

### 3. Change of member details

To the trustee of UniSaver New Zealand

Please use **BLOCK LETTERS** and read the whole form before you start completing it. Use this form to update your member details, including changing your regular contributions. To make a lump sum contribution, please use form 5 'Lump sum contribution' form. **Complete Part A only.** Your employer will complete Part B.

#### PART A

Mr/Mrs/Miss/Ms/Dr/Assoc Prof/Prof.....  
 Circle one Surname Given names

Residential address .....Postcode.....

Work phone.....Home phone.....Mobile.....

Email\*.....Date of birth.....

Membership number.....IRD number (Locked members only #).....

\* By providing your email address you are consenting to receiving information about UniSaver (including the annual report) electronically. Should you no longer wish to receive such information electronically, or should your email address change, you undertake to advise UniSaver's administration manager by updating your personal details on unisaver.co.nz.

# Inland Revenue requires us to hold IRD numbers for Locked members.

**Complete the appropriate section(s). Note that payroll will advise you of the date your changes will take effect.**

#### 1. Application to change membership category

I am currently a Category A member and wish to become a Category B member.

**OR**

I am currently a Category B member. I confirm that my employer is not contributing to another superannuation scheme on my behalf (other than a KiwiSaver scheme) and I wish to become a Category A member.  
 I acknowledge that my employer's contribution on my behalf may be adjusted if I belong to a KiwiSaver scheme.<sup>1</sup>

**OR**

I wish to apply to become a Locked member. (Please make sure you have provided your IRD number above.)

I confirm that I have read and understood the terms and conditions of Locked section membership as set out in UniSaver's product disclosure statement. In particular, I understand that:

- if I am or become a member of a KiwiSaver scheme, any compulsory employer contributions will be paid into my Employer Locked Account first and the balance, if any, paid into my KiwiSaver scheme and that if I do not agree with this, compulsory employer contributions will be paid to my KiwiSaver scheme first and any compulsory employer contributions to UniSaver will be reduced accordingly
- generally I will not be permitted to access my savings in my locked accounts until the later of the date I attain New Zealand Superannuation age (currently 65) or complete five years of Locked section, complying superannuation fund or KiwiSaver scheme membership.

Refer to section 2 for details of the minimum contribution rate applicable to each membership category.

#### 2. Application to change contribution rate (subject to the minimum contribution rates shown below)

Subject to the minimum contribution rates for my membership category, I wish to change my contribution rate as follows:

**Member contributions to:**

Member Locked Account	As a % of salary.....(minimum 3% of salary)
<b>plus</b>	
Member Standard Account	As a % of salary.....(multiples of 0.5% only – minimum of 3% of salary)
Total member contributions	As a % of salary.....(if not contributing to Locked section)

<sup>1</sup> You are a **Category A member** if your employer contributes to UniSaver on your behalf and a **Category B member** if your employer does not contribute to UniSaver on your behalf. You may be eligible for KiwiSaver-style compulsory employer contributions of 3% of your salary if you are a member of the Locked section of UniSaver.

### 3. Stopping contributions

- Members who joined UniSaver before 1 July 2007 who are not Locked members:  
I wish to cease contributions to UniSaver with effect from (dd/mm/yy).....
- Members who joined UniSaver on or after 1 July 2007 and Locked members who wish to cease **all** contributions:  
I wish to apply to take a contributions holiday for the following period..... months/years (delete one)  
commencing from (dd/mm/yy).....
- Locked members who wish to divert contributions from their Locked Accounts to their Member Standard and Employer Standard Accounts:  
I wish to take a contributions holiday for the following period..... months/years (delete one) commencing from (dd/mm/yy)..... and have contributions previously paid into my Locked Accounts diverted to my Member Standard and Employer Standard Accounts.

I understand that:

- if I am a Category A member and I stop all contributions to UniSaver, my membership category will automatically change to Category B
- any contributions holiday may be for a period of between 3 months and 5 years and that I may take successive contributions holidays.

### 4. Re-commencement of contributions

- Members who joined UniSaver before 1 July 2007 who are not Locked members:  
I wish to recommence contributing to UniSaver with effect from (dd/mm/yy)..... at a rate of.....% of salary
- Locked members and members who joined UniSaver on or after 1 July 2007:  
My contributions holiday period has expired and I wish to re-commence contributions to UniSaver with effect from (dd/mm/yy)..... at a rate of.....% of salary.

If you were a Category A member prior to ceasing contributions, your membership category will not be changed back to Category A unless a letter of agreement from your employer is attached.

### 5. Commencing leave of absence

I wish to take leave of absence from (dd/mm/yy)..... My reason for taking leave of absence is as follows:  
.....

- I wish to continue contributing to UniSaver during my leave of absence.  
I understand that:
- the rate and frequency of my contributions during my leave of absence may not exceed the rate and frequency of my contributions immediately prior to my going on leave of absence, and
  - I may not contribute more to my Member Locked Account than the amount required to bring my annual contribution to that account to \$1,042.86 so that I qualify for the maximum member tax credit.

**OR**

- I do not wish to continue contributing to UniSaver during my leave of absence. I have applied for a contributions holiday by completing section 3.

Your employer will confirm what portion of your leave of absence (if any) will qualify as service for the purposes of the leaving service benefit.

### 6. Return from leave of absence

I will be returning from leave of absence effective (dd/mm/yy).....

### 7. Change of name

My new name is.....

Please enclose evidence of change, e.g. passport or marriage certificate.

**8. Other change (indicate as necessary)**

.....

My signature below authorises the:

- changes shown in this form and, if applicable,
- deductions shown in sections 2 and 4 of this form from my salary.

Signed by the member..... Date.....

**PART B Employer use only**

Is any period of leave of absence requested in section 5 deemed to be service in terms of UniSaver's trust deed?

- Yes
  - full period, or
  - part period of.....

**OR**

- No

Employer subsidy to KiwiSaver scheme As a % of salary .....

Employer contributions to Employer Locked Account As a % of salary .....

Signed..... Date.....

(Authorised officer of the employer)

- Retain a copy of this form for your file.
- Send the original to:  
 UniSaver New Zealand  
 c/o Mercer (N.Z.) Limited  
 PO Box 1849  
 Wellington 6140