

SIGNIFICANT FINANCIAL HARDSHIP WITHDRAWAL REQUEST FORM

Use this form to apply to withdraw some of your savings in FireSuper on the grounds of significant financial hardship.

FireSuper's Trust Deed allows you to make a withdrawal if, in the opinion of the Trustee, you are suffering or are likely to suffer from significant financial hardship.

What is significant financial hardship?

Significant financial hardship refers to essential life issues like not being able to afford to feed your family or to get proper medical attention for a serious illness. It is important to note that the significant hardship benefit does not cover serious illness unless it causes significant financial hardship.

It does not cover more lifestyle-based choices such as making car repayments.

Important information

Significant financial hardship withdrawals may not cover fines, IRD or WINZ repayments as regular payment plans can usually be arranged.

The Trustee strongly recommends that you consult a budget adviser before you make your application. Your local Citizens Advice Bureau (CAB) can help you find a budgeting service that suits your situation and offers a free service in some areas. To contact the CAB, call 0800 367 222.

The Trustee also highlights that Fire and Emergency New Zealand provides access to a suite of resources (<https://portal.fireandemergency.nz/how-do-i/safety-health-and-wellbeing/seek-wellbeing-support/>), while, where applicable, support may also be available through the New Zealand Firefighters Welfare Society (<https://firefighters.org.nz/membership-support/welfare-support/>).

The Trustee must be reasonably satisfied that you have investigated and exhausted all other reasonable alternative sources of funding.

The omission of any required documents to support your application or an incomplete form may result in your application being returned to you, delayed or declined. See the document checklist on the last page. The documents must be provided at the same time your application is made to the Trustee.

Before you can make a withdrawal, the Trustee must be reasonably satisfied that you are suffering or are likely to suffer from significant financial hardship. You will also need to demonstrate that you have investigated and exhausted reasonable alternative options.

How much can I withdraw?

The Trustee may direct that the amount withdrawn be limited to a specified amount that, in the opinion of the Trustee, is required to alleviate the particular hardship. The withdrawal must be no more than your Accumulation (excluding any government contributions amount).

Is there a fee for applying for a significant financial hardship benefit?

There is a \$675 fee (charged to your account), which will be waived in the case of a successful application.

Please select one or more of the problems listed below which best describe your circumstances.

- ☐ Not able to meet minimum living expenses
- ☐ Not able to meet mortgage repayments on your family home, resulting in your mortgage provider seeking to put your home up for sale
- ☐ Modifying a home to meet special needs arising from you or a dependant having a disability
- ☐ Paying for medical treatment in the case of you or a dependant becoming ill, suffering an injury or requiring palliative care
- ☐ Incurring funeral costs in the case of a dependant's death
- ☐ Incurring costs as a result of a serious illness
- ☐ Incurring costs as a result of significant unforeseen events (such as a natural disaster or pandemic illness)

It is important to note that you may qualify under the specified financial hardship category for costs incurred as a result of a natural disaster or pandemic illness, in which case you should complete a specified financial hardship withdrawal request form.

Your details

Name: Title: Mr / Mrs / Ms / Miss
Surname *Given Names* *(Please circle one)*

Home address:

Member no:..... IRD No: Date of birth: ____ / ____ / ____

Email address:

(As you may be contacted by email, you must advise an email address that is confidential and cannot be accessed by anyone other than you. If you do not have a confidential email address, please leave this blank.)

KiwiSaver

Are you a member of a KiwiSaver scheme (excluding the Complying Fund Section of FireSuper)? ☐ Yes ☐ No

If yes, please advise:

- current fund value
and
- ☐ I am or ☐ I am not applying to withdraw funds from my KiwiSaver scheme.

Payment details

Please note we only make payments in New Zealand dollars to a New Zealand bank account held in your name or jointly in your name (i.e. not a trust account). The Trustee also reserves the right to make payments directly to your creditor(s).

How much money do you wish to withdraw?

