



## War Funeral Grant Application Form

### Eligibility

A war pensions funeral grant is paid:

- Where the death of the veteran is attributed to service. In this case the maximum amount of funeral grant can be paid. The value of the veteran's estate is not taken into consideration.
- Where the veteran was receiving a 70% permanent pension, or could have been receiving 70% permanent pension at the time of death, if:
  - there is a surviving partner or dependant child who qualifies for a Surviving Spouses Pension or a Child Allowance; and
  - after taking into account all of the veteran and their partner's income at the time of death; they would still have qualified for an Invalids Benefit.
- If the veteran has War and Emergency service and died in indigent circumstances. This includes Commonwealth veterans and members of the Mercantile Marine who served in World War II.

### What do you need to do?

You will need to provide a copy of the deceased veteran's Death Certificate.

You will need to provide a copy of the Funeral Account. If the account has been paid, please provide the receipt and the details of the person who paid the account.

Provide details of the bank account you want the funeral grant paid into.

If the death was not due to service, you will need to provide details of the assets and income received by the deceased and surviving spouse for 52 weeks prior to death.

Photocopies may be supplied if certified by a Justice of the Peace, a solicitor or a Work and Income staff member.

### Privacy Statement

The information provided in this form will be used by Veterans' Affairs New Zealand to ensure that full entitlements are paid. This includes the use of the information for statistical and research purposes and the provision of advice to Government.

Under the Privacy Act 1993 you have the right to request access to all information held about yourself and to request corrections to that information.

You are not obliged to provide the information requested, but if you do not provide the information your application may not be able to be processed.

**Please send the completed form to:  
Veterans' Affairs New Zealand, PO Box 9448, Hamilton 3240**

<b>Veteran's Details</b>	Please write in Block Letters with blue or black pen. Please do not write in pencil. Please complete all questions. If not applicable write N/A.		
War Pension Number			
Date of Birth		Date of Death	
Title (Mr, Mrs, Dr, Col etc.)		Surname	
Given Names			
Marital Status of Veteran: <input type="checkbox"/> married <input type="checkbox"/> defacto <input type="checkbox"/> single <input type="checkbox"/> civil union			
Did the veteran have dependent children?    Yes <input type="checkbox"/> No <input type="checkbox"/>			
<b>If the veteran was not in receipt of a New Zealand War Disablement Pension please provide the following details. [If you have copies of the veterans service documents please attach them to this form]</b>			
Service Number			
Country Served For			
Service Navy <input type="checkbox"/> Army <input type="checkbox"/> Air Force <input type="checkbox"/> Merchant Navy <input type="checkbox"/>			
Rank/Role			
Where the person served			
Was the veteran in receipt of a war pension from any other country    Yes <input type="checkbox"/> No <input type="checkbox"/>			
Has a funeral grant been claimed or paid by any other country    Yes <input type="checkbox"/> No <input type="checkbox"/>			
What Is the value of that funeral grant    \$			
<b>Claimant's Details</b>	Please write in Block Letters with blue or black pen. Please do not write in pencil. Please complete all questions. If not applicable write N/A.		
Full Name			
Relationship to the Veteran (Executor/Agent/Family Relationship)			
Residential Address (please include your postcode)			
Postal Address (if different to residential address). All correspondence will be sent to this address so please include your postcode.			

If you are not the Executor of the Estate please provide the name and contact details of the Executor.

Have you claimed a funeral grant from Work and Income?      Yes          No   

### Claimant Unable to Sign the Form

If the claimant is unable to sign this form and the form is being completed on their behalf by a person wishing to be appointed their advocate please tick the reason for this:

I have authority over this claimant's affairs, as covered by a valid Enduring Power of Attorney for personal care and welfare or a Court Order made under the Protection of Personal and Property Rights Act 1988. A certified copy of the Power of Attorney /Court Order is attached.

or

This claimant is temporarily incapacitated and I wish to be appointed as their advocate for a short period of time to enable VANZ to meet their immediate needs. (please attach a document that shows your relationship).

### Claimant's Declaration

This declaration needs to be signed. If someone has filled the form in for you, you need to make sure you agree with what has been written prior to signing the form.

I have completed this form appointing an advocate, or this application form has been completed for me, and the information I have given is true and I have not left anything out.

I understand the Privacy Act statement contained on page 1 of in this application form.

Signature

Date