

Company | SOVEREIGN HOME LOANS

Customer	
MAPs Ref	
Adviser	

Regulatory requirements

We collect and use the information on this form about your business and its key individuals to meet both our regulatory requirements and responsibilities to you as our customer.

The parts of this form

- A. **Company information:** Your company’s name, details and important information.
- B. **Direct ownership structure:** The people, companies and trusts who own your company.
- C. **Key individuals for your company:** This is where you list the full details of all of the individuals who (directly or indirectly) own your company and for any key individuals who perform particular functions within your company. If they already have a banking relationship with Sovereign Home Loans, we may already hold their details on file and will let you know what further information is required.

D. Declaration

Individuals

All people applying for home loans need to provide both proof of address and individual identification. Where a trust or company is applying for the loan, the guarantors, trustees, and certain beneficiaries, directors and shareholders who own more than 25% must also provide both proof of address and individual identification.

Address verification: Please provide a certified/verified copy of either:

To be dated within the last 12 months and show the current physical address

Posted and digital copies accepted

- > Utility bill (gas, power, fixed phone line, internet, SKY TV, on-account mobile phone)
- > Local authority Rates or Water Bill
- > Non ASB Bank statement or correspondence
- > NZTA Correspondence
- > Government agency Correspondence
- > Current non-ASB insurance policy (house or contents)
- > Non-ASB registered KiwiSaver or superannuation scheme correspondence
- > Electoral Commission Correspondence

Documents must be originals

- > Correspondence from a qualifying New Zealand educational institution (this must be a boarding hostel, halls of residence or homestay letter confirming the customer’s address. This also includes posted fee invoices and receipts)
- > Signed Tenancy or Lease Agreement
- > Driver licence containing address (This must be a current (not expired) driver licence from New Zealand, Australia or the United Kingdom that contains your current residential address)
- > Correspondence from a recognised retirement home (must confirm you reside at the rest home/facility and be from a recognised Ministry of Health certified retirement home provider)

If a bank or government agency statement showing the address has been provided as part of verification under Option 2 below, this can also be used for address verification. Utility bills and local authority bills sent to a PO Box are acceptable as long as your physical address is included on the statement and there is a fixed service provided to that address. On-account’ mobile phone statements do not need to contain a fixed service address

A tenancy or lease agreement must be signed by both the tenant(s) and landlord.

Individual’s identity verification: Please provide verification by choosing between the following three options:

Option 1:

Provide a certified/verified copy of one of the following:

- > New Zealand passport
- > Overseas passport
- > New Zealand firearms licence
- > National Identity Card

Option 2:

Provide a certified/verified copy of a New Zealand drivers licence AND provide a certified copy of one of the following:

- > SuperGold card
- > Non ASB Credit card (name embossed, both sides)
- > Non ASB Debit card (name embossed)
- > Non ASB Bank statement
- > Government Agency Correspondence

Option 3:

Provide a certified/verified copy of one of the following:

- > New Zealand full birth certificate
- > Overseas full birth certificate
- > Certificate of New Zealand citizenship
- > Overseas citizenship certificate

AND a certified copy of one of the documents below:

- > New Zealand driver’s licence (both sides)
- > Overseas driver’s licence (with photo) - with an English translation (if required) and accompanied by an International Driving Permit
- > 18+ Card or Kiwi Access card
- > New Zealand Armed Forces ID
- > New Zealand Police ID

Any person acting on behalf of another who has the ability to transact on a Go Home Loan account (as with an enduring power of attorney) must verify their identity and address as per the requirements for individual borrowers. Trusts and companies have special requirements, which are outlined in the letter of offer. Company information can be found online at www.business.govt.nz/companies

Who can certify/verify an identity document

Sovereign Advisers can verify a document.

If a Sovereign Adviser is unable to do this it can be verified by one of the following:

- > A Notary Public
- > A registered Teacher
- > A member of Parliament
- > A member of the New Zealand Police who holds the rank of Constable or above
- > People who have the legal authority to take statutory declarations or the equivalent in New Zealand
- > A Commonwealth representative (as defined in the Oaths and Declarations Act 1957)
- > New Zealand Honorary Consul
- > Lawyer
- > Chartered Accountant
- > Justice of the Peace
- > Registered medical doctor.

