



Identity Verification Form

Companies and Partnerships

MAS, FREEPOST 884,
PO Box 13042,
Johnsonville, Wellington.
Phone 0800 800 627.
Facsimile (04) 477 0109.
Email info@mas.co.nz.



Important information

It is a requirement of the Anti-Money and Countering Financing of Terrorism Act 2009 and MAS's own compliance procedures that all Members are formally identified.

- The purpose of this form is to capture information specific to the company or partnership.
- Individuals who are directors, partners, beneficial owners or authorised signatories/agents must also complete a separate Individual Identity Verification Form.

Details

Full legal name of entity	<input type="text"/>		
Trading name(s) (if different)	<input type="text"/>		
Physical address/registered office	<input type="text"/>	City	Postcode
Postal address	<input type="text"/>	City	Postcode

Type of entity (please tick the relevant box below, or specify if other)

Company Partnership Other

Incorporation number Country of incorporation (if not NZ)

Please provide details of the nature and purpose of the relationship that the company or partnership will have with MAS (e.g. borrowing for property investment, holding term investments, etc.).

Directors/partners/beneficial owners*/authorised signatories/agents

Please complete an Individual Identity Verification Form and list the following details for each director, partner or beneficial owner*. If there is insufficient room for all individuals, please continue on a separate sheet.

*A beneficial owner is any individual who owns more than 25% of the entity, any individual who has effective control over the entity, or any individual on whose behalf transactions are conducted by the business.

Full name 1

Relationship to entity (e.g. director, partner, manager)

Tick if beneficial owner Completed Individual Identity Verification Form attached?

Full name 2

Relationship to entity (e.g. director, partner, manager)

Tick if beneficial owner Completed Individual Identity Verification Form attached?

Full name 3

Relationship to entity (e.g. director, partner, manager)

Tick if beneficial owner Completed Individual Identity Verification Form attached?

Full name 4

Relationship to entity (e.g. director, partner, manager)

Tick if beneficial owner Completed Individual Identity Verification Form attached?

Full name 5

Relationship to entity (e.g. director, partner, manager)

Tick if beneficial owner Completed Individual Identity Verification Form attached?

Call us today:
0800 800 627
Visit us online at mas.co.nz



Printed on paper sourced from sustainably managed forests.