☐ The maximum amount available;

or

☐ \$

is to be credited to my bank account (a bank encoded deposit slip or copy of a bank statement printout is attached).

Financial situation

Your spouse/partner is (please tick where appropriate):

☐ Employed ☐ Self-employed ☐ Unemployed

Have you or your partner recently received or become entitled to (in the last 3 months):

☐ A redundancy package ☐ An ACC lump sum
☐ Redundancy insurance ☐ Income replacement insurance
☐ Mortgage repayment insurance

If you have ticked any of the above, please give details of how much/when paid/expected:

Dependants

How many financial dependants (i.e. how many children or other dependants) do you have? _____

Please list the full names of all financial dependants, together with your relationship to them and their current age:

Dependant's full name	Relationship	Current age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Purpose of your hardship withdrawal application

If you need more space, please list details on a separate piece of paper and attach it to this form.

Provide a full and complete explanation of how you reached your current financial position (e.g. your partner has been made redundant, you have experienced a reduction in income, you have incurred unexpected expenses or medical costs).

Actions taken

The Trustee must be reasonably satisfied that reasonable alternative sources of funding have been explored and have been exhausted. The Trustee also recommends that you consult a budgeting service and include their advice with your application.

What actions have you taken to try and resolve the situation? (e.g. refinancing, topping-up existing borrowing, approaching creditors with a repayment plan or contacting WINZ)

Consequences of application being declined

What are the implications for you should this application not be approved?

What will you use the funds for?

State precisely how you plan to use your funds if this application is approved (e.g. pay bills that are in arrears, cover funeral cost for a dependant, cover a deficit between income and expenses).

You must set out in detail how you will use any funds; provide clear documentary evidence to support the amounts you are claiming (e.g. bills, statements, written quotations); the total amounts below must be the same as the amount you are claiming under the 'Payment Details' section of this form.

Commitments to be paid

	\$
	\$
	\$
Total	\$

Personal or household financial position

Please complete all sections including details of arrears. Please ensure that all jointly-owned liabilities, assets and partner details are included in this statement of personal financial position. If you need more space, please list details on a separate piece of paper and attach it to this form.

For any outstanding loans, credit cards, hire purchase and other debt, you must provide documents such as statements or letters showing the total outstanding amounts, any arrears, details of any regular repayments and the term of the loan. Additional documents, such as bills or demands for payment will also be required as supporting evidence. Please attach copies of the last two months' bank and credit card statements.

Money that you owe

Money Owed on Mortgages			
Name of Organisation/Bank	Credit Limit (\$)	Interest Rate (%)	Current Balance (\$)
Total: \$			

Overdrafts/Bank Personal Loans			
Name of Organisation/Bank	Credit Limit (\$)	Interest Rate (%)	Current Balance (\$)
Total Monthly Payment(s): \$			

Credit and Store Cards Held			
Name of Organisation/Bank	Credit Limit (\$)	Interest Rate (%)	Current Balance (\$)
Total Monthly Payment(s): \$			

Other Debt/Hire Purchases		
(Please provide an up to date statement as evidence for each amount of arrears)		
Name of Organisation/Bank	Credit Limit (\$)	Current Balance (\$)
Total Monthly Payment(s): \$		

Total Liabilities	\$
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Things that you own

Real Estate Property(ies) Owned		
Property address(es)		
Reg'd/Govt Valuation (\$)	Valuation date	Est. Market value (\$)
	/ /	
	/ /	

Bank Accounts and Cash Investments	
Deposit Held	Current Balance (\$)

Superannuation/Managed Funds	
Name of Company	Current Value (\$)

Vehicles	
Type, Make and Year	Est. Market Value (\$)

Other Assets	
Type	Est. Market Value (\$)

Total Assets	\$
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Personal or household financial position – continued

Please complete all sections including details of arrears – these details should reflect your family's personal financial circumstances. Please ensure that details of all your and your partner's income and expenditure are included. **ALL AMOUNTS MUST BE STATED AS CALENDAR MONTHLY AMOUNTS.**

(To convert net fortnightly income to net monthly income, multiply by 2.166).

