

# Forsyth Barr Investment Funds

## Product Disclosure Statement

### Offer of units in the Forsyth Barr Investment Funds

**Date:** 24 September 2018

**Issuer:** Forsyth Barr Investment Management Limited

This document replaces the product disclosure statement dated 8 February 2018.

This document gives you important information about this investment to help you decide whether you want to invest. There is other useful information about this offer on [www.companiesoffice.govt.nz/disclose](http://www.companiesoffice.govt.nz/disclose).

Forsyth Barr Investment Management Limited has prepared this document in accordance with the Financial Markets Conduct Act 2013. You can also seek advice from a financial adviser to help you make an investment decision.





# 1: Key information summary

## What is this?

This is a managed investment scheme. Your money will be pooled with other investors' money and invested in various investments. Forsyth Barr Investment Management Limited will invest your money and charge you a fee for its services. The returns you receive are dependent on the investment decisions of Forsyth Barr Investment Management Limited and the performance of the investments. The value of those investments may go up or down. The types of investments and the fees you will be charged are described in this document.

## What will your money be invested in?

With the Forsyth Barr Investment Funds you can choose to invest in any combination of the following six funds offered in this product disclosure statement (**PDS**):

- Forsyth Barr New Zealand Equities Fund
- Forsyth Barr Australian Equities Fund
- Forsyth Barr Listed Property Fund
- Forsyth Barr Global Equities Fund
- Forsyth Barr Premium Yield Fund
- Forsyth Barr NZ Fixed Interest Fund

These investment options are summarised on the next page. More information about the investment target and strategy for each investment option is provided at **section 3 'Description of your investment options'**.

## Who manages the Forsyth Barr Investment Funds?

Forsyth Barr Investment Management Limited (referred to as "**we**" or "**us**" in this PDS) manages the Forsyth Barr Investment Funds. You can find further information about us in **section 7 'Who is involved?'**.

## How can you get your money out?

You can withdraw your money by redeeming your units. You may request a withdrawal from any fund at any time, provided you meet minimum withdrawal and balance requirements. Units in the funds are priced on each business day.

Withdrawal requests are made by sending us a withdrawal notice, which tells us the amount that you want to withdraw or the number of units that you want to withdraw, and which fund(s) you want to withdraw from. We are able to suspend, defer or partially restrict withdrawals in certain circumstances.

Your investment in the Forsyth Barr Investment Funds can be sold, but there is no established market for trading these financial products. This means that you may not be able to find a buyer for your investment.

For more information, see **section 2 'How does this investment work?'**.

## How will your investment be taxed?

Each of the funds is a type of Portfolio Investment Entity (**PIE**) known as a multi-rate PIE.

The amount of tax you pay in respect of a PIE is based on your prescribed investor rate (**PIR**). This can be 0%, 10.5%, 17.5% or 28%. **See section 6 of the PDS 'What taxes will you pay?'** on page 14 for more information.

## Where can you find more key information?

We are required to publish quarterly updates for each fund. The updates show the returns, and the total fees actually charged to investors, during the previous year. The latest fund updates are available at [www.forsythbarr.co.nz/investing-with-us/investment-funds/](http://www.forsythbarr.co.nz/investing-with-us/investment-funds/). We will also give you copies of those documents on request.

### Forsyth Barr New Zealand Equities Fund

**Brief description of fund and investment objective** The fund aims to achieve positive long-term returns by investing in selected New Zealand shares, subject to the risks associated with investments in share markets.



**Annual fund charges\*** 1.30%

### Forsyth Barr Australian Equities Fund

**Brief description of fund and investment objective** The fund aims to achieve positive long-term returns by investing in selected Australian shares, subject to the risks associated with investments in international share markets.



**Annual fund charges\*** 1.30%

### Forsyth Barr Listed Property Fund

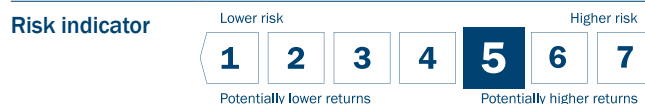
**Brief description of fund and investment objective** The fund aims to achieve positive long-term returns by investing in selected listed property vehicles, subject to the risks associated with investments in listed property assets.



**Annual fund charges\*** 1.30%

### Forsyth Barr Global Equities Fund

**Brief description of fund and investment objective** The fund aims to achieve positive long-term returns by investing in selected international shares, subject to the risks associated with investments in international share markets.



**Annual fund charges\*** 1.55%

### Forsyth Barr Premium Yield Fund

**Brief description of fund and investment objective** The fund aims to achieve positive long-term returns by investing in selected New Zealand and international fixed interest assets, subject to the risks associated with investments in fixed interest markets.



**Annual fund charges\*** 0.80%

### Forsyth Barr NZ Fixed Interest Fund

**Brief description of fund and investment objective** The fund aims to achieve positive long-term returns by investing in selected New Zealand dollar denominated fixed interest assets, subject to the risks associated with investments in fixed interest markets.



**Annual fund charges\*** 0.80%

\* % of the fund's net asset value (estimated) – for more information, see section 5 'What are the fees?'.

See section 4 'What are the risks of investing?' for an explanation of the risk indicator and for information about other risks that are not included in the risk indicator. To help you clarify your own attitude to risk, you can seek financial advice or work out your own risk profile at [www.sorted.org.nz/tools/investor-kickstarter](http://www.sorted.org.nz/tools/investor-kickstarter).

# 1: Contents

1:	Key information summary.....	1
2:	How does this investment work? .....	4
3:	Description of your investment options.....	7
4:	What are the risks of investing?.....	10
5:	What are the fees? .....	12
6:	What taxes will you pay?.....	14
7:	Who is involved? .....	14
8:	How to complain .....	15
9:	Where you can find more information .....	16
10:	How to apply .....	16

## 2: How does this investment work?

The Forsyth Barr Investment Funds are a managed investment scheme, which is a type of investment where your money is pooled with other people's money, and invested by a manager.

### How the funds are set up

Each fund is set up as a trust, with its own investment objectives and permitted investments. A **Master Trust Deed** between the Supervisor and us governs the Forsyth Barr Investment Funds generally, and an **Establishment Deed** sets up the individual funds. Each fund has its own assets and liabilities, and assets of one fund can't be used by another fund.

As the manager, we decide which investments the funds will make, and give instructions to the Supervisor about those investments. The Supervisor, or a custodian appointed by the Supervisor, holds the investments of the funds. The Supervisor also makes sure that we perform our duties. We work together with the Supervisor for your benefit.

### Units and unit values

Each time you invest money, you will receive units in the fund or funds that you have chosen. Each unit in a fund is the same as any other unit in that fund, and represents an interest in the net assets of that fund. See 'Making investments' on the right for more information.

Units are valued on each business day, and the number of units you receive when you invest in a fund will depend on the unit value when you invest.

We calculate the value of each unit in the fund that you are investing in by taking the total value of the fund's assets less liabilities (including any accrued fees or charges), and dividing it by the number of units that have been issued to investors.

Unit values will go up and down over time as the value of the investments that make up the fund changes.

When you withdraw your money from a fund, you will give up your units and you will get a cash payment back. The amount you receive when you withdraw will depend on the number of units you give up and the unit value at the time of withdrawal. See 'Withdrawing your investments' on the next page for more information.

### Key benefits

The Forsyth Barr Investment Funds allow you to create your own portfolio of investments by choosing any combination of our funds.

The key benefits to you from investing in Forsyth Barr Investment Funds are:

- You have a choice of six funds, each representing a particular asset class (an **asset class** is a collection of investments with similar characteristics). You can choose to invest in one or more of the funds
- Each fund gives you access to a portfolio of investments selected by our team of investment professionals who actively monitor and manage the investments
- You can make a lump sum investment at any time or establish a regular contribution plan
- You can switch easily between funds.

No distributions are paid out of the funds - income from a fund's investments is retained in the fund.

### **Making investments**

You can choose to invest in one fund, or a combination of funds.

There is currently no minimum initial investment amount or minimum additional lump sum investment. However, we will only accept additional regular contributions by direct debit if you contribute a minimum of \$1,200 per year (unless we agree to waive this). These minimums may change in the future.

