# Funeral Grant application



A Funeral Grant may help with some of the funeral costs for a person who has died. Funeral Grants are asset and income tested. Other conditions also apply.

For more information:

- visit our website workandincome.govt.nz
- call 0800 552 002 (for seniors)
- call 0800 559 009 (for all others)

Funeral Grants may not be granted if the funeral costs are covered by another organisation, for example ACC, Veterans' Affairs. For more information visit their websites or call them:

- acc.co.nz or call 0800 101 996
- veteransaffairs.mil.nz or call 0800 483 8372 (0800 4 VETERAN)

The person applying for a Funeral Grant must be able to provide estate details and other information about the person who has died (including details about any children they were responsible for).

To apply you need to complete this application form and return it along with other information we need. You can post it or drop it off at your nearest Work and Income office, or contact us to make an appointment.

What to provide

Who can

apply

You need to provide this application and other supporting documents. Use the list below to check what these will be.

Talk to us if you do not have the information, have given it to us recently or if there might be a delay in getting it.

**Death confirmation** – for example, the person's death certificate, funeral director confirmation, newspaper death notice.

**Funeral expenses** – the itemised funeral account. If this is already paid, the original receipt and proof of bank account of the person who paid the funeral account, for example a bank statement or preprinted deposit slip.

**Proof of who you are** – for example, Community Services Card, SuperGold Card, driver licence, passport.

If you're using identification that has expired, it must not be more than two years past the expiry date.

**If you are representing an organisation** – for example Public Trust, solicitors, funeral director, please provide proof you work for the organisation.

# Funeral Grant application



Client num	ber	
Details of person wi has died	ho Q1:	What is the full name of the person who has died? First and middle names Surname or family name
Please bring cor of the person's death. For exam death certificate funeral director confirmation, newspaper notio If you don't have please talk with	nple, 2 e, 2 ce. e it, 3	What was their date of birth?   Day   Month   Year   What date did they die?
If the person wh was a stillborn c please bring a bi certificate, or lei from an obstetri or midwife, or th hospital dischar report.	ho died hild irth tter ician ae	Day       Month       Year         Did the person die as a result of an accident?         No         Yes         ACC may provide assistance. Please discuss with Work and Income before
	5	Did the person receive a Veteran's Pension, War Pension or serve in the New Zealand Armed Forces?         No       Yes         Veterans' Affairs may provide assistance. Please discuss with Work and Income before completing this form.
	6	Where did they die? Town/City Country
NZ residency status		Was the person ordinarily resident in New Zealand when they died?         No       Please discuss with Work and Income before completing this form.         Yes
This means that person consider New Zealand the were legally resid usually lived her intended to stay	: the red eir home, dent, e and	
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Was the person who died a child?   No   Yes   Co to question 13   Did the person who died have any children they were   No   No   Go to question 11   Yes   Yes   If yes, please provide the child's details below   Child's full name   Go to question 13	re legally Child's d	·	
No Yes Go to question 13		·	
No Go to question 11 Yes If yes, please provide the child's details below Child's full name		·	
	Child's d	ate of bi	rth / / /
Go to question 13		/ / /	   
Go to question 13		/	/
Go to question 13		/	/
If the person who died was single and did not have an legally responsible for, please answer questions 11 an Otherwise please go to question 13.	•	n they v	were
Did the person who died have any of the following o		e they	died?
	es (\$		
Is there any money owed against their home?  The person did not own their own home. No Yes If yes, how much is owed?		)	
	Otherwise please go to question 13.   Did the person who died have any of the following of th	Otherwise please go to question 13.   Did the person who died have any of the following on the dat   Car, boat, caravan, motorhome   No   Yes   Their own home (primary place of residence)   No   Yes   Is there any money owed against their home?   The person did not own their own home.	Otherwise please go to question 13.   Did the person who died have any of the following on the date they   Car, boat, caravan, motorhome   No   Yes   Their own home (primary place of residence)   No   Yes   Is there any money owed against their home?   The person did not own their own home.