The certification/verification must be completed no later than three months prior to Sovereign receiving the loan application.

For certified/verified documents the Certifier/Verifier MUST either:

- a) post a physical copy of the original to yourself or Sovereign Home Loans, OR
- b) email a scanned copy to yourself, for you to forward to Sovereign Home Loans at applications@sovhomeloans.co.nz

The Certifier/Verifier must:

- 1) Sight and take a copy of the original documentation
- 2) Include their name, occupation or capacity to act as a Trusted Referee and signature of the Trusted Referee and the date of certification
- 3) Write one of the following statements on each of the copies:

For photographic identification documents - "I certify/verify that this is a true copy of the original document, which I have personally sighted; and the photograph is a true likeness."

For all other identification documents - "I certify/verify that this is a true copy of the original document, which I have personally sighted."

Other Information

If any identification documents are issued by a country other than New Zealand, Australia, The United Kingdom, Canada, France, Germany or the United States of America, we may need to ask you for additional information about your income or assets.

A Company details **This information gives us details about your company. Please answer all relevant questions in full.**

1 Your company details

What is the full name of your company?

Is this company an LTC?

 Yes No

If no, what is the nature of your business?

Is your company conducting transactions on behalf of other persons?

 Yes No

Is your company a financial institution for the purposes of Common Reporting Standard and/or Foreign Account Tax Compliance Act?

 Yes No

If a financial institution, please provide GIIN, if applicable

(If you are unsure or require clarification on what this means please refer to IRD.govt.nz or consult your tax advisor)

GIIN is a reference number assigned by the FATCA registration system to financial institutions and direct reporting non-financial foreign entities. Those assigned as GIIN use it to identify themselves to withholding agents and tax administrations for FATCA reporting.

Is your company a managed investment entity? i.e. the investment entity is managed by another financial institution

 Yes No

Is your company's primary business activity selling goods or services or is it a non-profit entity?

 Yes No

Select 'Yes' if either:

The company earns, or intends to earn more than 50% of its total income from these trading activities;

AND

- > More than 50% of the company's assets produce or are held for producing this trading income.

OR

- > The company is a non-profit entity and is exempt from income tax in its country/jurisdiction of residence.

What is the company's Registered/Incorporation number?

What is the incorporation date of the company?

 / /

Does your company have nominee shareholders?

 Yes No

Does your company have bearer shareholders?

 Yes No

Physical Address Street

Suburb

City

Postcode

Your company details continued...

Postal Address (if different from physical address)	Street	<input type="text"/>		
	Suburb	<input type="text"/>		
	City	<input type="text"/>	Postcode	<input type="text"/>
Registered Address (if different from physical and postal addresses)	Street	<input type="text"/>		
	Suburb	<input type="text"/>		
	City	<input type="text"/>	Postcode	<input type="text"/>
	Telephone	<input type="text"/>		

Your company's tax residency.

Please refer to the 'Tax Residency Self- Certification information' in section E of this form before completing the table below.

Country/Jurisdiction(s) of tax residence	Taxpayer Identification Number (TIN)	Enter Reason A, B or C if no TIN is available	If you have selected Reason B, please explain why a TIN was not issued to you
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

B Direct ownership structure

1 Directors and individuals with a direct shareholding in your company

All directors must complete this section

Complete this section if any of your company's shareholders are individuals.

Full name	<input type="text"/>		
Shareholding percentage	<input type="checkbox"/> Less than or equal to 25% - no further action required unless also in Part B5	<input type="checkbox"/> Greater than 25% (Please complete Part C: Key individuals involved with the organisation)	
Director	<input type="checkbox"/> (Please complete Part C: Key individuals involved with the organisation)		
Full name	<input type="text"/>		
Shareholding percentage	<input type="checkbox"/> Less than or equal to 25% - no further action required unless also in Part B5	<input type="checkbox"/> Greater than 25% (Please complete Part C: Key individuals involved with the organisation)	
Director	<input type="checkbox"/> (Please complete Part C: Key individuals involved with the organisation)		
Full name	<input type="text"/>		
Shareholding percentage	<input type="checkbox"/> Less than or equal to 25% - no further action required unless also in Part B5	<input type="checkbox"/> Greater than 25% (Please complete Part C: Key individuals involved with the organisation)	
Director	<input type="checkbox"/> (Please complete Part C: Key individuals involved with the organisation)		
Full name	<input type="text"/>		
Shareholding percentage	<input type="checkbox"/> Less than or equal to 25% - no further action required unless also in Part B5	<input type="checkbox"/> Greater than 25% (Please complete Part C: Key individuals involved with the organisation)	
Director	<input type="checkbox"/> (Please complete Part C: Key individuals involved with the organisation)		

