

Application for withdrawal – death benefit

Where probate of will or letters of administration granted

Aon Master Trust

Use this form to apply for a withdrawal of a death benefit where probate of will or letters of administration have been granted. If probate of will or letters of administration has not been and will not be applied for, please call 0800 266 268 or email amt@linkmarketservices.com.

Section A: Deceased member's personal details

IRD number -- Member number AON

Date of birth //

Title: Mr Mrs Miss Ms Other

First name(s) Surname

Postal address Postcode

Section B: Details of personal representative

Title: Mr Mrs Miss Ms Other

Given name(s) Surname

Postal address Postcode

Direct phone Mobile

Email

Note: If there is more than one applicant please complete the above details for each additional applicant on a separate piece of paper and attach to this application.

Section C: Withdrawal request

I apply for payment of the death benefit for the above named member. Please attach a pre-printed bank deposit slip or bank statement showing the bank account you would like the funds deposited into. Payment will only be made in New Zealand dollars to a New Zealand bank account.

Bank account name

Bank account number

Section D: Privacy

The information you are providing in this form, and in respect of any documents relating to it, is being collected for the main purpose of effectively administering and managing the member's Aon Master Trust account in compliance with all relevant law. If you do not provide us with the personal information, we may not be able to process or may refuse your application. The information may be used by, and disclosed to, the Trustee, your employer, the Administration Manager, Administrator, any insurer, or other entity involved in the administration and management of the Scheme (including Inland Revenue and any regulatory body) and other Aon Group Members.

You agree that this information may be collected, held and disclosed for these purposes and in the manner stated. The information is being collected by the Trustee (Superannuation Management Nominees Limited) whose address is Level 16, AMP Centre, 29 Customs Street West, Auckland and will be held by Link Market Services Limited at Level 11, Deloitte Centre, 80 Queen Street, Auckland.

Section E: Your acknowledgement

1. I am entitled to make this claim and all information provided in this application and the attached documents (if any) is true and correct.
2. I will apply the proceeds from the withdrawal in the course of the administration of the deceased member's estate as the law requires.
3. I understand that the value of the withdrawal may be based on the unit price(s) at the date my request is processed and that fees, taxes and expenses may be deducted.
4. I understand that by completing this form I will be providing personal information about me which will be held in accordance with Section D above. I have the right to access and correct this information subject to the provisions of the Privacy Act 2020.

Signature

Date / /

Checklist

I have:

- completed all sections of the form
- signed and dated section E

I attach:

- a pre-printed bank deposit slip or bank statement showing the account name and number into which payment is requested to be made.
- a certified copy of the Death Certificate
- a certified copy of probate or letters of administration

Please return the completed form and documentation by email to amt@linkmarketservices.com, or post to:

Aon Master Trust, PO Box 332, Shortland St, Auckland 1140

If you have any questions about completing this form, please call 0800 266 268 or email amt@linkmarketservices.com.