You can apply for units in any fund by sending us a completed application form, with payment by direct credit or direct debit. Your investment is made by the purchase of units in the fund(s) that you select. If we receive your application and payment before 5pm on a business day, your application will be processed based on the unit values for that day. If we receive your application and payment at or after 5pm on a business day (or we receive it on a day that is not a business day), your application will be processed based on the unit values for the next business day.

We can decide not to accept your application for units. If that happens we will let you know.

You can find more information about how to make an investment in the funds in **section 10 'How to apply'**.

### **Withdrawing your investments**

You may apply to withdraw your money from the funds at any time. Withdrawal applications are made by sending us a notice which specifies the amount to be withdrawn from the fund(s) that you are invested in. If we receive your withdrawal notice before 5pm on a business day, your withdrawal will be processed based on the unit values for that day. If we receive your withdrawal notice at or after 5pm on a business day (or we receive it on a day that is not a business day) your withdrawal will be processed based on the unit values for the next business day. You may also need to pay PIE tax when you make a withdrawal, if so we will deduct that when we process your withdrawal.

You can make a lump sum withdrawal, or set up a regular withdrawal facility. Currently, no minimum amounts apply to withdrawals.

Contact us for a simple form to withdraw your money.

### **How to switch between funds**

You can switch your investments between different funds at any time. When you make a switch we treat it as a withdrawal from the fund that you wish to exit, and an application to buy units in the new fund that you have decided to invest in. As a result, you may need to pay PIE tax when your withdrawal is processed.

Contact us for a simple form to switch your existing investments.

### **Deferring and suspending withdrawals**

We can defer processing a withdrawal or switching notice for up to five business days if we need to sell investments to meet the payment out of the fund you are withdrawing from. The applicable unit values will be those for the day we process the notice.

We may suspend withdrawals from and switches out of a fund if we decide to close the fund, or in any other circumstance where we believe accepting withdrawals would not be workable or would prejudice investors in a particular fund or investors in the funds generally (for example, if trading was suspended on a relevant exchange, or we received a large volume of withdrawal requests around the same time for the same fund). A suspension can last up to 90 days, and may be extended with the consent of the Supervisor. If withdrawals are suspended for a fund, we will let anyone who submits a withdrawal notice know that it will not be processed until the suspension is lifted.

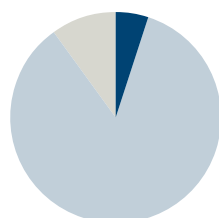
With the Supervisor's consent, we may separate out ("side-pocket") some of a fund's investments, if we believe that it is the best interests of the investors in the fund to do that (for example, if some of the fund's investments become illiquid). Usually, this will mean that a new class of units will be created, representing investors' interests in the "side-pocketed" investments. Units in this new class will be allocated to the fund's investors, but you won't be able to withdraw or switch them. If this happens we will let you know.

### 3: Description of your investment options

#### Forsyth Barr New Zealand Equities Fund

**Summary of investment objective and strategy:** The fund aims to achieve positive long-term returns by investing in selected New Zealand shares, subject to the risks associated with investments in share markets. We may invest directly into these assets, or into other managed investment schemes that do so. These kinds of investments will typically have moderate to high levels of movement up and down in value. They can be suitable for someone who wants to invest in shares, and is comfortable with that level of movement, with a view to achieving improved longer-term returns.

**Target investment mix:**



**We aim to invest in...**

● Cash and cash equivalents	5%
● New Zealand fixed interest	0%
● International fixed interest	0%
● Australasian equities	85%
● International equities	0%
● Listed property	10%

**Risk indicator:**

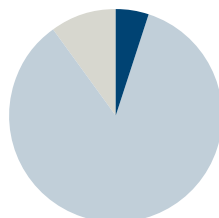


**Minimum suggested investment timeframe:** At least five years

#### Forsyth Barr Australian Equities Fund

**Summary of investment objective and strategy:** The fund aims to achieve positive long-term returns by investing in selected Australian shares, subject to the risks associated with investments in international share markets. We may invest directly into these assets, or into other managed investment schemes that do so. These kinds of investments will typically have very high levels of movement up and down in value. They can be suitable for someone who wants to invest in shares and is comfortable with that level of movement, with a view to achieving higher longer-term returns.

**Target investment mix:**



**We aim to invest in...**

● Cash and cash equivalents	5%
● New Zealand fixed interest	0%
● International fixed interest	0%
● Australasian equities	85%
● International equities	0%
● Listed property	10%

**Risk indicator:**



**Minimum suggested investment timeframe:** At least five years

## Forsyth Barr Listed Property Fund

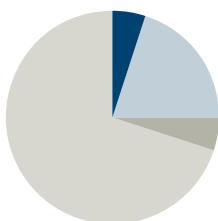
### Summary of investment objective and strategy:

The fund aims to achieve positive long-term returns by investing in selected listed property vehicles, subject to the risks associated with investments in listed property assets.

We may invest directly into these assets, or into other managed investment schemes that do so.

These kinds of investments will typically have moderate to high levels of movement up and down in value. They can be suitable for someone who wants to invest in listed property vehicles and is comfortable with that level of movement, with a view to achieving improved longer-term returns.

### Target investment mix:



### We aim to invest in...

Cash and cash equivalents	5%
New Zealand fixed interest	0%
International fixed interest	0%
Australasian equities	20%
International equities	5%
Listed property	70%

### Risk indicator:



**Minimum suggested investment timeframe:** At least five years

## Forsyth Barr Global Equities Fund

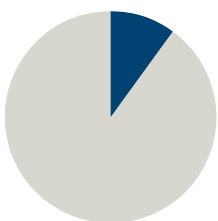
### Summary of investment objective and strategy:

The fund aims to achieve positive long-term returns by investing in selected international shares, subject to the risks associated with investments in international share markets.

We may invest directly into these assets, or into other managed investment schemes that do so.

These kinds of investments will typically have high levels of movement up and down in value. They can be suitable for someone who wants to invest in shares and is comfortable with that level of movement with a view to achieving higher longer-term returns.

### Target investment mix:



### We aim to invest in...

Cash and cash equivalents	10%
New Zealand fixed interest	0%
International fixed interest	0%
Australasian equities	0%
International equities	90%
Listed property	0%

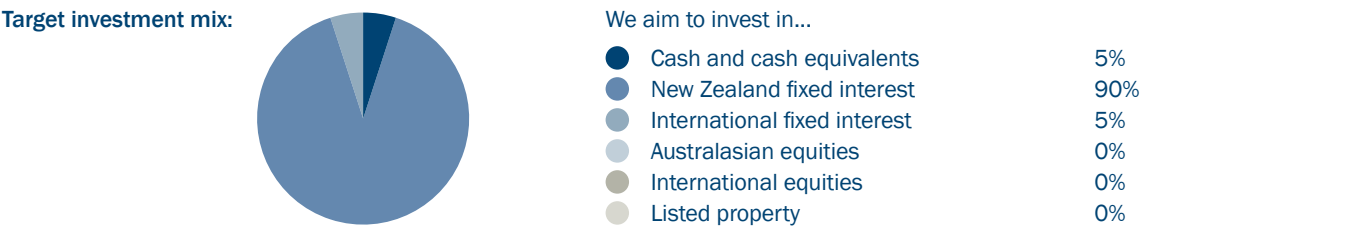
### Risk indicator:



**Minimum suggested investment timeframe:** At least five years

Forsyth Barr Premium Yield Fund

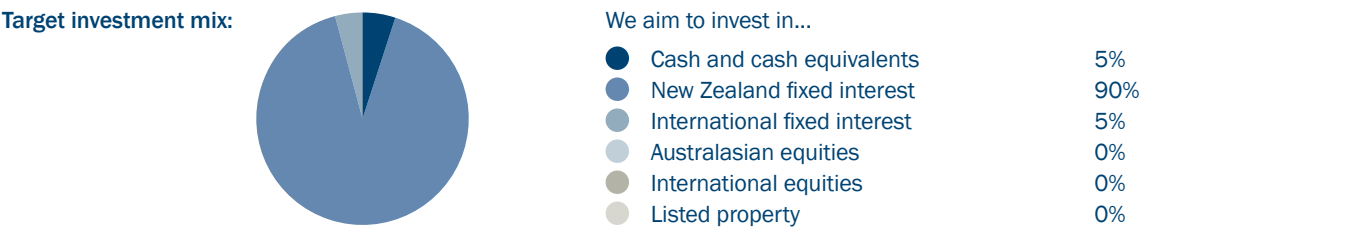
**Summary of investment objective and strategy:** The fund aims to achieve positive long-term returns by investing in selected New Zealand and international fixed interest assets, subject to the risks associated with investments in fixed interest markets. We may invest directly into these assets, or into other managed investment schemes that do so. Typically, the fund is close to fully invested in New Zealand fixed interest assets. These kinds of investments will typically have low levels of movement up and down in value. They can be suitable for someone who wants to achieve slightly higher returns than those expected from investing solely in cash, but with the possibility of some variation in returns.



