

Retirement Lump Sum application information

(Issued under sections 27, 149, 150, 151 and 213 of the Veterans' Support Act 2014)

Please read before you complete this form

This application form is for veterans **reaching** the New Zealand Superannuation qualification age and who have been in receipt of Weekly Income Compensation over a 10-year period. The Retirement Lump Sum recognises the veteran's reduced opportunity to save for retirement.

To apply, you must complete this application form and provide any supporting information or evidence required by Veterans' Affairs (VA).

If your application is incomplete it will be returned to you unprocessed.

Further information can be found in the Retirement Lump Sum factsheet on our website.

Entitlement

(section 149,
Veterans' Support
Act 2014)

A veteran, on reaching the New Zealand Superannuation qualification age is entitled to a Retirement Lump Sum if, before reaching that age, the veteran received, over a 10 year period, continuous or otherwise either:

- (i) Weekly Income Compensation including the Veteran's Pension (under 65), War Veteran's Allowance, War Service Pension and Economic Pension payable under the War Pensions Act 1954 or
- (ii) Weekly Income Compensation under Scheme One of the Veterans' Support Act 2014, or
- (iii) Weekly Compensation under Scheme Two of the Veterans' Support Act 2014.

A veteran must reach the New Zealand Superannuation qualification age **on or after** the commencement of the Veterans' Support Act 2014 (7th December 2014) to be entitled to the Retirement Lump Sum.

Asset Assessment

(section 150,
Veterans' Support
Act 2014,
regulations 35-39,
Veterans' Support
Regulations 2014)

A veteran who applies for a Retirement Lump Sum must also apply for an asset assessment using this form. VA will arrange for an asset assessment to be conducted as soon as is practicable after receiving an application.

A veteran with non-exempt assets that carry an assessment value in excess of the asset thresholds will not be entitled to receive a Retirement Lump Sum.

Please refer to our website for the current asset threshold rates.

Process for deciding claims

(sections 14 - 16,
Veterans' Support
Act 2014)

VA will make a decision on your claim within **30 working days** of receipt of the application. However, the 30 working days does not include any period while VA is waiting for further information from you that is required to determine the claim.

Offences

(section 270,
Veterans' Support
Act 2014)

It is an offence to make a false statement or provide misleading information to VA. Anyone who does so commits an offence against this section and is liable on conviction to a term of imprisonment not exceeding 3 months or a fine not exceeding \$5,000.

Assistance

If you have any questions or require assistance completing this form, you can contact us using the details shown below or a person from an ex-service organisation:

Freephone 0800 483 8372 / 0800 4 VETERANS (or +64 4 495 2070 if calling from overseas)

You can email: veterans@nzdf.mil.nz or visit our website: www.veteransaffairs.mil.nz

Retirement Lump Sum application information

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Completing your application

This application form must be completed and signed by the veteran or:

- any person requested by the veteran to complete the form (the veteran must complete the Signature & Acknowledgment); or
- the holder of a Power of Attorney or other recognised authority (refer to page 6).

Step 1:

Complete pages 1 - 4; read the Privacy Statement on page 5 and complete the Signature & Acknowledgement on page 6.

If a question is not applicable, please write N/A. If there is insufficient space to answer a question, please include additional sheet/s of paper to complete your answer, including the question or page number it relates to.

Step 2:

Complete the Checklist and Receipt on page 7, then send your fully completed application and all supporting documentation to VA at the address shown.

Identification (if you are not a VA client)

You will be identified by your service number plus **one** of the following documents that must be certified:

- Full Birth Certificate; Current Passport, Drivers Licence or Firearms Licence.

A 'certified' document is an original document that has been photocopied and certified as a true copy by one of the following:

- Work and Income; Justice of the Peace; Solicitor; Police Officer; Registered Medical Professional; Court Registrar; or other people authorised to take statutory declarations.

