



AML Form for an Individual (Form 1)

NZ Funds as a financial institution is required by law to collect identity and address information on its customers.

This form is to be used for natural persons only.

Please print in BLOCK letters and complete all fields unless not applicable.

Client details

Account name

Existing client

Yes - NZ Funds client number

Not an existing client

Individual

Name

Title (Mr / Mrs / Miss / Ms / Dr)

First name

Middle name(s)

Surname

Date of birth

Residential address (not PO Box)

Street

Suburb

City

Postcode

Occupation

IRD Number

Country of birth

Citizenship(s)

Identity verification

There are three ways to complete identity verification. The options are:

- 1a) Documentary identity verification, completed face-to-face by an Authorised Individual*; or
- 1b) Documentary identity verification, completed by a trusted referee; or
- 2) Electronic identity verification.

1a & 1b - Documentary identity verification

Identity information

In order to verify your identity, select and tick **ONE** of the ID combination columns below:

ID Combination 1	ID Combination 2	ID Combination 3
<input type="radio"/> NZ driver licence. And ONE of the documents listed below: <input type="radio"/> Credit, debit or eftpos card (including name and signature) <input type="radio"/> Bank statement <input type="radio"/> Government agency document (e.g. IRD correspondence)	<input type="radio"/> NZ driver licence, OR <input type="radio"/> 18+ card. And ONE of the documents listed below: <input type="radio"/> Full birth certificate <input type="radio"/> Citizenship certificate	<input type="radio"/> Passport, OR <input type="radio"/> NZ firearms licence.

Continued over...

Residential address documentation

In order to verify your residential address, select and tick **ONE** of the options below. This document must be no more than three months old.

- | | |
|---|---|
| <input type="radio"/> Bank or financial institution statement | <input type="radio"/> Rates or house insurance document |
| <input type="radio"/> Utility document
(e.g., electricity, gas, water, landline telephone or Sky TV) | <input type="radio"/> Government agency document
(e.g., correspondence from IRD or an educational institution) |

For persons under 18 years of age

- Should the identity information options above be unavailable, a birth certificate or student card are acceptable.
- Should the residential address documentation options be unavailable, proof of the address of the parent(s) or guardian(s) that the minor resides with is acceptable.

Exception handling procedures

Where an individual is unable to supply documents as detailed previously, please contact NZ Funds on 0508 733 337 or via email at info@nzfunds.co.nz.

1a - Documentary identity verification completed face-to-face by an Authorised Individual*

- Authorised Individual* has sighted the original documents selected above, each of which represents the identity (ie, name, date of birth, and residential address) of the named individual. Please ensure copies of the selected documents are attached to this form.

1b - Documentary identity verification, completed by a trusted referee

A Trusted Referee must be:

- at least 16 years of age; and
- not related, spouse or partner, living at the same residential address or involved in the transaction or business; and
- one of the following (please select and tick):

- | | | |
|---|--|--|
| <input type="radio"/> Commonwealth representative | <input type="radio"/> Member of the police | <input type="radio"/> Justice of the Peace |
| <input type="radio"/> Registered medical doctor | <input type="radio"/> Kaumātua | <input type="radio"/> Registered teacher |
| <input type="radio"/> Minister of religion | <input type="radio"/> Lawyer | <input type="radio"/> Notary Public |
| <input type="radio"/> New Zealand Honorary Consul | <input type="radio"/> Member of Parliament | <input type="radio"/> Chartered accountant |
| <input type="radio"/> A person who has legal authority to take statutory declarations | | |

Note: document certification must occur no earlier than three months prior to the date of presentation.

Name

I, , Trusted Referee,

- have sighted the original documents selected above, each of which represents the identity (i.e., name, date of birth and residential address) of the named individual; and
- have signed copies of those documents and attached these to this form; and
- confirm that the copies of those documents attached are true copies of the original documents of the above named individual sighted by me today.

Signature of Trusted Referee

Date

2 - Electronic identity verification

- Authorised Individual* has ensured an Electronic Verification certificate has identified and verified the named individual and a copy of that certificate is attached to this form.

Identity verification by an Authorised Individual*

Name

I, , have verified client identity information as is required by the Anti-Money Laundering and Countering Financing of Terrorism Act 2009.

Signature of Authorised Individual*

Date

* Authorised Individual refers to an authorised person listed on the NZ Funds 'Register of Individuals Authorised to perform CDD'.