**Minimum suggested investment timeframe:** At least three years

Forsyth Barr NZ Fixed Interest Fund

**Summary of investment objective and strategy:** The fund aims to achieve positive long-term returns by investing in selected New Zealand dollar denominated fixed interest assets, subject to the risks associated with investments in fixed interest markets. We may invest directly into these assets, or into other managed investment schemes that do so. These kinds of investments will typically have low levels of movement up and down in value. They can be suitable for someone who wants to achieve slightly higher returns than those expected from investing solely in cash, but with the possibility of some variation in returns.



**Minimum suggested investment timeframe:** At least three years

We review the Statement of Investment Policies and Objectives (SIPO) for the funds annually, and also if market conditions mean that we need to. Our review looks at the type of investments that can be made by the funds and any limits on those. We do not need to give you notice of any changes, but we will discuss them with the Supervisor. You can find the latest SIPO at [www.companiesoffice.govt.nz/disclose](http://www.companiesoffice.govt.nz/disclose), and

material changes to the SIPO made during each year will be described in the funds' annual report. Further information about the assets in each of the funds can be found in the fund updates at [www.forsythbarr.co.nz/investing-with-us/investment-funds/](http://www.forsythbarr.co.nz/investing-with-us/investment-funds/).

## 4: What are the risks of investing?

### Understanding the risk indicator

Managed funds in New Zealand must have a standard risk indicator. The risk indicator is designed to help investors understand the uncertainties both for loss and growth that may affect their investment. You can compare funds using the risk indicator. Below is an example of a risk indicator:



See **section 3 'Description of your investment options'** for the risk indicators that have been calculated for the funds.

The risk indicator is rated from 1 (low) to 7 (high). The rating reflects how much the value of the relevant fund's assets goes up and down (volatility). A higher risk generally means higher potential returns over time, but more ups and down along the way. To help you clarify your own attitude to risk, you can seek financial advice or work out your risk profile at [www.sorted.org.nz/tools/investor-kickstarter](http://www.sorted.org.nz/tools/investor-kickstarter).

Note that even the lowest category does not mean a risk-free investment, and there may be other risks that are not captured by this rating.

This risk indicator is not a guarantee of a fund's future performance. The risk indicator is based on the returns data for the five years to 30 June 2018. While risk indicators are usually relatively stable, they do shift from time to time. You can see the most recent risk indicator in the latest fund update for the relevant fund.

### General investment risks

Some of the things that may cause a fund's value to move up and down, which affect the risk indicator are: investment return risk, currency risk, liquidity risk, and manager risk:

#### *Investment return risk*

Investment return risk is the risk of negative or lower than expected returns on your investments. All investments carry some risk, and events affecting investments cannot always be foreseen. This may mean you get back less from your investment in the Forsyth Barr Investment Funds than you hoped for. You might not receive back the full amount you invested in the funds.

Investment return risk comes from various sources, and is different for different asset classes. The following list describes the main investment return risks for the different asset classes. Some of these are 'market' risks - the risk that the value of investments made by the funds are affected by developments in market sentiment, inflation, interest rates, employment, or regulatory and political conditions. Others are 'company' risks - risks that are specific to an investment in a particular business or entity.

#### *Cash and cash equivalents*

The borrower does not pay the interest or repay the principal amount of the debt. Inflation may also erode its value.

#### *Fixed interest*

The borrower does not pay the interest or repay the principal amount of the debt. Also, the market value of fixed interest investments will generally fall if market interest rates rise, or the creditworthiness of the issuer declines. Fixed interest investments are typically more risky than cash and cash equivalents.

#### *Equities (shares) and property*

The risks of equity and listed property investments are similar. They include the risk that if the entity's business performs poorly the value of the investment may fall, and there may be no profits to distribute to investors. The value of the investment may be affected by general market movements as well as issues specific to the entity. Equity and listed property investments are typically more risky than cash and fixed interest investments.

We manage investment return risk by diversifying our investments, and only making investments that are consistent with the fund's investment strategy.

#### **Currency risk**

This is the risk that movements in foreign exchange rates affect the New Zealand dollar value of offshore investments made by the funds. We manage this risk by using foreign exchange hedging (this is where we enter into a financial contract aimed at protecting the fund against changes in foreign exchange rates), and by investing with external managers that can use foreign exchange hedging.

#### **Liquidity risk**

This is the risk that an investment made by a fund may not be able to be sold at the required time, due to a lack of a liquid market for that security. This may result in the investment being sold for less than its fair value, or a fund suspending or deferring withdrawals, or "side-pocketing" assets (because it cannot sell its investments). We manage this risk by maintaining some cash in the funds, and by choosing investments which we think can be sold in a reasonable amount of time.

#### **Manager risk**

This is the risk that we or an external investment manager we select makes poor investment decisions. It can also arise where the performance of a fund depends on our key employees. We try to manage this risk by employing experienced investment professionals, each able to manage a range of funds, and having a thorough selection process for external investment managers.

For more information about the risks of investing, please see the 'Other Material Information' document, which is available on the offer register for the funds at [www.companiesoffice.govt.nz/disclose](http://www.companiesoffice.govt.nz/disclose).

## 5: What are the fees?

You will be charged fees for investing in the funds. Fees are deducted from your investment and reduce your returns. If we invest in other managed investment schemes, they may also charge fees.

The fees you pay will be charged in two ways:

- Regular charges (for example, annual fund charges). Small differences in these fees can have a big impact on your investment over the long term
- One-off fees (currently none)

All fees and charges are quoted exclusive of GST.

### Annual fund charges

Fund	Our management fee	Other annual fund charges (estimated)	Total annual fund charges (estimated)
Forsyth Barr New Zealand Equities Fund	1.25%	0.05%	1.30%
Forsyth Barr Australian Equities Fund	1.25%	0.05%	1.30%
Forsyth Barr Listed Property Fund	1.25%	0.05%	1.30%
Forsyth Barr Global Equities Fund*	1.50%	0.05%	1.55%
Forsyth Barr Premium Yield Fund	0.75%	0.05%	0.80%
Forsyth Barr NZ Fixed Interest Fund	0.75%	0.05%	0.80%

\* Where we invest some or all of this fund's assets in other managed investment schemes, our management fee for that investment will be 0.50% and the other annual fund charges will increase. However, our estimate of the total annual fund charges will remain 1.55%, or lower.

The total annual fund charges are made up of our management fee and other annual fund charges, and are expressed as a percentage of the net asset value of the fund. Unless we pay them out of our fee, the other annual fund charges are deducted from the relevant fund.

### Our management fee

Our fee is calculated daily as a percentage of the net asset value of each fund, and is paid quarterly in arrears. We may rebate all or part of our fee, either generally or for certain unit holders.

We pay the day-to-day expenses of the funds, except the Supervisor's fees, out of our fee.

### Other annual fund charges

Other annual fund charges (and the total annual fund charges) include estimates of:

- the Supervisor's fee. The Supervisor is entitled to a fee for acting as Supervisor as agreed with us from time to time for each fund
- any expenses incurred by the funds that we do not pay out of our fee
- management and administration charges for any managed funds that the funds invest into.

We estimate these charges where they are not fixed percentages of net asset value and where the relevant fund is not 100% invested in the particular underlying managed fund. The actual amounts incurred may vary from our estimates (actual charges over the past 12 months are available in the latest fund updates). More information on how we estimate these charges can be found in the 'Other Material Information' document available on the offer register for the funds at [www.companiesoffice.govt.nz/disclose](http://www.companiesoffice.govt.nz/disclose).

