

CLIENT INFORMATION FORM - TRUST

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 do not hesitate to discuss it with us.

TRUST INFORMATION

TRUST DETAILS:

Name of Trust	
Any previous name(s) of the Trust	
Date of Trust Deed	
Physical Address	
Postal Address	

Settlor (1)

Full Name	FIRST	MIDDLE	LAST
Physical Address			
Postal Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Settlor (2)

Full Name	FIRST	MIDDLE	LAST
Physical Address			
Postal Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Trustee (1)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Postal Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Trustee (2)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Postal Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Trustee (3)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Postal Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Person acting on behalf of the Trust			
Name(s) of anyone else who has the authority to act on behalf of the Trust – i.e. to operate the Trust's bank accounts or make investment decisions on behalf of the trust			
Full Name	FIRST	MIDDLE	LAST
Relationship to Trust			
Physical Address			
Postal Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Beneficiary (1)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Beneficiary (2)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Beneficiary (3)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Beneficiary (4)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Beneficiary (5)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

Beneficiary (6)			
Full Name	FIRST	MIDDLE	LAST
Physical Address			
Phone (Home)		Phone (Mobile)	
Date of Birth		Email	

If there is insufficient space, please continue on a separate page

TAX RESIDENCY

Is the Trust a tax resident of New Zealand?	Yes	No
If Yes please state the Trust's NZ IRD Number		
List all countries of tax residence (other than New Zealand) and your Tax Identification Number (TIN) in that country		
Are any Settlers, trustees or beneficiaries a foreign tax resident?	Yes	No
If Yes , list their name and all countries of tax residence (other than New Zealand) and their Tax Identification Number (TIN) in that country		

US CITIZENSHIP

Are any settlors, trustees or beneficiaries a US Citizen or born in the US?	Yes	No
If Yes , please state their name and US TIN <i>NOTE: We may need more information from you. We will let you know what we need</i>		

OVERSEAS AFFILIATIONS

Do any of the Settlers, Trustees or Beneficiaries (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. <i>NOTE: We may need more information from you. We will let you know what we need.</i>		

SOURCE OF WEALTH / FUNDS

What is the source of the assets or wealth of the Trust? For example, were the assets originally owned by the Settlers and transferred to the Trust? <i>NOTE: We may need more information from you – we will let you know what we need</i>	
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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 TRUSTEES

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