If your company has more individual shareholders and/or directors, please list them separately by requesting more forms from your adviser.

2 Entities (excluding trusts) with a direct shareholding in your company

All entities listed below are required to complete a separate Company Customer Identification and Verification Form

Complete this section if your company has shareholders who are entities. If one or more shareholding entities is a trust, complete Part B3.

Shareholding entity name 1	<input type="text"/>		
Registered address	Street	<input type="text"/>	
	Suburb	<input type="text"/>	
	City	<input type="text"/>	Postcode <input type="text"/>
Registration/ incorporation number	<input type="text"/>	Date of registration/ incorporation	<input type="text"/> / <input type="text"/> / <input type="text"/>
Country of incorporation	<input type="checkbox"/> NZ	<input type="checkbox"/> Other, please specify	<input type="text"/>
Shareholding percentage	<input type="checkbox"/> Less than or equal to 25%	<input type="checkbox"/> Greater than 25%	
Are there shareholders in this entity who own greater than 25% of your company?	<input type="checkbox"/> Yes, complete Parts B4 and/or B5	<input type="checkbox"/> No	

Shareholding entity name 2	<input type="text"/>		
Registered address	Street	<input type="text"/>	
	Suburb	<input type="text"/>	
	City	<input type="text"/>	Postcode <input type="text"/>
Registration/ incorporation number	<input type="text"/>	Date of registration/ incorporation	<input type="text"/> / <input type="text"/> / <input type="text"/>
Country of incorporation	<input type="checkbox"/> NZ	<input type="checkbox"/> Other, please specify	<input type="text"/>
Shareholding percentage	<input type="checkbox"/> Less than or equal to 25%	<input type="checkbox"/> Greater than 25%	
Are there shareholders in this entity who own greater than 25% of your company?	<input type="checkbox"/> Yes, complete Parts B4 and/or B5	<input type="checkbox"/> No	

If your company has more entity shareholders, please list them separately by requesting more forms from your adviser.

3 Trusts with direct shareholdings in your company

All trusts listed below are required to complete a Trust Customer Identification and Verification Form.

Complete this Part if your company has shareholders who are trusts.

Shareholding trust name 1	<input type="text"/>		
Address	Street	<input type="text"/>	
	Suburb	<input type="text"/>	
	City	<input type="text"/>	Postcode <input type="text"/>
Date of trust deed	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Shareholding percentage	<input type="checkbox"/> Less than or equal to 25% - no further action required	<input type="checkbox"/> Greater than 25%, complete Part C	

Shareholding trust name 2

Address Street

Suburb

City

Postcode

Date of trust deed

Shareholding percentage

Less than or equal to 25% - no further action required

Greater than 25%, complete Part C

4 Entities with more than 25% shareholding or control of your company through any entity in Part B2 and/or B3*

(*This includes Trustee Companies of Trusts noted in Part B3)

Entity name 1

Registered address

Street

Suburb

City

Postcode

Registration/
incorporation number

Date of trust/deed
incorporation

Country of incorporation

NZ

Other, please specify

Entity name 2

Registered address

Street

Suburb

City

Postcode

Registration/
incorporation number

Date of trust/deed
incorporation

Country of incorporation

NZ

Other, please specify

Entity name 3

Registered address

Street

Suburb

City

Postcode

Registration/
incorporation number

Date of trust/deed
incorporation

Country of incorporation

NZ

Other, please specify

Entity name 4	<input type="text"/>		
Registered address	Street	<input type="text"/>	
	Suburb	<input type="text"/>	
	City	<input type="text"/>	Postcode <input type="text"/>
Registration/ incorporation number	<input type="text"/>	Date of trust/deed incorporation	<input type="text"/> / <input type="text"/> / <input type="text"/>
Country of incorporation	<input type="checkbox"/> NZ	<input type="checkbox"/> Other, please specify	<input type="text"/>

5 Individuals who own more than 25% of your company (either directly or indirectly, through any entity in Parts B2 - B4*

(*This includes trustees or directors of trustee companies noted in Parts B3 or B4)

All individuals listed below are required to fill out Part C: Key individuals involved with the organisation.