#### **Examples of how fees apply to an investor**

Kim invests \$10,000 in the Forsyth Barr New Zealand Equities Fund.

She is charged annual fund charges, which work out to about \$130 (1.30% of \$10,000). These fees might be more or less if her account balance has increased or decreased over the year.

#### **Estimated total fees for the first year**

Fund charges	\$130
--------------	-------

See the latest fund update at:

[www.forsythbarr.co.nz/investing-with-us/investment-funds/](http://www.forsythbarr.co.nz/investing-with-us/investment-funds/) for an example of the actual returns and fees investors were charged over the past year.

This example applies only to the Forsyth Barr New Zealand Equities Fund. If you are considering investing in other funds in the Forsyth Barr Investment Funds, this example may not be representative of the actual fees you may be charged.

#### **The fees can be changed**

The existing fees may change, new fees may be introduced or we may start charging a fee we are not currently charging. Subject to the Master Trust Deed, we may:

- rebate or reduce any charge, in respect of any investor or group of investors - for example, we may rebate part of our management fee.
- vary the amount or calculation basis of any of the fees - for example, we may increase our management fee for a fund to any amount up to 2% p.a. of the net asset value of the fund.
- start charging fees that we don't currently charge. For example, we may charge an entry and/or exit fee of up to 5% of the amount withdrawn, or introduce a separate fee for lump sum withdrawals.
- agree with the Supervisor increases to its fee.

We must publish a fund update for each fund showing the fees actually charged during the most recent year. Fund updates, including past updates, are available at [www.forsythbarr.co.nz/investing-with-us/investment-funds/](http://www.forsythbarr.co.nz/investing-with-us/investment-funds/).

## 6: What taxes will you pay?

Each of the funds of the Forsyth Barr Investment Funds is a portfolio investment entity. The amount of tax you pay is based on your prescribed investor rate (**PIR**). To determine your PIR go to [www.ird.govt.nz/toii/pir](http://www.ird.govt.nz/toii/pir).

If you are unsure of your PIR, we recommend you seek professional advice or contact the Inland Revenue Department. It is your responsibility to tell us your PIR when you invest or if your PIR changes. If you do not tell us, a default rate may be applied. If the advised PIR is lower than the correct PIR, you will need to complete a personal tax return and pay any tax shortfall, interest and penalties. If the default rate or the advised PIR is higher than the correct PIR, you will not get a refund of any overpaid tax.

## 7: Who is involved?

### About Forsyth Barr Investment Management Limited

We are part of the Forsyth Barr Group, a New Zealand owned firm operating since 1936 that assists personal, institutional and corporate clients. We have managed the Forsyth Barr Investment Funds since they were launched.

Our address is:

Forsyth Barr House  
Corner the Octagon and Stuart Street  
Dunedin  
Phone: 0800 367 227

### Who else is involved?

	Name	Role
Supervisor	Trustees Executors Limited	Supervises us as the manager
Custodian	Trustees Executors Limited (acting through its nominee company T.E.A. Custodians Limited)	Holds the assets of the funds on behalf of investors
Investment management and administration	Forsyth Barr Limited	Provides us with investment management, and day-to-day administration services
Unit pricing and investment accounting	MMC Limited	Provides us with unit pricing and investment accounting services

## 8: How to complain

If you are not satisfied with the service you have received and want to make a complaint, please contact us at:

Forsyth Barr House  
Corner the Octagon and Stuart Street  
Private Bag 1999  
Dunedin 9054

Alternatively phone 0800 367 227, or email  
investmentfunds@forsythbarr.co.nz

If you are not satisfied with the outcome, you can forward your complaint to either:

The Compliance Manager  
Forsyth Barr Limited  
Level 23, Lumley Centre  
88 Shortland Street  
Auckland 1010  
Phone: 0800 367 227  
Email: compliance@forsythbarr.co.nz

Or to the Supervisor:

Trustees Executors Limited  
Level 7, 51 Shortland Street  
PO Box 4197  
Auckland 1010  
Phone: 0800 878 783

We are a member of an independent dispute resolution scheme operated by Financial Services Complaints Limited (**FSCL**). The scheme is approved by the Ministry of Consumer Affairs. The Supervisor is also a member of FSCL. If you are not satisfied with how your complaint has been resolved, you may refer the matter to FSCL.

FSCL  
4th Floor  
101 Lambton Quay  
PO Box 5967  
Wellington 6145  
Phone: 0800 347 257  
Email: info@fscl.org.nz

Full details of how to access the FSCL scheme can be found on FSCL's website [www.fscl.org.nz](http://www.fscl.org.nz).

FSCL will not charge a fee to any complainant to investigate or resolve a complaint.

## **9: Where you can find more information**

You can find further information about the Forsyth Barr Investment Funds including financial statements on the scheme and offer registers at [www.companiesoffice.govt.nz/disclose](http://www.companiesoffice.govt.nz/disclose).

You can get a copy of the information on the scheme and offer registers by asking the Registrar of Financial Service Providers.

You can get fund updates relating to the funds, and other information, at [www.forsythbarr.co.nz/investing-with-us/investment-funds/](http://www.forsythbarr.co.nz/investing-with-us/investment-funds/).

You can also get this information free, by phoning us on 0800 367 227, or by emailing us at [investmentfunds@forsythbarr.co.nz](mailto:investmentfunds@forsythbarr.co.nz).

## **10: How to apply**

### **Apply using the application form**

You can apply to invest in the Forsyth Barr Investment Funds by completing the application form attached to the back of this PDS. Once you have completed it, please attach the required documents and mail it to us:

Forsyth Barr Investment Funds  
c/- Forsyth Barr Investment Management  
Limited  
Private Bag 1999  
Dunedin 9054



# Forsyth Barr Investment Funds Application Form

Product Disclosure Statement for the Forsyth Barr Investment Funds dated 24 September 2018

Trusts and Estates

## Section A: Applicant Details

Full Name:

Jurisdiction of Establishment:

Date created:

DAY		MONTH		YEAR	

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

For Office Use Only

Forsyth Barr Limited Account Number:

--	--	--	--	--	--	--

Investment Adviser:

## Section B: Trustee or Executor Details

### Trustee / Executor:

*First Trustee or Executor (individual)*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Trustee or Executor a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Mailing Address:

Street No./Name/PO Box:

.....

Suburb/RD No.:

Mail Centre:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** Please provide the full legal names of ALL Trustees or Executors.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

## Section B: Trustee or Executor Details (continued)

### Trustee / Executor:

*Second Trustee or Executor (individual)*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--

Is the Trustee or Executor a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Mailing Address:

Street No./Name/PO Box:

.....

Suburb/RD No.:

Mail Centre:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** Please provide the full legal names of ALL Trustees or Executors.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

## Section B: Trustee or Executor Details (continued)

### Trustee / Executor:

*Third Trustee or Executor (individual)*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Trustee or Executor a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

**Full Name:** Please provide the full legal names of ALL Trustees or Executors.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

## Section B: Trustee or Executor Details (continued)

### Trustee Company:

#### Trustee Company Details

Company Name:

Trading Name (if applicable):

Company Registration Number:

Country of Incorporation or Registration:

Principal Business or Registered Office Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Mobile:

Email:

Is the Trustee Company a Financial Institution?

A "Financial Institution" **could** include trustee corporations, and lawyer and accountant nominee or trust companies. However, it will exclude lawyers or accountants acting as a trustee in a personal capacity, it will also exclude trustee companies which are only a trustee of a single trust.

If in doubt, please confirm the classification with an Authorised Representative of the Trustee Company.

☐ **Yes**, the Trustee Company **is** a Financial Institution:

Please write the Financial Institutions name and GIIN below

Financial Institution's Name:

Financial Institution's GIIN:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Has the Trustee Company agreed to sponsor or document the Trust? ☐ Yes ☐ No

☐ **No**, the Trustee Company **is not** a Financial Institution.

Principal Business or Registered Office Address: This address should match what is recorded on the Companies Register.

Global Intermediary Identification Numbers (GIINs): Assigned to Financial Institutions and sponsoring entities for purposes of identifying their registration status with the IRS under FATCA.

