## Client Information - Trusts



Trust Name  Advise all trading names (if applicable)  Nature and purpose of the Trust and business being undertaken  Is the Trust a New Zealand trust Ves/No  Country of creation (if not New Zealand)  Countries of tax residence (if not New Zealand)  Trust IRD number  Name of Settlor(s)  Trust Bank account details  Name of Bank:  Name of Bank:  Name of account:  Account number:  Suburb:  Town/City:  Business phone:  Email:  Key Contact Person Details  Name:  Title:  Home phone:	Client Number:		Person Acting:
Nature and purpose of the Trust and business being undertaken    Is the Trust a New Zealand trust	Trust Name		
Nature and purpose of the Trust and business being undertaken    Is the Trust a New Zealand trust			
Is the Trust a New Zealand trust Yes/No  Country of creation (if not New Zealand)  Countries of tax residence (if not New Zealand)  Trust IRD number  Name of Bank: Name of Bank: Name of account: Account number:  Name of Appointor(s)  Residential address (do not include PO Box)  Street address:  Suburb: Town/City: Postcode:  Country: Business phone: Email:  Key Contact Person Details Name: Title:	Advise all trading names (if applicable)		
Is the Trust a New Zealand trust  Country of creation (if not New Zealand)  Countries of tax residence (if not New Zealand)  Trust IRD number  Name of Appointor(s)  Residential address (do not include PO Box)  Street address:  Suburb:  Town/City:  Postcode:  Country:  Business phone:  Email:  Key Contact Person Details  Name:  Title:			
Country of creation (if not New Zealand)  Countries of tax residence (if not New Zealand)  Trust bank account details  Name of Bank:  Name of account:  Account number:  Name of Appointor(s)  Residential address (do not include PO Box)  Street address:  Suburb:  Town/City:  Business phone:  Email:  Key Contact Person Details  Name:  Title:	Nature and purpose of the Trust and business b	eing undertaken	n
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Country of creation (if not New Zealand)  Countries of tax residence (if not New Zealand)  Trust lRD number  Name of Appointor(s)  Residential address (do not include PO Box)  Street address:  Suburb:  Town/City: Postcode:  Key Contact Person Details  Name: Title:	Is the Trust a New Zealand trust Yes	/No	Name of Settlor(s)
Name of Bank:   Name of account:   Account number:			
Name of Bank:   Name of account:   Account number:			
Name of account:  Account number:    Name of Appointor(s)	Countries of tax residence (if not New Zealand)		Trust bank account details
Name of Appointor(s)  Residential address (do not include PO Box)  Street address:  Town/City: Business phone: Email:  Key Contact Person Details  Name: Town/City: Postcode:  Title:			Name of Bank:
Name of Appointor(s)  Residential address (do not include PO Box)  Street address:  Suburb:  Town/City:  Business phone:  Email:  Key Contact Person Details  Name:  Town/City:  Title:	Trust IRD number		Name of account:
Street address:  Suburb: Town/City: Postcode: Country: Business phone: Email:  Key Contact Person Details Name: Town/City: Title:			Account number:
Street address:  Suburb: Town/City: Postcode: Country: Business phone: Email:  Key Contact Person Details Name: Town/City: Title:			
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Suburb:  Town/City: Postcode:  Country: Business phone: Email:  Key Contact Person Details Name: Town/City: Postcode:  Title:	Name of Appointor(s)		
Town/City: Postcode:  Country:  Business phone:  Email:  Key Contact Person Details  Name:  Town/City: Title:			Street dudress.
Town/City: Postcode:  Country:  Business phone:  Email:  Key Contact Person Details  Name:  Town/City: Title:			Suburb:
Country: Business phone: Email:  Street address:  Key Contact Person Details Name: Town/City: Postcode:  Title:			
Mailing address  Street address:  Suburb:  Town/City:  Business phone:  Email:  Key Contact Person Details  Name:  Title:			
Mailing address  Street address:  Key Contact Person Details  Name:  Town/City:  Postcode:  Title:			
Street address:  Key Contact Person Details  Name:  Town/City: Postcode: Title:	Mailing address		
Suburb: Name: Town/City: Postcode: Title:	Street address:		
Town/City: Postcode: Title:			Key Contact Person Details
	Suburb:		Name:
Country: Home phone:	Town/City:	Postcode:	Title:
	Country:		Home phone:
Website: Business phone:	Website:		Business phone:
Accountant name (if applicable): Mobile phone:	Accountant name (if applicable):		Mobile phone:
Accountant address: Email:	Accountant address:		Email:

Trustees				
Trustee 1	Trustee 2			
Name	Name			
Date of Birth	Date of Birth			
Address	Address			
Trustee 3	Trustee 4			
Name	Name			
Date of Birth	Date of Birth			
Address	Address			
Note: Each Appointor and Trustee must complete a "Client In address in accordance with Schedule.	formation – Individual" form and provide verified identity and			
Beneficiaries  Option 1 – If the Trust is discretionary or has more than ten named ben provide a description of each class/type of beneficiary below.	neficiaries, please insert the relevant Trust Deed clause number(s) or			
Option 2 – If the Trust is not discretionary, please detail the named ben  Named Beneficiary 1 (if not discretionary)  Name	eficiaries below.  Named Beneficiary 2 (if not discretionary)  Name			
Ownership %	Ownership %			
Date of Birth	Date of Birth			
Named Beneficiary 3 (if not discretionary)	Named Beneficiary 4 (if not discretionary)			
Name	Name			
Ownership %	Ownership %			
Date of Birth	Date of Birth			
Note: Any "fixed" beneficiary with a 25% or greater share in the Trust must complete a "Client Information – Individual" form in accordance with Schedule.				
I/We certify that all information supplied is true and correct	I/We certify that all information supplied is true and correct			
Signature	Signature			
Name	Name			
Title	Title			
Data	Data			
Date	Date			

[Internal Use Only]		
<ul> <li>Has Source of Wealth/Funds been undertaken and summary provided?</li> <li>Have verified identity and address documents for Appointor(s), Trustee(s) and fixed beneficiaries been obtained?</li> <li>Red flags check undertaken and attached.</li> <li>If form completion has previously been delayed, attach authorised Due Diligence form.</li> </ul>		
Send all forms to Compliance Officer		
Completed by:  (Name)  (Date)		