Inland Revenue
Te Tari Taake

KS10 0509

KS10
March 2017

KiwiSaver
Poua he Oranga

Opt-out request

KiwiSaver Act 2006

Use this form to opt out if you have been automatically enrolled, are a minor who was incorrectly enrolled, and you don't want to be a member of KiwiSaver. Or go to **www.kiwisaver.govt.nz** to complete our online form. **Please read the notes on the back to help you fill in this form.**

Section A Personal details Please use BLOCK LETTERS

1. Your IRD number

If you don't know your IRD number or you don't have one, call us on 0800 549 472

2. Your name

Mr Mrs Miss Ms Other

Put a dash to indicate your title

First names

Surname

3. Your postal address

Street number

Street address or PO Box number

Suburb, box lobby or RD

Town or city

Postcode

4. Your contact numbers

Day

Mobile

5. Your email address

If you give an email address you may receive KiwiSaver information by email

6. Bank account details

Bank Branch Account number Suffix

Name of account holder

7. I wish to opt out of KiwiSaver

Signature

Day Month Year

Section B Employment details Please use BLOCK LETTERS

8. Employer's IRD number

If you don't have your employer's IRD number ask them for it.

9. Employer's business name

10. Employer's start date

Day Month Year

Manawauni client code

Section C Late opt-out Please read the notes on the back of this form

11. If your request to opt out is more than eight weeks after you started employment, or you are a minor who was incorrectly enrolled, please give a reason for your late opt-out request.

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