## Section B: Trustee or Executor Details (continued)

### Trustee Company:

*Trustee Company Details (continued)*

Authorised Person Name:

.....

Position:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

Residential Address:

*Street No./Name:*

.....

*Suburb/RD No.:*

.....

*Town/City:*

*Postcode:*

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

## Section B: Trustee or Executor Details (continued)

### Trustee Company Director Details:

*First Director of Trustee Company or Management of Trustee Company*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

**Full Name:** Please provide the full legal names of ALL Directors.

Full Name:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Trustee Company Director a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Is the Trustee Company Director an Authorised Person on the account?

☐ Yes

☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

## Section B: Trustee or Executor Details (continued)

### Trustee Company Director Details:

*Second Director of Trustee Company or Management of Trustee Company*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

**Full Name:** Please provide the full legal names of ALL Directors.

Full Name:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Trustee Company Director a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Is the Trustee Company Director an Authorised Person on the account?

☐ Yes

☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

## Section B: Trustee or Executor Details (continued)

### Trustee Company Director Details:

*Third Director of Trustee Company or Management of Trustee Company*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Trustee Company Director a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Is the Trustee Company Director an Authorised Person on the account?

☐ Yes

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Mailing Address:

Street No./Name/PO Box:

.....

Suburb/RD No.:

Mail Centre:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** Please provide the full legal names of ALL Directors.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

## Section B: Trustee or Executor Details (continued)

### Trustee Company Director Details:

*Fourth Director of Trustee Company or Management of Trustee Company*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

**Full Name:** Please provide the full legal names of ALL Directors.

Full Name:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

Is the Trustee Company Director a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))  
☐ No

Is the Trustee Company Director an Authorised Person on the account?

☐ Yes ☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

## Section B: Trustee or Executor Details (continued)

### Trustee Company Director Details:

*Fifth Director of Trustee Company or Management of Trustee Company*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

**Full Name:** Please provide the full legal names of ALL Directors.

Full Name:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

Is the Trustee Company Director a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Is the Trustee Company Director an Authorised Person on the account?

☐ Yes

☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

## Section B: Trustee or Executor Details (continued)

### Trustee Company Director Details:

*Sixth Director of Trustee Company or Management of Trustee Company*

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Trustee Company Director a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Is the Trustee Company Director an Authorised Person on the account?

☐ Yes

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Mailing Address:

Street No./Name/PO Box:

.....

Suburb/RD No.:

Mail Centre:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** Please provide the full legal names of ALL Directors.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

**Email Address:** By providing your email addresses at any place in this application form you are consenting to receiving information required to be provided to you under the relevant legislation by email (where permitted) and receiving information about Forsyth Barr's products and services by email.

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

## Section C: Authorised Persons

This section only needs to be completed if you wish to nominate someone to instruct on your account in addition to the Applicant(s) recorded in Section B.

### First Authorised Person Details

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

Relationship to Applicant:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

Occupation:

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

**Authorised Person:** Complete this section if you wish to add a second Authorised Person to your account.

**Full Name:** This includes your First Name, Middle Name(s), Last Name – please do not use initials or abbreviations.

**Mailing Address:** Only complete this part if your Mailing Address is different to your Residential Address.

## Section C: Authorised Persons (continued)

### Second Authorised Person Details

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

Relationship to Applicant:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

Occupation:

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Mailing Address:

Street No./Name/PO Box:

Suburb/RD No.:

Mail Centre:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

Please note, all Authorised Person(s) must provide their details above and sign *Section J: Agreement and Signatures*.

## Section D: Listed Entity Director/Officer Details

Is any Trustee/Executor/Authorised Person a Director or Officer of an entity that has securities listed on any Recognised Securities Exchange?

☐ Yes

☐ No

If 'Yes', please complete the Director/Officer details below.

### Listed Entity Director/Officer Details

Director/Officer Name:

Relationship to Listed Entity:

Listed Entity Name:

Director/Officer Name:

Relationship to Listed Entity:

Listed Entity Name:

Director/Officer Name:

Relationship to Listed Entity:

Listed Entity Name:

## Section E: Anti-Money Laundering and Tax Disclosures

How will the account be used? (please reply 'Yes' or 'No'):

- Invest in one or two specific securities ☐ Yes ☐ No
- Receive or send money from or to countries other than New Zealand or Australia ☐ Yes ☐ No
- Receive or send money from or to third party non bank financial services companies e.g. forex providers or share brokers ☐ Yes ☐ No
- Invest more than NZD \$1million ☐ Yes ☐ No

### Source of Funds and Income

Please provide details of the source of income that the Trust is receiving:

.....

.....

.....

.....

Please provide details of the source of any funds to be paid at account opening into the Trust's account with Forsyth Barr and evidence e.g. if the source of funds is the proceeds from an investment then a confirming document from the company or bank where the investment was made:

.....

.....

.....

.....

### Politically Exposed Persons

Is any Trustee, Executor, Settlor, Beneficiary, Authorised Person, or Trust Beneficial Owner either:

- ☐ an individual who holds, or has held at any time in the preceding 12 months, a prominent public function in any country (other than New Zealand); or
- ☐ an immediate family member of a person referred to above, including a spouse, partner, child, child's spouse/partner or a parent.

If 'Yes', please provide details of the public function held and the country:

.....

.....

Please provide details of the origin of their wealth and evidence e.g. if the origin of their wealth is business income then a copy of the business financial statements:

.....

.....

Please provide details of the source of any funds to be paid into their account with Forsyth Barr:

.....

.....

**Prominent Public Function:** e.g. head of a country, government minister, senior politician, senior Judge, governor of a central bank, ambassador, high commissioner, high-ranking member of the armed forces, or senior position in a State enterprise.

**Origin of Wealth:** A detailed description of the activity which has generated the overall net worth of the Politically Exposed Person.

**Source of Funds:** A description of the origin and means of transfer for monies being paid into their Forsyth Barr account e.g. electronic transfer from a New Zealand bank account.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Beneficiaries

Please answer the following questions if the Applicant is a trust:

i Is the trust a charitable trust?

☐ Yes ☐ No

If 'Yes', please state the objects of the trust:

.....

.....

.....

ii Is the trust a trust with more than 10 beneficiaries?

☐ Yes ☐ No

If 'Yes', please provide a description of each class or type of beneficiary:

.....

.....

.....

.....

iii Is the trust a discretionary trust?

☐ Yes ☐ No

If 'Yes', please provide a description of each class or type of beneficiary:

.....

.....

.....

.....

If you answered 'No' to all of the questions above, please provide details of all beneficiaries on pages 33 to 42:

- ☐ Yes, I/we will keep Forsyth Barr informed when a distribution has been made to any beneficiary and provide a certification of those beneficiaries tax residency, if I have not already provided these details in this application.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### First Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Second Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Third Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Fourth Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Fifth Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name – please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Sixth Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Seventh Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Eighth Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Ninth Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Tenth Beneficiary

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

.....

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

.....

Country(s) of Citizenship/Nationality:

.....

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficiary a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

.....

Suburb/RD No.:

.....

Town/City:

Postcode:

.....

Country: ☐ New Zealand ☐ Other (please state):

.....

Phone Work:

Phone Home:

.....

Phone Mobile:

Fax:

.....

Email:

.....

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### First Settlor

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

Relationship to Applicant:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--

Is the Settlor a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

### Source of Settlor's Funds/Wealth

Please provide details of the origin of the settlors' wealth:

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Source of Funds/Wealth:** A detailed description of the activity which has generated the settlors' net worth, e.g. employment earnings (please specify the nature of the employment), sale of a property (please specify the type of property and location).

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Second Settlor

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

Relationship to Applicant:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--

Is the Settlor a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

### Source of Settlor's Funds/Wealth

Please provide details of the origin of the settlors' wealth:

**Full Name:** This includes your First Name, Middle Name(s), Last Name - please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Source of Funds/Wealth:** A detailed description of the activity which has generated the settlors' net worth, e.g. employment earnings (please specify the nature of the employment), sale of a property (please specify the type of property and location).

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Trust Beneficial Owners

Please provide details of:

- any individual (other than the trustees) who has effective control over the trust, specific trust property, and with the power to amend the trust deed, or remove or appoint trustees; and
- any beneficiary that has a vested interest of more than 25% in the trust property.

