicitor of the High Court of New Zealand.
ii) A declaration made in a country other than a Commonwealth country shall be made before a Commonwealth representative, a notary public, a Judge or a solicitor of the High Court of New Zealand.
I,(Full name),
of(Address),
and(Occupation).
request a (tick one): transfer OR withdrawal of my total account balance due to permanent emigration. I understand that payment of any benefit is at the discretion of the Trustee.
I solemnly and sincerely declare that I permanently emigrated from New Zealand on this day of
(month), 20 (year).
and that all the information I have provided in this form regarding my application 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.
Member's signature
Declared at (Location),
this (day) of (month) 20 (year).
Before me:
Name(A Justice of the Peace or other person authorised to take a statutory declaration)
Occupation:

MoE number
BEFORE YOU RETURN THIS FORM
Have you checked you have completed the form correctly?
Have you attached a bank-encoded deposit slip (if relevant)?
Have you attached evidence of your permanent emigration and has this been sighted by an authorised person?
Have you attached documents confirming your identity and your address and have these been correctly certified (if applicable)?
Have you correctly completed the statutory declaration section?
Has the statutory declaration been witnessed by an authorised person?
Step 6. Return instructions
Member to retain a copy of this form. Member to send the original to Teachers' scheme Administrator, Mercer (N.Z.) Limited, PO Box 1849, Wellington 6140 or by email to nztrsserp@mercer.com.