Retirement Lump Sum application form

Personal Details


1 Work and Income / Client Number (if known)

2 Title (tick) Mr Mrs Miss Ms Dr Other

3 Surname

4 Given Name/s

5 Other Known Name/s

6 Date of Birth / /  Attach a certified copy of your full birth certificate; current passport, drivers licence or firearms licence. (Only if you are NOT a client of VA)

7 Residential Address

Country (if not New Zealand) Post Code

8 Postal Address (if different from residential address)

Country (if not New Zealand) Post Code

9 Other Contact Details

Home Phone Work Phone

Mobile Number Fax Number

E-mail Address

10 Relationship Status Married De facto Widowed Divorced Single

If you are in a relationship please complete your partner's details below

Work and Income / Client Number (if known)

Name Date of Birth / /

Address

Contact Details

Date relationship started

11 Next of Kin details Please provide contact details of a next of kin **not living at your address**

Name

Address

Contact Details

Relationship to veteran

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Bank Details

This will be the account your Retirement Lump Sum payment will be paid into if granted

Name of bank	Branch
Account Name	

Write your bank account number below and attach an original or certified copy of your bank statement showing the account number and name **OR** a pre printed deposit slip stamped by your bank.

Bank				Branch				Account number													
■	/							■ ■	/								■ ■ ■	/			■

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Tax Code Information

The Retirement Lump Sum is intended to be a taxable entitlement. Enter your IR number and tax code information.

IRD Number	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td> </tr> </table>											Tax Code	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40px;"> </td> </tr> </table>	

Attach a signed Tax code declaration IR330 form. These can be downloaded from <http://www.ird.govt.nz>

Entitlement History

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Weekly Income Compensation Received

Record the Weekly Income Compensation entitlements you have received or are receiving:

Entitlement name	Organisation granting entitlement	Commenced		Ended	
		Month	Year	Month	Year
Veteran's Pension (under 65)	MSD				
Weekly Income Compensation under Veterans' Support Act 2014	VA				
Weekly Compensation under Veterans' Support Act 2014	VA				
War Service Pension under War Pensions Act 1954	VA				
Economic Pension under War Pensions Act 1954	VA				
War Veteran's Allowance under War Pensions Act 1954	VA				

Asset Assessment

Assets to be included in the an asset assessment are the assets of the veteran and his or her spouse or partner that would come within the definition of assets in clause 4 of Schedule 27 of the Social Security Act 1964 (if the veteran were a person being means assessed under section 146 of that Act).

An asset is an exempt asset if it would be an exempt asset under:

- (i) Clause 4 of Schedule 27 of the Social Securities Act 1964, or
- (ii) Regulation 10 of the Social Security (Long-term Residential Care) Regulations 2005.

Allowable gifts are also excluded from the assessment if the gift would be or would be treated as an allowable gift under regulations 9 and 9A of the Social Security (Long-term Residential Care) Regulations 2005. The gifting period is to be read as the period of 5 years immediately preceding the date on which the veteran reached New Zealand Superannuation qualification age.

If VA is satisfied that a veteran or his or her spouse or partner has directly or indirectly deprived themselves of any assets (other than exempt or excluded assets), the veteran's assessment may be conducted as if the deprivation has not occurred.

Assets we count include:

- (i) cash or savings
- (ii) bonus bonds
- (iii) investments or shares
- (iv) life insurance policies
- (v) loans made to other people (including family trusts)
- (vi) boats, caravans and campervans
- (vii) investment properties
- (viii) your house and car (depending on whether you have a spouse or partner)

Assets we do not count include:

- (i) pre-paid funeral expenses for you and your partner of up to \$10,000 each, if they are held in a recognised funeral plan.
- (ii) personal belongings such as clothing and jewellery
- (iii) household furniture and effects.

As soon as is practicable after receiving this form, VA will contact you to arrange an asset assessment. The information you provide in this form will be used in the assessment.

15 Threshold Election

If you have a spouse or partner and have completed question 10, please elect which asset threshold you would like to be assessed against:

asset threshold, **excluding** the value of a residential dwelling and a vehicle


asset threshold, **including** the value of a residential dwelling and a vehicle.

If you do not have a spouse or partner you will be assessed against the asset threshold, **including** the value of a residential dwelling and a vehicle.

16 Non-exempt Assets

Give details below of all assets that you and/or your spouse or partner own or have interest in. Please provide the realisable value of the asset. This is the estimated selling price of the asset.

Type of Asset (e.g. Bank account, Property, Car, Insurance policy, Loan)	Description (e.g.. bank & bank account number, vehicle make and model, insurance policy number, term deposit account number, property address)	Estimated value	Your share	Your partners share
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%

 Attach any evidence of your ownership of the asset and the value of the asset e.g. ATM receipts, bank statements, valuation certificates, insurance valuations (if available).

