

Financial Hardship Withdrawal Application and Release Form

About this form

You will need to use this form if your investment is locked-in and you are experiencing severe financial hardship. This application helps us to assess your financial circumstances. Please note that this financial assessment can only be based on the members personal situation, not that of the owners. If your application for financial hardship is accepted, we will withdraw the amount and either pay it to your nominated account or to the person/account you have asked us to. All withdrawals will be processed as of the date Asteron Life receives the request and not on the date the form is signed. Please note that the final value you receive could be more or less than previously advised, due to changing unit prices.

We will contact you if we need to discuss your application further.

Complete sections 1 to 12 (pages 1-5). Sections 3 to 8 relate to members financial situation.

Please complete and return to us by:

Email: (scanned or digital copies) to contactus@asteronlife.co.nz

Post: Asteron Life, PO Box 894,
Wellington 6140, Freepost 795

1. Plan details

Plan/policy number Owner name(s)

2. Preferred methods of communication

My preferred method of communication: Email Phone Letter Fax

Please tick one:

Contact details for communications (email, fax, address, etc)

3. Member's occupation details

Main occupation Second occupation
Employers name Employers address

4. Member's family details

Name of Spouse/partner
How many dependents do you have?
What are the ages of all your dependents?

Member's income

Monthly (net) income	Amount
Income from your occupations	\$
Spouse/partner income	\$
Income from other sources	\$
Total income	\$

5. Member's outgoings

Monthly outgoings	Amount
Monthly rent or mortgage	\$
Monthly hire purchase payments	\$
Other monthly loan payments	\$
Monthly insurance premiums	\$
Monthly living expenses (e.g. food, power, phone, etc)	\$
Other monthly outgoings	\$
Total monthly outgoings	\$

6. Member's assets

Please provide copies of the accounts listed below:

Description	Amount
Savings/cheque account(s) balance	
(Bank)	\$
(Bank)	\$
(Bank)	\$
(Bank)	\$
Life insurance with surrender value	\$
Investments (e.g. shares, bonds, etc)	\$
Other assets	\$
Total value of assets	\$

7. Member's liabilities

Please provide copies of the accounts listed below:

Description	Amount
Mortgage balance outstanding	\$
Hire purchase balance	\$
Credit card liabilities	
(Credit card type)	\$
(Credit card type)	\$
Outstanding accounts	
(Company)	\$
(Company)	\$
(Company)	\$
Other loans	
Loan details	\$
Bank overdraft	\$
Total liabilities	\$

8. Withdrawal details

- Please make a partial withdrawal from my plan/policy (this will keep your policy active)
- Please cash in the full value of my plan/policy. (By withdrawing the full value you will be ending the Plan and releasing all claims that have been made or may be made on Asteron Life under this plan)

Complete the fields below if you wish to make a partial withdrawal:

Please indicate which investment fund(s) you would like to take the withdrawal from and the amount(s) desired. If you choose not to complete this section we will withdraw the total amount requested proportionately across all of your investment funds. Please note that depending on your plan/policy the minimum and maximum withdrawal amount would vary.

Investment fund	Withdrawal amount
	\$
	\$
	\$
	\$
Total withdrawal	\$

If you are unsure about how much you are able to withdraw from your plan, please call us on 0800 737 101.

9. Additional information

Please provide an overview of your situation or any additional information which would help us assess your situation.