Tell us about 13 the person's	Did the person who d	ed have any of the following on t	he date they died?
assets	Money in the bank or other s	avings	No Yes
HOW TO ANSWER Q13:	Bonds, shares, debentures o	or stocks	No Ye
You don't need to tell us about their own home or	Money lent to other people of	or organisations	No Yes
items for personal use.	Other homes or property (o	ther than their primary place of residence)	No Yes
	Boat, caravan or motorhom	e	No Yes
	Superannuation scheme		No Yes
	Pension fund		No Ye
	Life insurance		No Yes
	Prepaid funeral plan/whanau	u plan	
	Other assets		
	Type of asset	How much is it worth? \$	How much is owed on it?
You may need to provide proof of assets and their value.	No Yes	↓ If yes, please provide more details a	about each one below
	Type of asset		
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$ \$

Tell us who is 16	Who is administering the estate of the person w	ho died?
administering the estate	Name of person or organisation	
	Derson er ergenisetion's contact details	
HOW TO ANSWER Q16	Person or organisation's contact details           Address	
For example, a solicitor or		
public trustee.		
	Phone number ()	
	Mobile number ( )	
	Email	
Tell us about 17	What expenses are you applying for?	
the funeral		\$
expenses		\$
<b>ATTACHMENT FOR Q17:</b> You need to provide the		\$
itemised funeral account.		\$
		\$
		\$
		\$
		\$
		\$
has already been paid, you need to provide the original receipt and the bank account of the person who paid it (for example a bank statement).	No Any payment will be made directly to the funeral dir   Yes Any payment will be made directly to the person where the person will be made directly to the person where the person will be made directly to the person where the person will be made directly to the person where the person where the person will be made directly to the person where the person will be made directly to the person where the person where the person will be made directly to the person where	no paid the funeral account.
Next steps:	<b>If the person who died was a child under the age of 18 years</b> (but was not 16 or 17 years and financially independent)	Go to question 19
	If the person who died had a partner	Go to question 19
	If the person who died did not have a partner	Go to question 30

## **Funeral Grant** partner or parent/guardian form



This section is to be completed by:

- the partner of the person who has died, or
- the parent or guardian of a child who has died. A child is under the age of 18 years (unless they were 16 or 17 and financially independent).

Please tell us <sup>19</sup> your details <sup>20</sup>	Are you:         the partner of the person who has died?         the parent or guardian of the person who has died?         What is your full name?         Mr       Mrs       Ms       M         First and middle names	? Aiss Other
	Surname or family name	
21	What date were you born?         Day       Month       Year         Where do you live?         Flat/House number       Street name         Suburb       Tow         Country	n/City
How to ANSWER Q23: Mailing address can include a postal box (PO Box), rural delivery details, or C/O address.	Is your mailing address different from when No Yes If yes, tell us your mail	
24	How else can we contact you?	Tick the best way for us to first contact you
	Home phone ( )	
	Mobile phone ( )	
	Other phone ( )	
	Email	
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#### **Tell us** about any income

25

#### INFORMATION FOR Q25:

We need to know about any income for a surviving partner or the parent/s or guardian/s of a deceased child.

Parents/guardians please show income from similar sources as a combined total.

You don't need to tell us about NZ Super/Veteran's Pension or any assistance paid by Work and Income.

#### ATTACHMENT FOR Q26:

26 You need to provide proof of income received. Provide a copy of your business accounts if relevant.

Wages or salary		o Yes
Termination pay		o Yes
Redundancy pay		o Yes
Accident compensation (eg ACC)		o Yes
Income insurance (replacement/protection)	N	o Yes
Farm or business income		o Yes
Payments from self-employment or contract work		o Yes
Interest from savings, investments, or bonds	N	o Yes
Dividends from shares, unit trusts, or managed funds	N	o Yes
Income from rents	N	o Yes
Payments from boarders or flatmates		o Yes
Child Support payments (private arrangement or through Inland Revenue)		o Yes
Other income for a child		o Yes
Maintenance payments		o Yes
Payments from a former partner		o Yes
Student Allowance, scholarship, or Student Loan living cost payments		o Yes
Overseas pension, benefit or allowance payments		o Yes
Other superannuation or retirement scheme income (government or private)		o Yes
Income from an estate, if you've inherited money		o Yes
Income from trusts		o Yes
Other		o Yes

Do you expect to get any income or payments in the next 52 weeks?

#### Did you answer 'yes' to any of the sources of income listed in question 25?



L.

