

CLIENT INFORMATION FORM - COMPANY

Under New Zealand Law Morton Tee Limited must collect certain information and proof of identification from you. You must complete this information and return it to Morton Tee Limited together with the relevant forms of identification. If you are unsure how to complete this form or do not understand the consequences of not providing the correct information, please donot hesitate to discuss it with us.

	СО	MPANY INFORMATION		
Company Details:				
Company Legal Name				
Company Trading Name (if different)				
Principal Business Address or Registered Office Address				
Company Number				
Date of Incorporation				
Country of Incorporation	1			
Director 1				
Full Name	FIRST	MIDDLE	LAST	
Physical Address		'		
Postal Address				
Phone (Home)		Phone (Mobile)		
Date of Birth		Email		
What is your relationship	to the other directors/s	hareholders of this Company?		
Director 2				
Full Name	FIRST	MIDDLE	LAST	
Physical Address				
Postal Address				
Postal Address Phone (Home)		Phone (Mobile)		

Full Name FIRST		MIDDLE		LAST
Physical Address				
Postal Address				
Phone (Home)		Phone (Mobile)		
Date of Birth		Email		
What is your relationship to the other directors/shareholders of this Company?				

Full Name FIRST	MIDDLE	LAST		
Physical Address		·		
Postal Address				
Phone (Home)	Phone (Mobile)			
Date of Birth	Email			
What is your relationship to the other directors/shareholders of this Company?				

Full Name FIRST	MIDDLE		LAST	
Physical Address				
Postal Address				
Phone (Home)	Phone (N	Mobile)		
Date of Birth	Email			
What is your relationship to the other directors/shareholders of this Company?				

Shareholder 3				
Full Name	FIRST	MIDDLE	LAST	
Physical Address				
Postal Address				
Phone (Home)		Phone (Mobile)		
Date of Birth		Email		
What is your relationship to the other directors/shareholders of this Company?				
,	what is your relationship to the other unectors/shareholders or this company:			

Full Name FIRST	MIDDLE		LAST	
Physical Address	·			
Postal Address				
Phone (Home)	Phone (Mobile)			
Date of Birth	Email			
What is your relationship to the other directors/shareholders of this Company?				

Person acting on behalf of the Company					
Does anyone else have the authority to act on behalf of the company – i.e. to operate company bank accounts?					
If yes, please advise their fu	ıll name and their relationship to th	e Company			
Full Name	FIRST	MIDDLE		LAST	
Relationship to the Company / Position in the Company					
Physical Address					
Phone (Home)		Phone (Mobile)			
Date of Birth		Email			

TAX RESID	DENCY	
Is the Company a tax resident of New Zealand	Yes	No
If Yes , please state the company's NZ IRD Number		
Is the Company registered for GST?		
List all countries of tax residence (other than New Zealand) and the Company Tax Identification Number (TIN) in that country		

US CITIZE	NSHIP	
Are any of the Directors or Shareholders a US Citizen or born in the US?	Yes	No
If Yes , please state their name and US TIN: NOTE: We may need more information from you. We will let you know what we need		

OVERSEAS AF	FILIATIONS	
Do any of the Directors or Shareholders (or their relatives) have a position of power overseas? For example, as a politician, judge or member of the military.	Yes	No
If Yes , please advise their name, their position and the country where the position is held.		
NOTE: We may need more information from you. We will let you know what we need.		

AGREEMENT

I/We confirm the information in this form is true and complete. I understand that not giving information or giving false information could be serious under New Zealand law.

I/We confirm that I am authorised to provide the personal information recorded in this form and I/We consent to this information being checked with the document issuer, official record holder and authorised third parties for the purposes of verifying the name and address details provided.

I/We consent to Morton Tee Limited checking the personal information provided in this form against the Dow Jones PEP/ Sanction Watchlist and the NZ Police List of Designated Terrorist Entities under the provisions of The Terrorism Suppression Act 2002 to determine whether I and/or a member of my family are recorded as a Politically Exposed Person or as a person subject to sanction.

I/We represent and warrant that I have no cause to believe that any funds paid by me to Morton Tee Limited are the proceeds of crime or will be used to finance terrorism. I/We represent and warrant that no Services provided by Morton Tee Limited to me will be used to launder funds.

I/We agree to indemnify Morton Tee Limited (and their employees and agents) against any loss they suffer as a result of my providing incorrect or incomplete information.

I/We understand that Morton Tee Limited may need extra or updated information in addition to the information provided above.

I/We will contact Morton Tee Limited as soon as possible in writing if any information given changes and will resubmit this form to Morton Tee Limited on request.

SIGNATURES OF DIRECTORS		
Signature	Signature	
Name	Name	
Date	Date	
Signature	Signature	
Name	Name	
Date	Date	

DOCUMENTS REQUIRED

Please bring the originals (if coming in to see us) or send us the original certified photocopies (if returning this form by mail) of the documents below.

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

Please note that scanned copies of the documents sent by email are not sufficient.

IDENTIFICATION

All of the below ID documents must be original, clear, valid (signed where applicable and not cancelled) and sighted by a Morton Tee staff member or be a certified copy.

NOTE: We require the following wording on certified copies of your photographic identification: "I certify this to be a true copy of the original which I have sighted and the photograph represents a true likeness of [full name as shown on the identification]".

OPTION 1

Passport (NZ or overseas)

OR

OPTION 2 - Provide 1 of the following:

- New Zealand Driver's Licence
- New Zealand Firearms Licence

AND Provide 1 of the following:

- Full Birth Certificate (NZ or overseas)
- Credit Card or Debt Card with matching signature and embossed name
- Bank Statement
- Government Agency Statement
- SuperGold Card

OR

OPTION 3 – Provide 1 of the following

- Full Birth Certificate (NZ or overseas)
- Citizenship Certificate (NZ or overseas)

AND Provide 1 of the following:

- New Zealand Driver's Licence
- Credit Card or Debt Card with matching signature and embossed name
- Bank Statement
- HANZ 18+ Card
- NZ Educational Institute issued card
- · Valid and current International Driving Permit
- SuperGold Card

PROOF OF ADDRESS

PRIMARY PROOF of Address Document:

NOTE: This document **must** show your current residential address and be **no more than 12 months old.** This cannot be a PO Box address.

Provide 1 of the following:

- Bank Statement
- Government Agency Statement
- Registered Kiwisaver Scheme correspondence

OR

SECONDARY PROOF of Address Document:

NOTE: This document **must** show your current residential address and be **no more than 3 months old.** This cannot be a PO Box address.

Provide 1 of the following:

- Local Authority Rates or Water Bill
- Utility Bill (gas, power, fixed phone line, internet, SKY TV)
- Current Insurance policy