Full name 1	<input type="text"/>
Shareholding entity associated with	<input type="text"/>
<hr/>	
Full name 2	<input type="text"/>
Shareholding entity associated with	<input type="text"/>
<hr/>	
Full name 3	<input type="text"/>
Shareholding entity associated with	<input type="text"/>
<hr/>	
Full name 4	<input type="text"/>
Shareholding entity associated with	<input type="text"/>
<hr/>	
Full name 5	<input type="text"/>
Shareholding entity associated with	<input type="text"/>
<hr/>	
Full name 6	<input type="text"/>
Shareholding entity associated with	<input type="text"/>

C Key individual 1

A Key Individual's Page needs to be completed by all individuals with more than 25% interest and/or effective control of your entity, and those people with any of the roles listed below. Only one form per person is required, no matter how many roles or functions they hold. Identification and proof of address is required for all Key individuals, if they are not already Sovereign Home Loans customers.

1 Organisation relationship

What is your relationship to the organisation?

Select all that apply

<input type="checkbox"/>	Director	<input type="checkbox"/>	Trustee company representative able to act as a trustee
<input type="checkbox"/>	Director of trustee company	<input type="checkbox"/>	Protector/Appointer
<input type="checkbox"/>	Shareholder with greater than 25% interest	<input type="checkbox"/>	Settlor
<input type="checkbox"/>	Shareholder with greater than 25% interest in shareholding organisation	<input type="checkbox"/>	Executor/Administrator
<input type="checkbox"/>	Professional/Independent trustee	<input type="checkbox"/>	Non-discretionary beneficiary with greater than 25% interest in trust
<input type="checkbox"/>	Trustee ▶	<input type="checkbox"/>	Limited, or
		<input type="checkbox"/>	Unlimited

2 Personal details

Full name

Date of birth

 / /

Country(s) of citizenship

NZ

Other (please specify)

Your tax residency.

Please refer to the 'Tax Residency Self-Certification information' in section E of this form before completing the table below.

Country/Jurisdiction(s) of tax residence	Taxpayer Identification Number (TIN)	Enter Reason A, B or C if no TIN is available	If you have selected Reason B, please explain why a TIN was not issued to you
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you an existing Sovereign Home Loans customer?

Yes

No

Home phone

NZ mobile phone

Address

Street

Street

Postal (if different to Home)

Suburb

Suburb

City

City

Postcode

Postcode

Confidentiality of your information

The Go Home Loan Terms and Conditions set out how we will use information we collect about you and with whom we can share it. We may confirm your identity and address by electronically matching information you provide us with identification information in third party databases.

Your information is collected and held by the lender, Mortgage Holding Trust Company Limited, (12 Jellicoe Street, Auckland Central, Auckland 1010) and the Lender's Administrator, Sovereign Financial Services Limited (74 Taharoto Road, Takapuna, Auckland 0622) and by Sovereign's data storage providers (whether in New Zealand or elsewhere), and reasonable steps will be taken to keep such information secure. You have the rights to and correction of, your personal information held by us. A copy of Sovereign's Privacy policy can be viewed on its website or made available on request.

Signature

Please sign clearly in the centre of box

Date

 / /

C Key individual 2

A Key Individual's Page needs to be completed by all individuals with more than 25% interest and/or effective control of your entity, and those people with any of the roles listed below. Only one form per person is required, no matter how many roles or functions they hold. Identification and proof of address is required for all Key individuals, if they are not already Sovereign Home Loans customers.

1 Organisation relationship

What is your relationship to the organisation?