If yes, tell us more details about each one below

Where did the income come from?	F You	Payment made to? Jointly with partner
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

about your assets			assets?
	Money in bank or other savings	No	Yes
, NTTACHMENT FOR Q27:	Bonds, shares, debentures or stocks	No	Yes
′ou may be asked to provide proof of your	Money lent to other people or organisations	No	Yes
assets and their value.	Property you don't live in	No	Yes
	Other cash assets	No	Yes
	Don't include any cars, boats , caravans or motorhomes mainly used for family purposes.		
You may be asked to	If you answered 'yes' to any of the as the details below.	sets listed in que	estion 27, please write
You may be asked to provide proof of these	the details below.		How much do you
You may be asked to provide proof of these		Sets listed in que	How much do you
You may be asked to provide proof of these	the details below.	How much is it v	How much do you vorth? owe on it?
You may be asked to provide proof of these	the details below.	How much is it v	How much do you vorth? owe on it? \$
ATTACHMENT FOR 028: You may be asked to provide proof of these details.	the details below.	How much is it v	How much do you vorth? owe on it? \$ \$

ATTACHMENT FOR Q29:

You'll need to show us trust documents, such as the trust deed, deed of debt, gift statements, accounts.

- you've transferred assets to a trust
- you make decisions about managing a trust
- you benefit from a trust, for example, by receiving income such as trust distributions.

No Yes

 $\downarrow$  If yes, please write the name of the trust

Name of trust

## **Funeral Grant** applicant's form



MINISTRY OF SOCIAL

DEVELOPMENT

If you're applying for a Funeral Grant you need to complete questions 30-35 if you:

- are **not** the partner of the person who has died
- are **not** the parent of a dependent child who has died.

30	Are you the par	tner or parent of the	person who has died?	
		o question 31	•	
	Yes Go to	o the Signature page		
31	What is your fu	ll name?		
	Mr	Mrs Ms	Miss Other	
	First and middle nar	mes	Surname or family name	
32			anisation managing the estate of	the
	person who die	:d? 		
		es 🔶 If yes, please	provide the details below	
	Name of the organis	sation		
33	What is your ac			
	Flat/House number	Street name		
	Suburb		Town/City	]
	Country			)
HOW TO ANSWER Q34: Mailing address can	Is your mailing	address different fro	om where you live?	
include a postal box	No Y	/es 🔶 If yes, tell us y	our mailing address	
(PO Box), rural delivery details, or C/O address.				
				]
35	How else can w	e contact you?	Tick the b	est way for
		-	us to first c	
	Homephone	( )		
	Mobile phone	( )		
	Email			
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### Signature page for Funeral Grant

#### Partner or parent/guardian

#### By signing this form I confirm that:

- I am aware of and understand the Privacy Statement contained in this application.
- The information I have given is true and complete.

Partner or parent/guardian's name (print)	Partner or parent/guardian's signature	Day	Month	Year

#### Applicant (if not the partner or parent/guardian of a child who has died)

#### By signing this form I confirm that:

- I am aware of and understand the Privacy Statement contained in this application.
- The information I have given is true and complete.

Applicant's name (print)	Applicant's signature	Day	Month	Year
		]		)

# How we protect your privacy



#### **Collecting your information**

We collect your personal information, so we can provide income support, NZ Super or Veteran's Pension, Student Allowance, or Loans and connect you with employment, education and housing services. We do this under various Acts, which are all listed on our website at workandincome.govt.nz/privacy

- To help us do this, we collect information about your identity, your relevant history, and your eligibility for our services.
- We get this information directly from you, and we sometimes collect information about you from others, including other government agencies.
- You can choose not to give us your personal information, but we might not be able to help you if you don't.

#### Using your information

We use the information you give us to make decisions about the best way to help you.

- These decisions may be about:
  - whether you're eligible for our services
  - running our operations and ensuring our services are effective
  - the services we'll provide in the future.

#### Sharing your information

Sometimes, we need to share your information outside our Ministry to reach our goal of helping New Zealanders to be safe, strong, and independent.

- To do this, we may share your information with:
  - prospective employers to help you find work
  - contracted service providers that help us to help you
  - health providers if we need your medical information to assess your eligibility
  - other government agencies when we have an agreement with them
  - some other governments if you may be eligible to get or are getting an overseas pension.
- We also share personal information when the law says we have to.

#### **Respecting you and your information**

#### We make sure we follow the Privacy Act to do what's right when we use your information.

- We treat you and your information with respect, by acting responsibly and being ethical.
- We make sure any technology we use meets strict security standards so it keeps your information safe.

#### Get in touch if you have a question

You have a right to ask to see your personal information, and to ask for it to be corrected if it's wrong.

- If you have a question or a complaint, please get in touch.
- You can find full details about what we do with personal information in our privacy notice at: workandincome.govt.nz/privacy