

Identity Verification Authorisation Form

A

Individual Details

NAME & ADDRESS

Title *please select one*

Mr Mrs Miss Ms Dr Other _____

Full Name *first, middle and last name*

Preferred Salutation *if different from full name*

Residential Address *where you live, not a PO Box number*

Post code | | | | |

Mailing Address *if not the same as residential address*

Post code | | | | |

CONTACT DETAILS & COMMUNICATIONS

Home Ph _____ Mobile _____

Work Ph _____

Email _____

PERSONAL DETAILS, CITIZENSHIP & RESIDENCY STATUS

Gender Male Female

Date of Birth | D | D | | M | M | | Y | Y | Y | Y |

Country of Birth NZ Other *specify* _____

Country of Citizenship NZ Other *specify* _____

Country of Tax Residency NZ Other *specify* _____

New Zealand Residency Status *tick one box only*

Permanent Resident Resident Visa Work Permit
 Long Term Business Visa Other *specify* _____

Occupation & Employer

Occupation _____

Employer _____

Public Office

Have you, or an immediate family member, ever held a public office position e.g. diplomat, high level judicial, military or ministerial position in New Zealand or overseas?

No Yes *specify* _____

Salutation

This is how you would like your communication addressed.

TAXATION DETAILS

New Zealand Tax Details

IRD Number

Foreign Tax Details

Australian Tax Number

US IRS Tax Identification Number (SSN or TIN)

UK National Insurance Number

Other

Country Identification Number

Country Identification Number

I am a US citizen or considered to be a US resident for US tax purposes.

Yes No



Account Details

Account Name *full name of account*

Account Number

Role on Account

Account Name *full name of account*

Account Number

Role on Account

Account Name *full name of account*

Account Number

Role on Account

Account Name *full name of account*

Account Number

Role on Account



Identity and Address Verification

To meet our requirements under the Anti-Money Laundering and Countering Financing of Terrorism Act 2009, we are required to verify your identity and address information.

We can identify you one of two ways:

1. Electronically ; or
2. Manually.

If you choose manual verification, you will need to provide us with certified copies of the documents listed in Section D.

Information provided will be handled in accordance with clause 26 'Use and Disclosure of Information' CIP Terms and Conditions.

Please select how you would like your information to be verified:

ELECTRONICALLY *please provide details for one of the following:*

NZ Passport

NZ Passport Number

_____ Expiry Date | D | D | | M | M | | Y | Y | Y | Y | |

NZ Drivers Licence

NZ Drivers Licence Number

Card Version Number

We will contact you if we are not able to verify your identity information electronically.

I consent to Craigs Investment Partners Limited* using the personal information that I have provided to verify my identity electronically and where necessary disclosing the information to external and independent agencies for the purpose of matching my information with identification information held in third party databases including the Department of Internal Affairs, the New Zealand Transport Authority and White Pages.

Full Name *first, middle and last name*

Signature

_____ Date | D | D | | M | M | | Y | Y | Y | Y | |

OR

MANUALLY *please refer to Section D for a list of acceptable documents*



I agree to provide certified identity documents to Craigs Investment Partners* to verify my identity and address information.

Full Name *first, middle and last name*

Signature

_____ Date | D | D | | M | M | | Y | Y | Y | Y | |

**If I am a client of QuayStreet Asset Management Limited or Craigs Investment Partners Superannuation Management Limited, a related company of Craigs Investment Partners Limited, I consent to the related company providing my personal information to Craigs Investment Partners Limited for the purpose of undertaking identity and address verification.*

D

Documents to be Provided for Manual Identity Verification Purposes

To comply with our obligations under the Anti-Money Laundering and Countering the Financing of Terrorism Act (AML/CFT Act) we are required to collect information on the identity and address of our clients, any person authorised to act on behalf of our client and any Beneficial Owner of our client, and to verify this information using relevant identification documents.

Certification

All identity documents must be certified by either a Justice of the Peace, a Lawyer, a Notary Public, a New Zealand Chartered Accountant, a New Zealand Police Constable or a Member of Parliament.

Certified documents must include the full name, occupation and an original signature of the certifier and the date of certification. Certification must have been carried out in the three months preceeding presentation of the certified documents. The certifier must sight the original documents and make a statement that the documents provided are a true copy and represent the identity of the named individual.

Alternatively documents can be verified by your Craigs Investment Partners Adviser.

Option 1

A certified copy of ONE of the following:



- New Zealand or overseas passport containing your name, date of birth, photograph and signature
- New Zealand firearms licence
Firearms Licence: If you provide us with a certified copy of a Firearms Licence, please also provide a certified copy of a NZ Driver Licence or card issued by a registered bank showing your name and signature in order for us to verify your signature on your Client Agreement.
- A national identity card issued by a foreign government, the United Nations or an agency of the United Nations containing your name, date of birth, photograph and signature.

OR

Option 2

(A New Zealand Driver Licence and a second document from the list below)

A certified copy of:



- New Zealand driver licence

AND a certified copy of one of the following:

- New Zealand full birth certificate
- Certificate of New Zealand or overseas citizenship
- A credit card, debit card or eftpos card issued by a New Zealand registered bank that contains your name and signature
- A bank statement issued by a New Zealand registered bank in the 12 months immediately preceeding the date of the application
- A statement issued to you by a government agency in the 12 months immediately preceeding the date of the application e.g. Inland Revenue
- SuperGold card.

PROOF OF RESIDENTIAL ADDRESS

A certified copy of one of the following issued within the last three months that includes your name and address:



- Utilities bill
- Rates bill
- Bank account statement
- A statement issued to you by a government agency in the last 12 months immediately preceeding the date of the application e.g. Inland Revenue.