Select all that apply

Director

Trustee company representative able to act as a trustee

Director of trustee company

Protector/Appointer

Shareholder with greater than 25% interest

Settlor

Shareholder with greater than 25% interest in shareholding organisation

Executor/Administrator

Professional/Independent trustee

Non-discretionary beneficiary with greater than 25% interest in trust

Trustee ▶

Limited, or

Unlimited

2 Personal details

Full name

Date of birth

 / /

Country(s) of citizenship

NZ

Other (please specify)

Your tax residency.

Please refer to the 'Tax Residency Self-Certification information' in section E of this form before completing the table below.

Country/Jurisdiction(s) of tax residence	Taxpayer Identification Number (TIN)	Enter Reason A, B or C if no TIN is available	If you have selected Reason B, please explain why a TIN was not issued to you
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you an existing Sovereign Home Loans customer?

Yes

No

Home phone

NZ mobile phone

Address

Street

Street

Postal (if different to Home)

Suburb

Suburb

City

City

Postcode

Postcode

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Signature

Please sign clearly in the centre of box

Date

 / /

C Key individual 3

A Key Individual's Page needs to be completed by all individuals with more than 25% interest and/or effective control of your entity, and those people with any of the roles listed below. Only one form per person is required, no matter how many roles or functions they hold. Identification and proof of address is required for all Key individuals, if they are not already Sovereign Home Loans customers.

1 Organisation relationship

What is your relationship to the organisation?

Select all that apply

Director

Trustee company representative able to act as a trustee

Director of trustee company

Protector/Appointer

Shareholder with greater than 25% interest

Settlor

Shareholder with greater than 25% interest in shareholding organisation

Executor/Administrator

Professional/Independent trustee

Non-discretionary beneficiary with greater than 25% interest in trust

Trustee ▶

Limited, or

Unlimited

2 Personal details

Full name

Date of birth

 / /

Country(s) of citizenship

NZ

Other (please specify)

Your tax residency.

Please refer to the 'Tax Residency Self-Certification information' in section E of this form before completing the table below.

Country/Jurisdiction(s) of tax residence	Taxpayer Identification Number (TIN)	Enter Reason A, B or C if no TIN is available	If you have selected Reason B, please explain why a TIN was not issued to you
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you an existing Sovereign Home Loans customer?

Yes

No

Home phone

NZ mobile phone

Address

Street

Street

Postal (if different to Home)

Suburb

Suburb

City

City

Postcode

Postcode

Confidentiality of your information

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Signature

Please sign clearly in the centre of box

Date

 / /

C Key individual 4

A Key Individual's Page needs to be completed by all individuals with more than 25% interest and/or effective control of your entity, and those people with any of the roles listed below. Only one form per person is required, no matter how many roles or functions they hold. Identification and proof of address is required for all Key individuals, if they are not already Sovereign Home Loans customers.

1 Organisation relationship

What is your relationship to the organisation?

Select all that apply

Director

Trustee company representative able to act as a trustee

Director of trustee company

Protector/Appointer

Shareholder with greater than 25% interest

Settlor

Shareholder with greater than 25% interest in shareholding organisation

Executor/Administrator

Professional/Independent trustee

Non-discretionary beneficiary with greater than 25% interest in trust

Trustee ▶

Limited, or

Unlimited

2 Personal details

Full name

Date of birth

 / /

Country(s) of citizenship

NZ

Other (please specify)

Your tax residency.

Please refer to the 'Tax Residency Self-Certification information' in section E of this form before completing the table below.

Country/Jurisdiction(s) of tax residence	Taxpayer Identification Number (TIN)	Enter Reason A, B or C if no TIN is available	If you have selected Reason B, please explain why a TIN was not issued to you
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you an existing Sovereign Home Loans customer?

Yes

No

Home phone

NZ mobile phone

Address

Street

Street

Postal (if different to Home)

Suburb

Suburb

City

City

Postcode

Postcode

Confidentiality of your information

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Signature

Please sign clearly in the centre of box

Date

 / /

D Company declaration

1 Declaration

All information provided is complete and accurate and no information has been withheld on the Company's financial position or commitments that might affect our decision to provide accounts, facilities and services to the Company.