### First Beneficial Owner

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

Relationship to Applicant:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficial Owner a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

Relationship to Trust:

**Full Name:** This includes your First Name, Middle Name(s), Last Name – please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Relationship to Trust:** e.g. trust protector, appointor, beneficiary with more than 25% vested interest.

## Section E: Anti-Money Laundering and Tax Disclosures (continued)

### Second Beneficial Owner

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other

Full Name:

Relationship to Applicant:

Date of Birth:

DAY		MONTH		YEAR	

Country of Birth:

Country(s) of Citizenship/Nationality:

### Tax Details

I certify that I am tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

☐ New Zealand (IRD Number):

--	--	--	--	--	--	--	--

☐ Australia (Tax File Number):

--	--	--	--	--	--	--	--

☐ United States (Social Security Number):

--	--	--	--	--	--	--	--

☐ United Kingdom (National Insurance Number):

--	--	--	--	--	--	--	--

☐ Other Country (please state):

--	--	--	--	--	--	--	--	--	--	--	--

Is the Beneficial Owner a United States Person?

☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))

☐ No

Residential Address:

Street No./Name:

Suburb/RD No.:

Town/City:

Postcode:

Country: ☐ New Zealand ☐ Other (please state):

Phone Work:

Phone Home:

Phone Mobile:

Fax:

Email:

Relationship to Trust:

**Full Name:** This includes your First Name, Middle Name(s), Last Name – please do not use initials or abbreviations.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where you are a tax resident.

**IRD Number:** For New Zealand residents, if a valid IRD Number is not provided, the default withholding tax rate of 33% will be applied.

**United States Person:** A United States Person can include US citizens, US tax residents and persons born in the US. If you are unsure, you should contact your tax adviser.

**Relationship to Trust:** e.g. trust protector, appointor, beneficiary with more than 25% vested interest.

## Section F: Identification Requirements

We are required by law to verify the Applicant's identity, and that of persons authorised to act on its behalf. These procedures are in place to protect it and to ensure that transactions are being effected for the right entity. Accordingly, please provide the required identification and address verification documentation for each person listed below. Without this information it is not possible to open or operate your account.

### Trustee/Executor/Authorised Person/Trust Beneficial Owner/Director of Trustee Company

#### Option A: An original certified copy of any one of the following:

- Current Passport
  - Current New Zealand Firearms Licence
  - Foreign National Identity Card
- showing full name, date of birth, signature, and photograph

#### Option B: An original certified copy of a combination of a:

- Current New Zealand Driver Licence (showing both sides of the Licence)

#### Plus one of the following:

- Birth Certificate or Citizenship Certificate
- Document issued by a registered bank showing the person's full name and signature (e.g. credit/debit card, eftpos card)
- Bank statement issued by a registered bank (as delivered by mail, not via internet banking) dated within the last 12 months
- Government agency document that contains the person's full name and signature (e.g. SuperGold Card)
- Government agency statement (e.g. IRD statement) dated within the last 12 months

#### For verification of residential address we need a copy of one of the following:

- |                         |   |  |
|-------------------------|---|--|
| • Utility or Rates bill | • Government Agency Statement* (e.g. IRD Statement) | • Share Registry Statement   |
| • Telephone bill        | • Electoral Roll                                    | • Credit Card Statement  |
| • Bank Statement*       | • Insurance Policy                                  | • Online White Pages ( <a href="http://whitepages.co.nz/">http://whitepages.co.nz/</a> ) |

Documentation must be dated within the last 12 months and include the client's residential address. Copies do not need to be certified (i.e. internet statements are acceptable).

If you cannot provide these documents please contact us to discuss.

#### Trust account (only)

- ☐ An original certified copy of the relevant pages of the Trust Deed and any resolutions evidencing any amendments, which must confirm:
- the name of the Trust;
  - the names of the Trustees;
  - the names of the Beneficiaries or class/type of Beneficiaries;
  - the name of the Settlor; and
  - the signatures of all Trustees

#### Estate account (only)

- ☐ An original certified copy of Probate for the Deceased Person or, where Probate is not legally required to be obtained, other documentation to establish the legal standing of the Estate of the Deceased Person and of the Executor(s) instructing Forsyth Barr Limited on behalf of the Estate. This must include an original certified copy of the Death Certificate.

#### Trustee Company (if applicable)

- ☐ Certificate of Incorporation (original certified copy if the Trustee Company is incorporated outside New Zealand)
- ☐ Confirmation of Directors from an official/independent source (original certified copy if the Trustee Company is incorporated outside New Zealand)

**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 this Client Agreement.

\* Not required if already provided under Option B.

**Official/independent source:**  
e.g. lawyer, accountant, company registry, financial accounts.

## Section F: Identification Requirements (continued)

### Documents provided must be certified

The copies provided must be certified by a trusted referee. Alternatively, you can provide original documents to a Forsyth Barr Authorised Financial Adviser for verification.

A trusted referee must be at least 16 years old and must be one of the following:

- Commonwealth representative
- Member of the New Zealand Police
- Justice of the Peace
- Registered Medical Doctor
- Registered Teacher
- Minister of Religion
- Lawyer
- Notary Public
- New Zealand Honorary Consul
- Member of Parliament
- Chartered Accountant
- Kaumatua

The trusted referee must not be:

- Related to the named individual
- The spouse or partner of the named individual
- A person who lives at the same address as the named individual
- A person involved in the transaction or business requiring the certification

The trusted referee must sight the original document, and provide a written statement to the effect that the copy provided is a true and correct copy and represents your identity.

Certification must include the name, occupation, and signature of the trusted referee and the date of confirmation, and must have been carried out in the last three months.

### Bank Account Details

To settle your account by direct debit or direct credit, we will require **original** bank account documentation in the same name as the account Applicant(s). **Please provide ONE of the following:**

- ☐ A bank encoded deposit slip with pre-printed details of your bank account name and number
- ☐ A bank statement
- ☐ A cheque from your bank account
- ☐ A verification letter or other document of confirmation provided by your bank

We will only make payments to a bank account in the name of the Applicant(s).

### Additional information

We may require additional information and/or documentation from you in order to meet the requirements of the Anti-Money Laundering and Countering the Financing of Terrorism Act 2009. We will notify you if we require anything further.

## Section G: Tax Details

### New Zealand Tax Residents

Prescribed Investor Rate (PIR): ☐ 0% ☐ 10.5% ☐ 17.5% ☐ 28%

For further information on selecting the appropriate PIR, please refer to [www.ird.govt.nz](http://www.ird.govt.nz).

Please advise Forsyth Barr should your tax details change.

### Overseas Tax Residents

The default Prescribed Investor Rate (PIR) for non-residents is 28%.

### Tax Details

I certify that the entity is a tax resident in the following country/countries (please select the country and supply the Tax Identification Number (TIN) for all that apply):

- ☐ New Zealand (IRD Number): 

--	--	--	--	--	--	--	--	--	--
- ☐ Australia (Tax File Number): 

--	--	--	--	--	--	--	--	--	--
- ☐ United States (Employer Identification Number): 

--	--	--	--	--	--	--	--	--	--
- ☐ United Kingdom (Unique Taxpayer Reference): 

--	--	--	--	--	--	--	--	--	--
- ☐ Other Country (please state): 

--	--	--	--	--	--	--	--	--	--

Is the entity a United States Person?

- ☐ Yes (please complete IRS Form W-9, available on request or online at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf))
- ☐ No

**Trust Bank Account:** If there is no bank account in the name of the Trust, please refer to Section H: Third Party Payments.

**Prescribed Investor Rate:** A PIR is the tax rate that the PIE you invest in can use to calculate the tax on the income it derives from investing your contributions, if you have also provided your IRD number.

**Tax Identification Number (TIN):** Please supply the country/countries and TINs of any other countries where the entity is a tax resident.

**An Entity which is a US Person:** It includes partnerships or corporations organised in the United States or under the laws of the United States or any State thereof, a trust if a court within the United States would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust and one or more US persons have the authority to control all substantial decisions of the trust, or an estate of a decedent that is a citizen or resident of the United States.

