

This form is for the Intermediary to use to open an Investor Account in the Investor's name.

TRUST

Trust Name (COMPULSORY)

A certified copy of the Trust Deed must be provided

Is the Trust a resident for tax purposes in any country outside of New Zealand (Compulsory) Yes No

If the answer is 'Yes' please also complete the Automatic Exchange of Information for Entity Self-Certification Form (AEOI), otherwise known as CRS. This can be downloaded from the Broker Direct website.

TRUSTEE / PERSON WITH EFFECTIVE CONTROL INFORMATION

(Please use additional page if more than three Trustees or persons with Effective Control)

Full legal name (COMPULSORY)

Date of Birth (COMPULSORY)

Residential Address

Email Address

Is the individual a resident for tax purposes in any country outside of New Zealand (Compulsory) Yes No

Is the individual a citizen in any other country outside of New Zealand (Compulsory) Yes No

If the answer to one or both is 'Yes' please also complete the Automatic Exchange of Information for Entity Self-Certification Form (AEOI), otherwise known as CRS. This can be downloaded from the Broker Direct website.

Full legal name (COMPULSORY)

Date of Birth (COMPULSORY)

Residential Address

Email Address

Is the individual a resident for tax purposes in any country outside of New Zealand (Compulsory) Yes No

Is the individual a citizen in any other country outside of New Zealand (Compulsory) Yes No

If the answer to one or both is 'Yes' please also complete the Automatic Exchange of Information for Entity Self-Certification Form (AEOI), otherwise known as CRS. This can be downloaded from the Broker Direct website.

Full legal name (COMPULSORY)

Date of Birth (COMPULSORY)

Residential Address

Email Address

Is the individual a resident for tax purposes in any country outside of New Zealand (Compulsory) Yes No

Is the individual a citizen in any other country outside of New Zealand (Compulsory) Yes No

If the answer to one or both is 'Yes' please also complete the Automatic Exchange of Information for Entity Self-Certification Form (AEOI), otherwise known as CRS. This can be downloaded from the Broker Direct website.

For each trustee or person with effective control, please provide a certified copy of the passport and evidence of current residential address in the form of a recently dated rates or utility bill or credit card or bank statement in the name of that trustee or person with effective control of the Trust.

TRUST BANK ACCOUNT DETAILS

Bank Account Name

Bank Account Number

A copy of a bank deposit slip, bank statement or other written confirmation from the respective Bank issued in the name of the Investor must be provided. Please note, only one bank account is permitted. (Certified copy if a non NZ account)

TRUST TAXATION INFORMATION

Please provide the following tax status information for the Trust:

Question 1

Is the Trust a tax resident of New Zealand? If yes, please provide IRD Number Yes No

IRD Number

Tax Rate 0% * 10.5% 17.5% 30% 33%

For New Zealand residents, if a valid IRD number is not provided, the default tax rate of 33% will be applied in respect of any interest earned (and for dividends the rate will be 33%)

Prescribed Investor Rate 0% 10.5% 17.5% 28%

For information in helping you select your PIR or RWT rate visit www.ird.govt.nz

De Minimis

If the Trust holds overseas investments that cost in aggregate of \$50,000 or less, please tick the 'NO' box. If you hold such assets that in aggregate cost more than \$50,000 please tick the 'YES' box. Yes No

**If you hold a valid Certificate of Exemption and are able to receive resident withholding income without deduction of tax, please attach a copy to be exempt from withholding. Any changes to the status of the Certificate of Exemption must be notified in writing.*

Question 2

Is the Trust registered in the US or does it have one or more beneficial owners who are US citizens or tax residents? Yes No

If yes, please provide the SSN's of all US Persons

SSN

**You are also required to supply additional information under the Foreign Account Tax Compliance Act (FATCA) and Automatic Exchange of Information (AEOI), otherwise known as CRS. Please download this form from the Broker Direct website.*

ADDITIONAL TRUST DETAILS

Trust CSN (if available)

Trust Specific Brokerage Code (if applicable)

CONTRACT NOTE AND DOCUMENTATION DELIVERY

Please provide an email address for contract note and documentation delivery:

Trust Email

Intermediary Email

CASH MANAGEMENT ACCOUNT

Please tick below if applicable:

- Cash Management Services to be provided and Cash Management Account opened for the Trust

SETTLEMENT INSTRUCTIONS

Please tick the appropriate option below:

- Settlement direct to the Trust's bank account as notified above
- Settlement direct to the Trust's Cash Management Account*
- Settlement direct to the Intermediary's Client Funds Account**
- Settlement direct to the Intermediary's nominated custodian or settlement agent

**Please note the Cash Management Account section must be completed.*

***Please note that sale proceeds and distributions may only be made to the Intermediary's Client Funds Account if the Intermediary provides, or has previously provided, a copy of a letter from the Intermediary's bank acknowledging that the Intermediary's Client Funds Account is a trust account in respect of which the bank is not entitled to exercise a right of set-off or combination of accounts.*

INTERMEDIARY CONFIRMATION AND AUTHORISATION

The Intermediary is a party to the Intermediary Agreement (as amended from time to time) with Jarden Securities Limited (Intermediary Agreement). The Intermediary confirms and warrants that the details in this Form are correct; it has completed the requisite Investor due diligence in accordance with the Anti-Money Laundering and the Countering Financing of Terrorism Act 2009; and the Investor has authorised the completion of this Form. The Intermediary agrees and acknowledges that this Form, and the details within, is subject to and governed by, the terms and conditions of the Intermediary Agreement.

Intermediary Name	
Authorised by (name)	
Signature	Date

Please scan and email this form to: clientaccounts@directbroking.co.nz