Signed on behalf of the company by

Name of Director/ Authorised Signatory	<input type="text"/>
Position/Designation	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text" value="/"/> <input type="text" value="/"/>

Name of Director/ Authorised Signatory	<input type="text"/>
Position/Designation	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text" value="/"/> <input type="text" value="/"/>

Name of Director/ Authorised Signatory	<input type="text"/>
Position/Designation	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text" value="/"/> <input type="text" value="/"/>

Name of Director/ Authorised Signatory	<input type="text"/>
Position/Designation	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text" value="/"/> <input type="text" value="/"/>

NOTE - To be signed:

- (a) By one director if there is only one director; or
- (b) By two directors, if there are two or more directors

E Tax Residency Self-Certification Information

Please read the following information before completing the “Country/Jurisdiction(s) of Tax Residence” details on pages 3, 7, 8, 9 and 10

Why do you need to provide this information?

The Tax Administration Act 1994 supports the implementation of the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA) in New Zealand. CRS and FATCA require certain New Zealand Financial Institutions to collect and report particular information about an Account Holder's tax residence.

What is tax residence?

For entities:

Your tax advisor can assist you in answering specific questions on this form. The OECD and IRD websites can provide guidance regarding how to determine the tax residence of your entity.

For key individual(s):

Each country/jurisdiction has its own rules to define tax residence. Generally your jurisdiction of tax residence is the country where you have a permanent place of abode. Special circumstances may cause you to be resident elsewhere or resident in more than one country at the same time. If you are a United States (US) citizen or a Green Card holder, you must indicate that you are a US tax resident on this form.

If the tax residence of the entity or the key individual(s) related to it is located outside of New Zealand, we may be legally obliged to pass on the information in this form and other information with respect to your financial accounts to the IRD. The IRD may then exchange this information with tax authorities of another country/jurisdiction.

If you are unsure about your tax residence, please contact your tax advisor. Alternatively you can check the OECD website, which includes tax residence information for a number of countries or the Inland Revenue website for further information on NZ tax residence.

Please note that as a Financial Institution, we are not allowed to give tax advice.

What is a taxpayer identification number (TIN) or functional equivalent?

The TIN or its equivalent is a unique combination of letters or numbers assigned by a country/jurisdiction to an individual or an entity and used to identify the individual or entity for the purposes of administering the tax laws of such jurisdiction. In New Zealand the TIN is equivalent to the IRD number. Some examples of a TIN or its equivalent for an entity includes a business/company registration code/number. For an individual this includes a social security/insurance number, citizen/personal identification/service code/number, and resident registration number.

Completing the tax residence table (Section A)

In this table, please list all applicable country/jurisdiction(s) where your company is tax resident, including New Zealand. For each country/jurisdiction, except New Zealand, you will need to provide a taxpayer identification number (TIN) or equivalent.

If a TIN is not available for that country/jurisdiction, use the appropriate reason A, B or C. See below for details on each reason.

Reason A The country/jurisdiction where the Company is tax resident does not issue a TIN to its residents

Reason B The Company has not been issued a TIN by its country/jurisdiction of tax residence (please include an explanation as to why a TIN was not issued to the Company in the “Explanation for Reason B” column for the corresponding entry number)

Reason C The domestic law of the country/jurisdiction where the Company is tax resident does not require the collection of a TIN.

Completing the tax residence table in the key individual page (Section C)

In this table, please list all applicable country/jurisdiction(s) where you (as the Key Individual) are a tax resident, including New Zealand. For each country/jurisdiction, except New Zealand, you will need to provide a taxpayer identification number (TIN) or equivalent.

If a TIN is not available for that country/jurisdiction, use the appropriate reason A, B or C. See below for details on each reason.

Reason A The country/jurisdiction where the Key Individual is tax resident does not issue a TIN to its residents

Reason B The Key Individual has not been issued a TIN by his/her country/jurisdiction of tax residence (please include an explanation as to why a TIN was not issued to the Key Individual in the “Explanation for Reason B” column for the corresponding entry number)

Reason C The domestic law of the country/jurisdiction where the Key Individual is tax resident does not require the collection of a TIN.

Additional information

Based on the information you provide us, we may contact you for further information.

