

NEW ACCOUNT FORM – BUSINESS / ORGANISATION / TRUST etc

We do not open accounts for overseas residents unless opened in person at one of our branches



Cnr Queen & Market Streets
Hastings 4122
PO Box 10 Hastings 4156
New Zealand
phone (06) 872 7299
fax (06) 878 9631
email info@hbsnz.com
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DATE: ___/___/___ ACCOUNT No: _____ (HBS to complete)

Personal Banking

DETAILS FOR BUSINESS / ORGANISATION / TRUST / ESTATE etc:

Name: _____

IRD No: ___/___/___ IRD Tax Rate: 19.5% 33% 39%

Exempt (copy of Certificate must be provided)

Non-Resident (overseas address must be supplied)

Residential / Physical Address: _____

Postal Address: (If Different from above) _____

Email: _____

Work Phone: () _____

Home Phone: () _____

Mobile No : () _____

Contact Person: _____

Code Word: _____ Please load this code word on my/our account for telephone/email/fax communications with HBS. I/We acknowledge that anyone quoting this code word will be able to gain information for my/our account and will be able to transfer funds to/from this account to/from authorised accounts.

Cash Withdrawals are authorised on this a/c: YES NO (only to be NO where, for example, a Treasurer is not permitted to withdraw cash)

NB: In the event of fraud: cash withdrawals may be an irreversible transaction.

Transfers: Interpretation: Hastings Building Society = HBS or HBS Building Society or 'the Society'.
Banking days = Monday to Friday, excluding statutory holidays.
Funds transferred electronically into an HBS account will delay the receipt of funds and interest will not commence until the next banking day.
Funds transferred to an account with a bank or another financial institution are subject to that bank's/financial institution's rules and may not be treated by them as cleared funds.
Funds transferred electronically out of an HBS account (including investments and interest) will be transferred on the same banking day and will accrue no further interest from that date.
Transfer of funds scheduled or requested electronically out of an HBS account (including investments and interest) on a non-banking day will be delayed until the next banking day and will accrue no further interest from the requested or scheduled date of transfer.

Please supply encoded deposit slip or copy of bank/financial institution statement for verification

BANK BRANCH / ACCOUNT NUMBER SUFFIX In the name of: _____

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HBS Account # _____ In the name of: _____

HBS Account # _____ In the name of: _____

Direct Debits: Following a telephone/email/fax request from anyone quoting the correct code word I/we authorise HBS to debit our trading bank account and deposit the funds into this account. Direct Debit Authority form(s) must be attached.

BANK BRANCH / ACCOUNT NUMBER SUFFIX Account name: _____

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ANNUAL REPORT / INTEREST RATE CHANGE NOTIFICATION:

I/We DO NOT wish to receive an Annual Report for this account as I/we already receive one each year. (NB: this only applies to accounts that qualify in accordance with HBS Rules)

I/We DO NOT wish to receive Interest Rate change advice letters for this account (in accordance with HBS Policy)

Reason for investing with HBS: _____

PLEASE NOTE: If this account with HBS only requires ONE signatory to sign for withdrawals, the funds are able to be withdrawn, the account closed or assigned, WITHOUT HBS REQUIRING CONSENT OF ANY OTHER SIGNATORIES. This account is to be a Building Society Share Account.

I/We agree to abide by the Rules and Terms and Conditions of HBS. I/We certify that all the information provided by me/us in this application is true and correct and if any information does change I/We will inform HBS as soon as possible. I/We are aware of our rights of access to, and correction of, the personal information provided by me/us to HBS. HBS complies with Government Acts in relation to the protection and provision of information. Disputes: I/We agree that in the event of any dispute or breach of Rules and/or Terms and Conditions, arising affecting this account, HBS may at its own discretion refuse to allow it to be operated upon until an amicable agreement has been concluded between disputing parties and/or notified to the General Manager of HBS. We may suspend the operation of an account if we consider that we have reasonable grounds to do so. You must reimburse us for any expense we incur in connection with the suspension.

TERM INVESTMENT DECLARATION: I/We hereby acknowledge having received a Term Investment Disclosure Statement. Term investment interest rates are pre-determined and fixed. They may not be varied unless HBS Building Society agrees to an early withdrawal of your investment. However, if HBS does agree, the rate may be reduced by HBS or a penalty break fee charged.

TERMS AND CONDITIONS: I/We hereby acknowledge that I/we have received a copy of HBS's Terms and Conditions.

SIGNATURES TO OPERATE ACCOUNT: Photocopies of identification will be taken after originals have been sighted for each signatory

signatories from the total number of must sign to effect a withdrawal/closure (e.g. 1 out of 2 means either to sign), with the exception of electronic transfers to pre-loaded authorised accounts which can be actioned by one person quoting the correct code word.

Title: Mr/Mrs/Miss/Ms/Other _____

Surname: _____

First Names: _____

Date of Birth: ____/____/____

IRD No: ____/____/____

Residential Address: _____

Postal Address: _____

Phone: Hm: (____) _____ Wk: (____) _____

Mobile: (____) _____

Email: _____

Relationship to a/c holder: _____

Organisation:
(e.g. Bowling Club) _____

SIGNATURE: _____

Identification: One of the following original documents below must be provided. Any other identification must be approved by the General Manager. If the application to open an account is made otherwise than in person at an HBS location, a copy of one of the below documents certified true and correct by a J.P. or Solicitor will generally be acceptable. We do not open accounts for overseas residents unless opened in person at one of our branches.

Drivers Licence Passport Firearms Licence

Sighted original identification and photocopy attached

Title: Mr/Mrs/Miss/Ms/Other _____

Surname: _____

First Names: _____

Date of Birth: ____/____/____

IRD No: ____/____/____

Residential Address: _____

Postal Address: _____

Phone: Hm: (____) _____ Wk: (____) _____

Mobile: (____) _____

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(e.g. Bowling Club) _____

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Surname: _____

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IRD No: ____/____/____

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Postal Address:
(if different from above) _____

Phone: Hm: (____) _____ Wk: (____) _____

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Loaded: _____