

# Suspend/Restart Contributions Form

Please print in black or blue pen, in uppercase, one character per box and  all that apply.

Please complete this form if you would like to suspend (or renew the suspension of) all your contributions to the Plan. You can also use it to let us know if you would like to restart contributions.

If you suspend contributions, all your account balances will remain invested in the Plan.

If you need assistance completing this form, please feel free to contact our toll-free Helpline on **0508 637 237**.



### Privacy statement

Information in this form and any requested documents are being collected to enable administration of this account. The Privacy Act entitles the account holder to access and to request correction of any personal information.

## Step 1 – Complete your personal details

Membership number

IRD number

Title: Mr  Mrs  Ms  Miss  Other

Date of birth  /  /

First name

Middle name(s)

Surname

### Residential address

Number	Street Name
Suburb	
City	Postcode
Country	

### Mailing address (if different from residential address)

Number	Street Name
Suburb	
City	Postcode
Country	

### Telephone

Mobile

Home phone

Email

## Step 2 – Suspend (or renew suspending) your contributions

This will suspend (or renew the suspension of) all contributions, including any voluntary contributions made from your pay.

Tell us what you'd like to do:

Suspend (or renew the suspension of) my contributions to the Plan on  /  / , and

Restart my contributions to the Plan on  /  /  (maximum suspension period is 1 year)

### Notes:

- If you suspend your contributions then your employer's contributions may also be suspended during the suspension period.
- Your contributions will restart automatically after 1 year if you don't provide an earlier restart date.
- When your contributions restart, they will resume being paid at the pre-suspension contribution rate percentage.

My reason for suspension is: (tick as appropriate)

Parental leave

Sick leave (without pay)

Special leave (without pay)

Other (please specify):

Membership number

### Step 3 – Restart your contributions earlier than advised previously


Please restart all my contributions to the Plan on   /   /

**Note:** When your contributions restart, they will resume being paid at the pre-suspension contribution rate percentage.

### Step 4 – Sign the form

Member's Signature

Date   /   /

 **Please return this form to payroll.** Scan and email it to [payroll@nzpost.co.nz](mailto:payroll@nzpost.co.nz) or post it to Payroll, Employee Information Services, NZ Post, Private Bag 39990, Wellington Mail Centre, Lower Hutt 5045

### Office use only – payroll to complete

#### For members suspending contributions

Please make sure the member has:

- Filled in their full name, postal address and employee number
- Specified a reason for suspending contributions
- Signed and dated the form

#### For members restarting contributions

Please make sure the member has:

- Filled in their full name, postal address and employee number
- Indicated clearly that they wish to restart contributions
- Signed and dated the form

Employee Number

The effective date for the suspension (or renewed suspension) of the member's contributions is   /   /

The member's contributions are being restarted on effective date:   /   /

#### Completed by:

Name

Contact number

Signature

Date   /   /


#### Checked by:

Name

Contact number

Signature

Date   /   /

 **Please return your completed form to:** Mercer (N.Z.) Limited, Mercer Super Trust Freepost Authority Number 3629, PO Box 1849, Wellington 6140 or email the form to [MSTNZAdmin@mercer.com](mailto:MSTNZAdmin@mercer.com).