

HEARTLAND SCHEDULE OF ADDITIONAL AUTHORISED/CONTROLLING PERSONS

(TO BE USED IN CONJUNCTION WITH AN ACCOUNT APPLICATION FORM)



All accounts and services are provided by Heartland Bank Limited (Heartland Bank).

By completing and signing this application form, you acknowledge that you have received and read:

- the current Account and Service General Terms and Conditions; and
 - the Heartland Term Deposits Fact Sheet and Heartland Savings Account Fact Sheet (as applicable);
- and agree they will be binding on you.

A copy of these documents and Heartland Bank's latest Disclosure Statement can be obtained from our Investment Team on 0800 85 20 20 or at www.heartland.co.nz.

AUTHORISED/CONTROLLING PERSON - 3

Existing customer - My customer number is

Designation

e.g. Director, treasurer, chairperson, sole trader, partner

First name(s) in full Date of birth

Surname Occupation Country of birth

If your country of birth, citizenship, residency and tax residency are all NZ please tick and move to the next section

Countries you have residency or citizenship

Countries you are tax resident in

If any overseas tax residencies, a self-certification form must be completed

Postal address

Suburb City or town Postcode

Physical address (if different from above)

Suburb City or town Postcode

Email address
Please note that, by providing an email address, you consent to receiving communications in electronic form

Ph (hm) () Ph (wk) () Mob ()

TAX DETAILS

Tax Identification Number

NZ IRD Number

or country of tax residency

NZ residents, please indicate your choice of RWT rate below. If exempt, please provide copy of exemption certificate.

10.5% 17.5% 30.0% 33.0%

28.0% (Company) Exempt

Non-residents please indicate

NRWT AIL

Additional Tax Identification Number

Additional country of tax residency

Fax ()

AUTHORISED/CONTROLLING PERSON - 4

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INTERNET BANKING ACCESS

Please tick if you would like access to Internet Banking.

AUTHORISED ACCESS

List here all the Users whom you authorise to access your nominated Account(s) using Internet Banking: (If you are not a current Heartland Bank customer, please complete a signatory request form)

User Name	User Name	User Name
Customer Number	Customer Number	Customer Number
Signature	Signature	Signature

