



Retail Banking and Wealth Management Account Opening and Servicing Form

(For Existing HSBC Customers)

Customer's name(s) (as stated in existing accounts)	Customer number
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CUSTOMER DETAILS – THIS SECTION IS MANDATORY

Applicant 1

Title	First name(s)
<input type="text"/>	<input type="text"/>
Family name	Date of Birth DD/MM/YY
<input type="text"/>	<input type="text"/>
Former/other names	
<input type="text"/>	
Nationality	
<input type="text"/>	
Identification: Passport No.	
<input type="text"/>	
Date of issue DD/MM/YY	Date of expiry DD/MM/YY
<input type="text"/>	<input type="text"/>
Country of birth	
<input type="text"/>	
Multiple nationalities	
No <input type="checkbox"/>	
Yes <input type="checkbox"/> If Yes please provide name(s) of other Nationalities	

Residential address (where you live)
<input type="text"/>
<input type="text"/> Postcode
Country (if not New Zealand)
<input type="text"/>
The above has been my address since DD/MM/YY
<input type="text"/>

If at current address for less than 3 years please provide details of your previous residential address
<input type="text"/>
<input type="text"/> Postcode
Country (if not New Zealand)
<input type="text"/>

Permanent address (complete if your principal residence is different to the residential address above)
<input type="text"/>
<input type="text"/> Postcode
Country (if not New Zealand)
<input type="text"/>

Correspondence address – Write 'as above' if the same as your residential address
<input type="text"/>
<input type="text"/> Postcode
Country (if not New Zealand)
<input type="text"/>

Home phone number	Work phone number
<input type="text"/>	<input type="text"/>
Fax number	Mobile phone number
<input type="text"/>	<input type="text"/>
Email address	
<input type="text"/>	

Applicant 2

Title	First name(s)
<input type="text"/>	<input type="text"/>
Family name	Date of Birth DD/MM/YY
<input type="text"/>	<input type="text"/>
Former/other names	
<input type="text"/>	
Nationality	
<input type="text"/>	
Identification: Passport No.	
<input type="text"/>	
Date of issue DD/MM/YY	Date of expiry DD/MM/YY
<input type="text"/>	<input type="text"/>
Country of birth	
<input type="text"/>	
Multiple nationalities	
No <input type="checkbox"/>	
Yes <input type="checkbox"/> If Yes please provide name(s) of other Nationalities	

Residential address (where you live)
<input type="text"/>
<input type="text"/> Postcode
Country (if not New Zealand)
<input type="text"/>
The above has been my address since DD/MM/YY
<input type="text"/>

If at current address for less than 3 years please provide details of your previous residential address
<input type="text"/>
<input type="text"/> Postcode
Country (if not New Zealand)
<input type="text"/>

Permanent address (complete if your principal residence is different to the residential address above)
<input type="text"/>
<input type="text"/> Postcode
Country (if not New Zealand)
<input type="text"/>

Correspondence address – Write 'as above' if the same as your residential address
<input type="text"/>
<input type="text"/> Postcode
Country (if not New Zealand)
<input type="text"/>

Home phone number	Work phone number
<input type="text"/>	<input type="text"/>
Fax number	Mobile phone number
<input type="text"/>	<input type="text"/>
Email address	
<input type="text"/>	

CUSTOMER DETAILS – CONTINUED

Applicant 1

Are you self-employed or a business owner? No Yes

If yes – details of business activity

Type/Nature of Business

Job title

Employer's name

Length of employment there years months

Applicant 2

Are you self-employed or a business owner? No Yes

If yes – details of business activity

Type/Nature of Business

Job title

Employer's name

Length of employment there years months

EXPECTED ACCOUNT ACTIVITY

Primary source of income

Salary/ drawings

Superannuation payments

Investment income

Dependent on family members

Other (Please specify)

Types of Expected Account Activity

Local Payments

International Payments

Cheque/Cash Transactions

Other (please specify)

Standing Instructions

If yes, which country(ies) will the Standing Instructions be sent to?

**ACCOUNT OPENING
PLEASE COMPLETE THE FOLLOWING SECTIONS**

Please note, that you will be required to complete a CRS Self-Certification form in addition to this request. Please go to <http://www.crs.hsbc.com/en/rbwm/new-zealand> or ask your designated Relationship Manager.

Please open an account in my/our name(s) as detailed below:

Personal Sole Account ^Personal Joint Account ^Non Personal Account ^Term Deposit Account

Everyday Account Multi-currency Account Ccy Renminbi Savings Account

Home Equity Other

Account access Telephone Banking Internet Banking Debit Card

Amount of Opening Deposit \$ Source and Description of Deposit#

*If cash deposit exceeds NZ\$9,000.00, please provide documentary evidence

Overall Purpose of Account:

• Internet Banking and Telephone Banking access are not available if more than one signatory is required. Debit Card access is only available for accounts in New Zealand dollars.

