

Please complete the sections below in block letters

Customer Number

Date

## A. CUSTOMER DETAILS

### APPLICANT 1

Individual Customer Number

Title:  Mr  Mrs  Miss  Ms  Dr Other \_\_\_\_\_

First Name/s

Surname

Occupation

Job Title

Employer's name

Nature of business (if self employed)

### APPLICANT 2

Individual Customer Number

Title:  Mr  Mrs  Miss  Ms  Dr Other \_\_\_\_\_

First Name/s

Surname

Occupation

Job Title

Employer's name

Nature of business (if self employed)

## B. ACCOUNT ACTIVITY

Please tick the box to indicate types of Account activity:

Primary Source of Income:	Salary/ Drawings <input type="checkbox"/>	WINZ Payments <input type="checkbox"/>	Student Allowances <input type="checkbox"/>	Superannuation Payments <input type="checkbox"/>	Investment Income <input type="checkbox"/>	
Types of Expected Account Activity	Telegraphic Transfer in/out <input type="checkbox"/>	Cash Deposit <input type="checkbox"/>	Cash Withdrawals <input type="checkbox"/>	Cheque Deposits <input type="checkbox"/>	Cheques Issued <input type="checkbox"/>	Transfer in/out <input type="checkbox"/>

## C. CHANGE OF CORRESPONDENCE ADDRESS

Residential address

Postal address

No. Street Suburb

Postcode Country

Email address

Residential address

Postal address

No. Street Suburb

Postcode Country

Email address

## D. CHANGE OF TELEPHONE NUMBERS

Home phone number

Work phone number

Mobile phone number

Fax number

Home phone number

Work phone number

Mobile phone number

Fax number

## E. CHANGE OF RESIDENCY

Change of Residency (For Taxation Purposes) Amend Residency to  New Zealand  Other \_\_\_\_\_ (Please Specify Country)

If now a 'non resident' a Declaration will be required.

## F. CHANGE OF NAME

(Please attach certified copy of original documents) Amend Name(s) \_\_\_\_\_  Marriage  Deed Poll

## G. NOTIFICATION OF IRD NUMBER

If you are a New Zealand Resident, which should apply to your deposits?

19.5%

33%

39%

## H. CHANGE OF STATEMENT CYCLE (FOR NON LENDING CUSTOMERS ONLY)

Monthly  Six monthly  Other \_\_\_\_\_

## I. SIGNATURES

Signature Applicant 1

SV

Signature Applicant 2

SV

## BRANCH USE ONLY

Signature verified by name

Signature

Date