Income

Sources of Income	Net Monthly Income
My Salary/Wages	\$
Partner's Salary/Wages/Benefit	\$
My Commission Income	\$
Partner's Commission Income	\$
Rental or Board Income (you and/or your partner)	\$
Business Income (you and/or your partner)	\$
Other (interest, dividends etc.)	\$
TOTAL NET MONTHLY INCOME	\$

Living costs and expenditure

Living costs and expenditure	Monthly Expenses
Food	\$
Clothing	\$
Transport (Public and Private)	\$
Utilities (Power, Gas, Phone(s))	\$
Medical Expenses	\$
Education	\$
Entertainment	\$
Holidays	\$
Mortgage and Loan Repayments	\$
Rates and House Insurance	\$
Rent or Board Payments	\$
Personal Insurances (Life, Medical)	\$
Personal Retirement Savings	\$
Credit Card/Store Card Payments	\$
Childcare/Support/Maintenance (for persons not living with you)	\$
Other (please specify)	\$
TOTAL MONTHLY LIVING COSTS AND EXPENDITURE	\$
MONTHLY SURPLUS/(DEFICIT)	\$
(Total Net Monthly Income less Total Monthly Living Costs and Expenditure)	

Independent review

Independent review and financial consultation (recommended). Please provide a copy of any budget advice received.

Privacy statement

I understand that by completing this application form I will be providing personal information about me which will be held securely by the Trustee of FireSuper. I have the right to access and correct this information subject to the provisions of the Privacy Act 2020.

Statutory declaration

I, _____ of _____
FULL NAME OF APPLICANT CITY OCCUPATION

solemnly and sincerely declare that the information I have provided in FireSuper Significant Financial Hardship Withdrawal Request Form 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.

Applicant's signature _____ Date _____
DAY/MONTH/YEAR

Declared at _____
PLACE

Before me (JP, solicitor, notary public or person authorised to take a statutory declaration):

Full name _____

Address and occupation _____

Signature _____ Date _____
DAY/MONTH/YEAR

Checklist of documentation required from you and (if applicable) your partner – please tick

- ☐ Own home – evidence of regular minimum mortgage payments/letter confirming amount of arrears
- ☐ Rental home – copy of rental/tenancy agreement/letter confirming amount of arrears
- ☐ Statements covering two months and dated no earlier than one month before the date of this application showing current balance/regular minimum payment and current arrears of all:
 - ☐ Bank accounts (all cheque and savings accounts for you and your partner)
 - ☐ Credit and store cards
 - ☐ Home loans
 - ☐ Rents
 - ☐ Fines
 - ☐ Finance company loans
 - ☐ Personal loans
 - ☐ Household bills
 - ☐ Other overdue accounts
- ☐ Evidence of WINZ or other assistance
- ☐ Copy of any budgetary advice received
- ☐ Copy of the last two months' pay slips for you and (if employed) your partner, or IRD summary of earnings or accountant's estimate if your partner is self-employed
- ☐ Builder's report for home modification
- ☐ Medical report
- ☐ Court order (for divorce/separation/Family Court orders)
- ☐ Where bankruptcy is imminent, evidence that steps to declare you or your partner bankrupt have been or will be taken
- ☐ A bank encoded deposit slip or copy of a bank statement printout
- ☐ Any other documents which you may think would be helpful for the Trustee when considering your application (please specify): _____

Important: Before sending us your application, please check:

- ☐ Have you checked this application and ensured it has been completed in full?
- ☐ Have you and your witness signed the statutory declaration?
- ☐ Have all the required supporting documents and information (including budget advice) been attached where asked?
- ☐ Have all documents not on a recognised company letterhead been certified by a JP or solicitor or person authorised to take a statutory declaration?

Please return the completed form and all supporting documents to:

The Administrator

FireSuper

PO Box 1849

Wellington 6140

Or by email to nzfire.super@mercerc.com