For additional assets please copy and complete this sheet.

Privacy Statement

The Veterans' Support Act 2014 (the Act) which is administered by the New Zealand Defence Force allows us to obtain further information about you to help us assess your application. This may happen when you apply for or are receiving an entitlement. The Privacy Act 1993 requires us to tell you why we collect the information and what we will do with it.

You are not required to give Veterans' Affairs any information, but if you do not provide all the information we ask for, your application for an entitlement and/or assistance may not be able to be processed and may be returned to you.

Why we collect information

The information we collect about you will be held by Veterans' Affairs New Zealand (Veterans' Affairs), which is a unit of the New Zealand Defence Force. We use this information for the purpose of:

- Administering claims and entitlements under the Veterans' Support Act 2014
- Enabling a comprehensive claims database to be maintained
- To monitor and evaluate the nature, incidence, severity and consequences of service-related illness and injuries
- The provision of appropriate treatment, rehabilitation and compensation
- Facilitating the monitoring of the operation of the Act and policy development
- The information you give us may be shared with other government agencies for several purposes, such as the Ministry of Social Development – consistency with other benefits, Accident Compensation Commission – consistency with other claims, Maritime New Zealand – for merchant navy records, Inland Revenue – for payment of tax on taxable entitlements, Archives New Zealand – for service records and the Department of Internal Affairs – to verify your date of birth.

We only collect information needed to manage the entitlements we administer.

Using and sharing personal and health-related information

Veterans' Affairs may exchange information about you with your health practitioner(s) in order to provide you with the correct entitlements and assistance, to clarify any health-related information you give us and for the purposes of putting in place treatment and rehabilitation if required.

Veterans' Affairs will also collect personal and health information from a variety of sources including information provided when making an application to Veterans' Affairs, information supplied by others including treatment providers, and other government agencies.

The information we collect about you can be via various channels, such as email, telephone, face to face and in various formats, such as letters, forms and electronic file notes.

Veterans' Affairs uses personal information provided only for the purposes consistent with the reason it was obtained and will not share it with other parties unless there is a legal authority to do so.

You have the right to access and correct your personal information

You may access personal information that we hold about you. You can ask us to correct errors contained in the information we have about you.

You can contact us at anytime if you have concerns on what information about you we are collecting and how it is or may be used.

Please complete the Signature & Acknowledgement on page 6



Signature & Acknowledgement

By signing this application form I acknowledge and understand that:

- The information provided in this application form is, to the best of my knowledge, true and complete.
- As part of processing this application, Veterans' Affairs may obtain further information in addition to what I have provided.
- I am consenting to the release and collection of health, clinical or other information to Veterans' Affairs held by any health practitioner, hospital, clinic, insurance company, Accident Compensation Commission, Ministry of Social Development, Department of Internal Affairs or other persons or agencies for the purposes of assessing and processing this application and administering any resulting entitlement or assistance.
- I am aware there are penalties for providing false information as set out in the information sheet at the front of this application.
- I have read and understand the Privacy Statement contained in this form.
- The Power of Attorney or Enduring Power of Attorney document attached to this application is current (where the application is being signed by a person holding this document).

Veteran or Power of Attorney's name (print)

Signature

Date

If you had assistance completing this form, print the persons name (and organisation they represent if applicable) below:

If the veteran is unable to sign due to physical or mental incapacity, the application must be signed by a person with authority to act on behalf of the veteran. If this situation applies you must also attach a certified copy of at least one of the following documents:

- **Power of Attorney or Enduring Power of Attorney (in relation to Property)**
- **Court Order**
- **Certificate of Administration (from the Public Trustee)**

Checklist

- Please complete the checklist below to ensure your application is complete:**
- I have fully completed my application form.
 - I have attached a certified copy of my identification.
 - I have attached an original or certified copy of my bank statement OR a pre printed deposit slip stamped by my bank.
 - I have attached any additional information which supports my application.
 - I have read the Privacy Statement on page 5 and completed the Signature & Acknowledgement on page 6.
 - I have written my name and address in the application receipt below (we will return this to you when we receive your application for your records).

Send your completed application to:

Veterans' Affairs
PO Box 5146
Lambton Quay
WELLINGTON 6140

Retirement Lump Sum Application Receipt

This is to acknowledge Veterans' Affairs has received your application.

Please write your name and address details below:

Office Date Stamp