

Application for Withdrawal - Death Benefit

(Where Probate of Will or Letters of Administration granted)

Lifetime 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 have not been and will not be applied for, please call **0800 266 268** or email **lifetime@linkmarketservices.com**.

Section A: Deceased member's personal details		
Name of employer		
IRD number	Member number	
Date of birth / / /		
Title: □ Mr □ Mrs □ Miss □ Ms Other		
First name(s)	Surname	
Postal address	Postcode Postcode	
Section B: Details of personal representative		
Title: □ Mr □ Mrs □ Miss □ Ms Other		
Given name(s)	Surname	
Postal address	Postcode 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 name signed letter from your bank, showing the bank account deanly be made in New Zealand dollars and into a New Zealand		
Bank account name		
Bank account number		

Section D: Privacy

The personal information you are providing in this form (or in connection with this form), is being collected for the main purpose of effectively administering and managing your Lifetime Master Trust account in compliance with all relevant law. If you do not provide us with your personal information, we may not be able to process or may refuse your contribution or withdrawal. The information may also be used for the purpose of verifying your identity electronically or providing you with information about products and services we think might be of interest to you (including from our parent company Lifetime Asset Management Limited). The information may be used by, and disclosed to the Manager and Trustee (Lifetime Trustee Limited), the Administration Manager, or other entity involved in the administration and management of the Lifetime Master Trust (including Inland Revenue and any regulatory body) or your financial adviser. The information you provide may also be used by external agencies appointed by us for the purposes of verifying your identity.

You agree that this information may be collected, held and disclosed for these purposes. The information is being collected by the Manager (Lifetime Trustee Limited), whose address is **Lifetime Master Trust**, **PO Box 91976**, **Victoria Street West**, **Auckland 1142**, and will be held by Link Market Services Limited who you can contact at **PO Box 91976**, **Victoria Street West**, **Auckland 1142**. You can request access to your personal information and can ask that it is updated by calling **0800 266 268**.

Section E: Your acknowedgement

- 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 update this information subject to the provisions of the Privacy Act 2020.

Signature	Date / / / / / / / / / / / / / / / / / / /
Checklist	
I have:	
\square completed all sections of the form.	
\square signed and dated section E.	
l attach a:	
 copy of a bank statement or a signed letter from my ban payment is requested to be made. 	nk, showing the account name and number into which
\square certified copy of the Death Certificate.	
□ certified copy of Probate of Will or Letters of Administra	ation.

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

Lifetime Master Trust, PO Box 91976, Victoria Street West, Auckland 1142.

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