

3. Authorisation and Acknowledgement - Cook Islands National Superannuation Fund transfer to KiwiSaver Scheme or Complying Superannuation Scheme acknowledgement

Please arrange for the transfer of funds from my Cook Islands National Superannuation Fund scheme to the KiwiSaver Scheme or Complying Superannuation Scheme set out in Part 2 of this Authority Form. I understand that this application is subject to the approval of the provider of the KiwiSaver Scheme or Complying Superannuation Scheme and the office of the Cook Islands National Superannuation Fund.

I authorise the KiwiSaver Scheme or Complying Superannuation Scheme provider to act on my behalf if required for the purpose of actioning the transfer. This includes obtaining documents and other information from the Cook Islands National Superannuation Fund as required to complete the transfer.

I have / will provide the KiwiSaver Scheme or Complying Superannuation Scheme provider with any information it may require to complete the transfer. I understand that any information I give to the Cook Islands National Superannuation Fund may be passed on to my KiwiSaver Scheme or Complying Superannuation Scheme provider as reasonably required and I authorise the Cook Islands National Superannuation Fund to give such information in relation to this transfer as requested by my chosen KiwiSaver Scheme or Complying Superannuation Scheme provider. This information may also be provided to the Supervisor and related entities of the KiwiSaver Scheme or Complying Superannuation Scheme provider (and those who provide services to those entities).

I acknowledge that there may be tax consequences when transferring my Cook Islands National Superannuation Fund scheme to the KiwiSaver Scheme or Complying Superannuation Scheme, and that I am liable for any such tax consequences.

I acknowledge that the KiwiSaver Scheme or Complying Superannuation Scheme provider has recommended that I seek independent and professional Cook Islands and New Zealand tax and financial advice regarding my circumstances in relation to the proposed transfer.

I am a New Zealand citizen and entitled to live in New Zealand indefinitely and I am below the age of eligibility for NZ Super (currently 65) and I have permanently emigrated from Cook Islands to New Zealand and do not intend to return to Cook Islands to live.

I do not intend to transfer to another KiwiSaver scheme or Complying Superannuation Scheme before the transfer of my savings from the Cook Islands National Superannuation Fund takes place.

I understand that once my Cook Islands National Superannuation Fund funds have been transferred to the KiwiSaver Scheme or Complying Superannuation Scheme they will become subject to the rules and regulations governing the KiwiSaver Scheme or Complying Superannuation Scheme.

I understand that the savings in my KiwiSaver Scheme or Complying Superannuation Scheme that are transferred from the Cook Islands National Superannuation Fund may be accessed at age 65 or after 5 years membership, whichever is the later..

I understand that following a transfer of my Cook Islands National Superannuation Fund scheme funds to the KiwiSaver Scheme or Complying Superannuation Scheme I will not be able to transfer them to a third country (being a country other than New Zealand or Australia).

I understand that the bank fees incurred for the transfer of funds from the Cook Islands National Superannuation Fund to my selected KiwiSaver Scheme or Complying Superannuation Scheme will be met from my Cook Islands National Superannuation Fund funds.

Signature

Date

DD / MM / YYYY

4. Checklist

THE FOLLOWING DOCUMENTATION MUST BE SUBMITTED AFTER COMPLETING YOUR 6 MONTH WAITING PERIOD. THE 6 MONTH PERIOD STARTS AFTER YOUR DEPARTURE FROM THE COOK ISLANDS.

- FULLY COMPLETE AND SIGNED AUTHORITY TO TRANSFER FORM
- ATTACH A COPY OF YOUR PASSPORT
- CONFIRMATION OF DEPARTURE (ETicket or IMMIGRATION)
- ATTACH A COPY OF A LETTER FROM YOUR KIWISAVER OR COMPLYING SUPERANNUATION SCHEME PROVIDER with BANK ACCOUNT DETAILS TO TRANSFER YOUR COOK ISLANDS NATIONAL SUPERANNUATION FUND. YOU MUST FIRST COMPLETE A COPY OF AN APPLICATION FORM TO BECOME A MEMBER OF THE KIMISAVER SCHEME OR COMPLYING SUPERANNUATION FUND OF YOUR CHOICE.

Once you have completed this form please post:

Cook Islands National Superannuation Fund
PO Box 3076
Avarua
Rarotonga
Cook Islands

Email: enquiry@superfund.gov.ck