Term Deposit Interest at Maturity Interim Interest

Currency & Amount Dr A/C

Term Fix Term Or Specify Date Start Date End Date

Maturity Instructions

Reinvest Principal & Interest

Principal & Interest to be repaid*

Reinvest Principal Only. Interest to be repaid*

Other

*Cr A/C

• If maturity instructions are not provided for Term Deposits, HSBC may renew the Term Deposit (that is, principal and any interest that has not already been paid) for the same or similar term and amount at the interest rate and on the terms and conditions applying at that time to Term Deposits.

• Once an investment is made its terms cannot generally be altered, and you cannot make withdrawals or process payments from a Term Deposit except on maturity with our consent. A break cost administration fee and reduced interest rate will be payable if you wish to terminate or withdraw your Term Deposit before its maturity date, or alter the terms of the investment. If we, in our sole discretion, allow you to terminate or withdraw your Term Deposit before its maturity date, then we may :

- charge you a break cost administration fee of \$50;
- reduce the interest rate payable on your Term Deposit by 50%; and
- recover from you any interest that was paid on your Term Deposit at the higher original rate until the date of withdrawal or alteration.

Any tax or approved issuer levy that has already been paid on interest earned in prior income tax years (ending 31 March) cannot be refunded to you by HSBC. Any tax refund applicable must be claimed from the Inland Revenue directly. The approved issuer levy is not refundable.

ACCOUNT SERVICING

PLEASE COMPLETE THE FOLLOWING SECTIONS AS PER YOUR REQUIREMENTS

Services required for

Customer 1

Customer 2

Individual customer number

Individual customer number

: : : - : : : : : : : : or

: : : - : : : : : : : : or

Full name

Full name

DEBIT CARDS

New Card

Account Number(s) to be Accessed (NZD account only)

: : - : : : : : - : : : : : : : - : : :

: : - : : : : : - : : : : : : : - : : :

Replacement Card

Reason for replacement

Card expired

Card damaged/bent

Card does not work

Card Lost/Stolen (call 0800 80 23 80 to cancel)

Details of Card to be replaced (if known, else please contact HSBC for this information)

HSBC Card

Issue No.

5 : 3 : 7 : 9 : 7 : 6 : - : : : : : : : : : : : : : : : :

• To report lost or stolen Debit Cards, please contact our Direct Service Centre on 0800 80 23 80.

AUTOMATED BANKING

Internet Banking

Phone Banking

Access Requested

Cancel Access

Online Security Device

Customer profile(s) to be accessed

: : : - : : : : : : :

: : : - : : : : : : :

• Internet Banking and Telephone Banking access are not available if more than one signatory is required.

CHEQUE BOOKS

Supply cheque book on account number

: : - : : : : : - : : : : : : : - : : :

25 leaf

100 leaf

Bearer

Non Transferable

Supply deposit book on account number

: : - : : : : : - : : : : : : : - : : :

Cancel cheque book facility on account number

: : - : : : : : - : : : : : : : - : : :

CHANGE OF STATEMENT CYCLE

Monthly Quarterly Six monthly eStatement

IMPORTANT INFORMATION AND CUSTOMER DECLARATION

I/We certify that all information supplied in connection with this (or any related) application is true, correct and complete in every respect.

I/We confirm that I/we have received a copy of the Retail Banking and Wealth Management Terms and Conditions and the Retail Banking and Wealth Management Fees and Charges guide ("Terms"). I/We acknowledge and agree that the Terms (as amended from time to time) apply to all products and services provided by HSBC whether now or in the future.

I/We consent to HSBC, its agents, authorised service providers and relevant third parties (including credit reporting agencies), collecting, using, storing and disclosing any personal data which I/we provide to HSBC from time to time in the course of our relationship and in connection with the products and/or services which I/we may apply for or request. Personal data will be collected, used, stored and disclosed for the purposes and upon the terms set out in the Privacy Act 1993, the Terms and HSBC's privacy and security policy (as amended from time to time) which may be found on HSBC's website, <http://www.hsbc.co.nz/utilities/privacy-and-security>.

I/We acknowledge that I/we have received a copy of the HSBC QFE Disclosure Statement on account opening and have read the important information contained in the statement before making this application.

AUTHORISATION

Signing instructions

Either Signatory to sign alone Both Signatories jointly

Please specify additional applicant(s) names (applicable if more than two applicants) (specify)

Applicant 1

Full name of applicant 1

Date

Signature of applicant 1

I would like to receive information on other HSBC products and services (including via email)

No Yes

Applicant 2

Full name of applicant 2

Date

Signature of applicant 2

I would like to receive information on other HSBC products and services (including via email)

No Yes

BANK USE ONLY

Signature verified by HSBC staff name

Signature

Date

At times HSBC may be required to report your accounts to the local Tax authority in order to meet FATCA and/or CRS requirements. For more information on these topics please refer to the below links:

Foreign Account Tax Compliance Act ("FATCA") - <http://www.irs.gov/fatca> and/or <http://www.hsbc.co.nz/fatca>

Common Reporting Standards ("CRS") - <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard> and/or <http://www.crs.hsbc.com/en/rbwm/new-zealand>

In addition, if you have any concerns please feel to contact a HSBC representative directly.