## Section G: Tax Details (continued)

### Entity managed by another

**Financial Institution:** An institution manages the entity if it is responsible for making and executing investment decisions without needing prior approval from management, the board or trustees of the entity. Ad hoc investment advice isn't 'management' of the entity.

**Trustee which is a Financial Institution:** A 'Financial Institution' includes trustee corporations, and can include lawyer and accountant nominee or trust companies. However, it will exclude lawyers or accountants acting as a trustee in a personal capacity. It also usually excludes trustee companies which are only a trustee of a single trust. If in doubt, please contact the Trustee.

**Financial products:** Any asset that may be held in an account, such as shares, bonds, debentures, and money.

### Passive Investments/Income:

Passive income includes dividends, interest, rents and royalties (other than rents and royalties derived in the active conduct of a trade/business), annuities, and amounts received under cash insurance contracts.

### 1. Entity Type Classification

Please answer all of the following:

If you answer **YES** to **ANY** of the questions below, please complete the Financial Institutions section on the next page.

If you answer **NO** to **ALL** of the questions below, please complete the Non-Financial Entity section below.

Is the entity managed on a discretionary basis by a Financial Institution, **AND** is more than 50% of the entity's income generated from investment activities in financial products? ☐ Yes ☐ No

Is the entity a trust which generates more than 50% of its income from investment activities in financial products, **AND** has a trustee which is a Financial Institution? ☐ Yes ☐ No

Is the entity a bank, non-bank deposit taker, custodian, investment fund and fund manager, private equity, hedge fund or an insurer? ☐ Yes ☐ No

Is the entity an investment entity that carries on a business of trading in financial assets for or on behalf of a customer, **AND** has more than 50% of its income attributable to investment activities? ☐ Yes ☐ No

### 2. Non-Financial Entity

Is the account held for an Active or Passive Non-Financial Entity?

☐ Active Non-Financial Entity

An **Active Non-Financial Entity** is one where, in the preceding calendar year, **less than 50%** of the entity's gross income was passive income, **AND** where **less than 50%** of the assets held by the entity were assets held for the production of passive income.

This also includes the following entities:

- A Holding Company, other than a Holding Company of a Financial Institution that does not hold itself out to be a PE fund, VC fund or Leveraged Buyout Fund, or any similar type of investment vehicle.
- A registered charity (even if it derives predominantly passive income)
- A Listed Company that is not an Investment Entity/Exchange Traded Fund

☐ Passive Non-Financial Entity

A **Passive Non-Financial Entity** is one where, in the preceding calendar year, the entity earned **50% or more** of its gross income from passive investments **OR** where **50% or more** of the entity's assets were held for the production of passive income in the preceding calendar year.

## Section G: Tax Details (continued)

### 3. Financial Institutions

*i. Does the entity have a Global Intermediary Identification Number (GIIN)? If yes, please provide the details below:*

Financial Institution's Name: .....

GIIN: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

OR

*ii. If the Financial Institution requires a GIIN and it has not registered to be issued with one, it can apply at this website: [www.irs.gov/businesses/corporations/fatca-foreign-financial-institution-registration-tool](http://www.irs.gov/businesses/corporations/fatca-foreign-financial-institution-registration-tool). Instructions on how to register can be found at this website: [www.irs.gov/pub/irs-pdf/p5118.pdf](http://www.irs.gov/pub/irs-pdf/p5118.pdf). Once the GIIN has been received please write the Financial Institution's name and GIIN above.*

There is guidance available from the IRD to help Financial Institutions understand their obligations and due diligence requirements to identify and report where foreign tax residents may be associated with the account. If you think this may apply to you please read IRD Guidance Note IR1083 where US persons are associated with the account and where any other foreign tax residents are associated with the account please refer to IRD Guidance Note 1049.

OR

*iii. Has another Financial Institution agreed to sponsor or document the entity?* ☐ Yes

Sponsoring Financial Institution's Name (or documenting Trustee's name): .....

GIIN: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

OR

*iv. Is the entity a Non-Reporting Financial Institution/Exempt Beneficial Owner?* ☐ Yes

**This may include:**

- Governmental entities
- International Organisation
- Certain retirement funds
- Maori Authorities
- Registered Deemed Compliant Financial Institutions
- Certified Deemed Compliant Financial Institutions

## Section H: Third Party Payments (if applicable)

☐ I authorise Forsyth Barr Limited to make payments from time to time as requested by me/us to the Inland Revenue Department by deductions from my Forsyth Barr Cash Management account.

☐ I authorise Forsyth Barr Limited to make payments from time to time as requested by me/us to the following Trustee(s) as no bank account has been opened in the name of the Trust:

Trustee Name: .....

Trustee Name: .....

Trustee Name: .....

By signing the 'Declaration and Signatures' section, you authorise Forsyth Barr Limited to pay any withdrawals to this third party account, until you notify us in writing otherwise.

**Global Intermediary Identification Numbers (GIINs):** Assigned to Financial Institutions and sponsoring entities for purposes of identifying their registration status with the IRS under FATCA.

**Reporting Financial Institution does not currently have a GIIN:** If the Financial Institution has applied for a GIIN but has not received it yet, please wait for it to be issued before returning the form.

**Sponsoring Entity:** In some circumstances, where an account is held by a trust which has a Trustee Company as a Trustee, the Trustee Company may choose to sponsor the Trust. Please check with your Trustee Company if this is an option.

**IRD Payments:** Please provide original documentation from the Inland Revenue Department confirming their bank account details.

**Payments to Trustee(s):** Please provide original bank account documentation in the same name as the Trustee(s).

**Initial single sum investment:**  
There is currently no minimum initial investment amount or minimum additional lump sum investment.

**Regular contributions:**  
\$1,200 p.a minimum deposit per Fund (unless we agree to waive this).

Section I: Investment Choice

You can make a single sum investment and/or a regular contribution. Please make cheques payable (and crossed 'Not Transferable') to 'Trustees Executors Limited for Forsyth Barr Investment Funds.'

☐ I wish my initial deposit and regular contributions (as indicated below) to come from my Forsyth Barr Cash Management Account

I wish to make regular contributions (as indicated below) via Direct Debit:

☐ Weekly    ☐ Fortnightly    ☐ Monthly    ☐ 4 weekly    ☐ Quarterly

Date of first Direct Debit: 

DAY		MONTH		YEAR	

Please complete a Direct Debit Authority and return it with your application

Your investment choice (please tick the Investment Fund(s) of your choice)

If you are in any doubt which Fund to choose we recommend that you speak with your Investment Adviser.

☐ Forsyth Barr New Zealand Equities Fund:

Initial single sum investment: \$ \_\_\_\_\_ Regular contributions: \$ \_\_\_\_\_

☐ Forsyth Barr Australian Equities Fund:

Initial single sum investment: \$ \_\_\_\_\_ Regular contributions: \$ \_\_\_\_\_

☐ Forsyth Barr Global Equities Fund:

Initial single sum investment: \$ \_\_\_\_\_ Regular contributions: \$ \_\_\_\_\_

☐ Forsyth Barr NZ Fixed Interest Fund:

Initial single sum investment: \$ \_\_\_\_\_ Regular contributions: \$ \_\_\_\_\_

☐ Forsyth Barr Premium Yield Fund:

Initial single sum investment: \$ \_\_\_\_\_ Regular contributions: \$ \_\_\_\_\_

☐ Forsyth Barr Listed Property Fund:

Initial single sum investment: \$ \_\_\_\_\_ Regular contributions: \$ \_\_\_\_\_

## Section J: Agreement and Signatures

### By signing this Application Form:

- I/We apply for units in the Forsyth Barr Investment Funds and agree to be bound by the governing documents of the Forsyth Barr Investment Funds, as amended from time to time, and by the requirements of applicable law and regulation;
- I/We confirm that I/we have received, read and understood the Product Disclosure Statement for the Forsyth Barr Investment Funds;
- I/We direct you to apply my/our investment monies by investing in the investment option(s) of the Forsyth Barr Investment Funds that I/we have selected;
- I/We agree that I/we will notify you of my/our Prescribed Investor Rate and any changes to it, and that special rules apply for joint holders and non-residents including the application of the highest Prescribed Investor Rate to jointly held accounts;
- I/We confirm that I/we am/are eligible to invest in the Forsyth Barr Investment Funds, and if I/we am/are completing this form on behalf of a minor, that I/we am/are authorised to complete this form on their behalf;
- I/We acknowledge that choosing investment option(s) is solely my/our responsibility, and neither you nor the Supervisor recommends or is advising me/us that any particular investment option is appropriate for my/our personal circumstances;
- I/We agree that where I/we make regular scheduled investments via direct debit, you may notify me/us at the outset of your intention to debit my/our account as instructed until further notice, and not on each initiation of a direct debit payment;
- I/We confirm that the information supplied within this form is true and correct, and is not misleading (including by omission), and I/we agree to notify you in writing within 2 business days if the details that I/we have previously provided to you are or become incomplete, inaccurate, or misleading (including by omission); and
- I/We agree that I/we will provide you with any information or documentation that you request from me/us for the purposes of you complying with any legal requirements.
- I/We understand that provision of false, inaccurate or incomplete information may constitute an offence(s) and penalties may apply.
- I/We have obtained the necessary consent and authorisation to allow disclosure and use of information provided in the Tax Residency Self Certifications.

