

## APPLICATION FORM TO CEASE OR VARY CONTRIBUTIONS

### Member Details

Name:			
Member No:		Branch / Group:	

### Member Acknowledgement

I realise that this form is to be used to advise the Trustee of the Opus Downer Retirement Scheme that I wish to modify my contributions to the Scheme.

I acknowledge that this modification can only be made at 30 June in any year, or with the agreement of my employer at any time during the year.

### Contribution Modification

By ticking one of the boxes below, I direct the Trustee to make the changes to my contributions to the Scheme as from the date advised.

☐ I wish to cease contributing to the Scheme as from \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ I wish to vary my contributions to the Scheme as from \_\_\_\_/\_\_\_\_/\_\_\_\_

My new contribution to the Scheme is the following \*percentage of my salary:

____%
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\* Maximum percentage of salary is 15%

### Member Authorisation

Member's full name: \_\_\_\_\_

Member's Signature: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Employer Authorisation

By completing this form, the Employer acknowledges that the member's contribution modification has been noted and accepted.

Member's Name: \_\_\_\_\_

Employer Representative: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please send the completed form to the Administration Manager at the address below.**

**Administration Manager**  
Melville Jessup Weaver

**PO Box** 11330  
**Wellington** 6142  
**Ph** 0800 728 370  
**E** mary.garner@mjlw.co.nz  
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