



AML Form for a Company (Form 4)

Use only for NZ registered companies which do not have nominee shareholders* or shares in bearer form**.

1 | Company details

Company name

Existing client

Yes

NZ Funds client number

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No

Registered office address

Street

Suburb

Town / city

Postcode

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Principal business address (if different from above)

Street

Suburb

Town / city

Postcode

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Business activity

Company registration number

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2 | Individual completing this form

Name of individual authorised to act on behalf of the company

Title

First name

Middle name(s)

Surname

If this person is not a director, complete and attach an 'AML Form 2 for a Representative acting on behalf of a client'.

3 | Identification requirements for company

Provide both of the following identification documents (from Companies Office website).

Company extract

Certificate of incorporation

Continued over...

4 | Identity verification by an Authorised Individual[†]

Tick the document(s) selected previously, verify that the details shown by the documents correctly represent the company identity information provided on this form. Attach copies to this completed form before signing and dating the statement below.

Name
I, , Authorised Financial Adviser,
have sighted documents provided (copies of which are attached to this form), and have used those documents to verify client identity information as is required by the Anti-Money Laundering and Countering Financing of Terrorism Act 2009.

Signature of Authorised Individual

Day - Month -Year

* A nominee shareholder holds shares on behalf of an actual or beneficial owner.

** Shares in bearer form are negotiable instruments whose terms state that they are payable to the bearer.

† An Authorised Individual refers to an Authorised Financial Adviser listed on the NZ Funds 'Register of Individuals Authorised to perform CDD'.

5 | Significant shareholders (who each own more than 25%)

List full names of significant shareholders below and complete 'AML Form 1 for an Individual' for each.

If any of the significant shareholders are trusts, please complete a separate 'AML Form 3 for a Trust' for each, and if any of the significant shareholders are companies please complete a separate 'AML Form 4 for a Company' for each.

Significant shareholder 1

Title	First name	Middle name(s)	Surname
<input type="text"/>			

Significant shareholder 2

Title	First name	Middle name(s)	Surname
<input type="text"/>			

Significant shareholder 3

Title	First name	Middle name(s)	Surname
<input type="text"/>			

Continued over...

6 | Directors and others with effective control

List full names of all the directors and any other individuals who have effective control of the company. Complete 'AML Form 1 for an Individual' for each.

Directors or other individual 1

Title	First name	Middle name(s)	Surname
<input type="text"/>			

Director or other individual 2

Title	First name	Middle name(s)	Surname
<input type="text"/>			

Director or other individual 3

Title	First name	Middle name(s)	Surname
<input type="text"/>			

Director or other individual 4

Title	First name	Middle name(s)	Surname
<input type="text"/>			

Director or other individual 5

Title	First name	Middle name(s)	Surname
<input type="text"/>			

Director or other individual 6

Title	First name	Middle name(s)	Surname
<input type="text"/>			

7 | Exception handling procedures

Please contact NZ Funds on 0508 733 337 or via email at info@nzfunds.co.nz for assistance should any exception arise.