Except as authorised above, we will not disclose information about you acquired in connection with your account to other persons, unless you authorise that disclosure. If we do disclose information about you, we may not be allowed to tell you.

You have the right to see all personal information that we hold about you. If the information held about you is wrong, you have the right to have it corrected.

To further the relationship between us, we may provide you with information about products and services which we think may be of interest to you.

- I/We will notify Forsyth Barr of any changes to any information within 30 days of the change occurring and, where required, will provide Forsyth Barr with a new self-certification of tax residency.

### Electronic Communications

I/We also agree that:

- if I/we supply you with an email address or register on the Forsyth Barr website, to the extent permissible by law you may provide me/us with any notice, report or communication in connection with my/our account to me/us by sending it to me/us at that email address, or making it available for me/us to view through that website (as applicable);
- if I/we supply you with an email address that is accessible by other persons, those persons will be able to access any electronic communications that you send to me at that address;
- pursuant to section 11(2) of the Unsolicited Electronic Messages Act 2007, any electronic messages (including emails) sent to me/us do not need to include any functional unsubscribe facility; and
- you only intend to send electronic messages to me/us where I/we am/are physically present in New Zealand when the message is accessed.

### Privacy

I/We authorise you to:

- collect, hold, and disclose information about me/us for the purposes of providing services to me/us, compliance with applicable laws, administering my/our account, or for your own marketing purposes or to further the relationship between us;
- collect information about me/us from, or disclose information about me/us to, any of your affiliates or any third party who helps you to achieve any of the purposes above, credit reporting agencies, the New Zealand Traffic Authority, the New Zealand Government Confirmation Service and the Department of Internal Affairs for the purpose of verifying my/our identity/identities in accordance with anti-money laundering laws, any reputable organisations with whom you have a continuing relationship, and any person where required by applicable law or where you believe the giving of information will help prevent fraud, money laundering or other crimes;
- use information about me/us for any of the purposes above;
- vary these privacy terms from time to time without notice to me/us, provided you make the varied terms publicly available at [www.forsythbarr.co.nz/investmentfunds-privacy](http://www.forsythbarr.co.nz/investmentfunds-privacy)

### Instructions for Signing

- **Every person** named as one of the **Directors, Partners, Officers, Trustees** or as an **Authorised Person** must sign below
- At least two Directors must sign on behalf of a Trustee Company, unless the Trustee Company only has one Director in which case the Director's signature must be witnessed as set out on the next page.

Name:

.....

Signature:

.....

Date:

DAY			MONTH				YEAR		

Name:

.....

Signature:

.....

Date:

DAY			MONTH				YEAR		

Name:

.....

Signature:

.....

Date:

DAY			MONTH				YEAR		

Name:

.....

Signature:

.....

Date:

DAY			MONTH				YEAR		

## Section J: Agreement and Signatures (continued)

**Witness (if a Trustee Company has only one Director then the Director's signature must be witnessed as set out below)**

Name of Witness:

.....

Occupation:

.....

Address:

Street No./Name/PO Box:

.....

Suburb/RD No.:

Mail Centre:

.....

Town/City:

Postcode:

.....

Signature:

.....

Date:

DAY		MONTH		YEAR			

Acceptance of this application is deemed by the applicants signing this Application Form.

**Please post your completed application together with your cheque to: FREEPOST 175, Forsyth Barr Investment Funds, c/- Forsyth Barr Investment Management Limited, Private Bag 1999, Dunedin 9054**

Not to operate as an assignment or an agreement

Account Number:

--	--	--	--	--	--	--

**AUTHORISATION CODE**

0	6	1	9	6	1	2
---	---	---	---	---	---	---

[illegible]

**To: The Bank Manager,**

I/We authorise you until further notice, to debit my/our account with all amounts which **Forsyth Barr Investment Funds** (hereinafter referred to as the Initiator) the registered Initiator of the above Authorisation Code, may initiate by Direct Debit. I/We acknowledge and accept that the Bank accepts this authority only upon the conditions listed below. **Information to appear on my/our Bank Statement:**

[illegible][illegible][illegible]

Approved	
1961	10/07

Date:

DAY		MONTH		YEAR			

**Required Signatures:** All Account Holders must sign this authority.

Date:

DAY		MONTH		YEAR			

Date:

DAY		MONTH		YEAR			

1. The Initiator:
  - (a) Has agreed to send notice of the net amount of each Direct Debit no less than the date the Direct Debit is initiated. This notice will be provided either:-
    - (i) in writing; or
    - (ii) by electronic mail where the Customer has provided prior written consent to the Initiator.The notice will include the following message:-

*The amount of \$ .....was direct debited to your Bank account on ....(initiating date).*
  - (b) May, upon the relationship which gave rise to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under the Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payments by notice in writing to me/us.
  - (c) May, upon receiving an "authority transfer form" (dated after the date of this authority) signed by me/us and addressed to a bank to which I/we have transferred my/our bank account, initiate Direct Debits in reliance of that transfer form and this Authority from the account identified in the authority transfer form.
  - (d) Agrees, if the the bank dishonours a direct debit but sends the direct debit again within 5 business days of the dishonour, is not required to give I/we a second notice of the amount and date of the direct debit.
2. The Customer may:
  - (a) At any time, terminate this Authority as to future payments by giving notice of termination to the Bank and to the Initiator.
- (b) Stop payment of any Direct Debit to be initiated under this Authority by the Initiator by giving written notice to the Bank prior to the Direct Debit being paid by the Bank.
- (c) Where a variation to the amount agreed between the Initiator and the Customer from time to time to be direct debited has been made without notice being given in terms of clause 1(a) above, or notice is received, but the amount or the date of debiting is different from the amount or the date specified on the notice, request the Bank to reverse or alter any such Direct Debit initiated by the Initiator by debiting the amount of the reversal or alteration of a Direct Debit back to the Initiator through the Initiator's Bank PROVIDED such request is made not more than 120 days from the date when the Direct Debit was debited to my/our account.

3. The Customer acknowledges that:
  - (a) This Authority will remain in full force and effect in respect of all Direct Debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Bank.
  - (b) In any event this Authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account.
  - (c) Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concern of the Bank except in so far as the Direct Debit has not been paid in accordance with this Authority. Any other disputes lies between me/us and the initiator.
4. Where the Bank has used reasonable care and skill in acting in accordance with this authority, the Bank accepts no responsibility or liability in respect of:
  - the accuracy of information about Direct Debits on Bank statements.
  - any variations between notices given by the Initiator and the amounts of Direct Debits.
5. The Bank is not responsible for, or under any liability in respect of the Initiators failure to give notice in accordance with 1(a) nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.
6. The Bank may:
  - (a) In its absolute discretion conclusively determine the order of priority of payment by it of any monies pursuant to this or any other Authority, cheque or draft properly executed by me/us and given to or drawn on the Bank.
  - (b) At any time terminate this Authority as to future payments by notice in writing to me/us.
  - (c) Charge its current fees for this service in force from time-to-time.
  - (d) Upon receipt of an "authority to transfer form" signed by me/us from a bank to which my/our account has been transferred, transfer to that bank this Authority to Accept Direct Debits.

This page has been left deliberately blank

This page has been left deliberately blank



