



Cnr Queen & Market Streets
PO Box 10
Hastings, New Zealand
Hastings Building Society
Phone (06) 878 9792
Fax (06) 878 9631
htgs@hbsnz.com
www.hbsnz.com

**HBS BUILDING SOCIETY
PARTNERSHIP CERTIFICATE**
Operation of Accounts

To: The Manager
HBS Building Society

Re: _____

(Insert Account Name and facility with relevant security if applicable)

I/We _____ ("Partner/Partners")

(Insert full names of all current Partners)

of _____ ("the Partnership")
(Specify the name of the Partnership)

properly constituted by the Partnership Deed dated the ____ day of _____ certify as follows:

1. Current Partners

Each of the abovenamed is a current and validly appointed Partner of the Partnership and there are no other Partners of the Partnership.

2. Power to Borrow/Guarantee/Transact

The Partnership has the power to borrow, guarantee and enter into other facilities and securities.

3. Partner Resolutions or Approval

If the Partnership Deed requires agreement among the Partners to the Partnership to borrow/guarantee/enter into banking facilities and transactions such resolutions or approval have or will be given or obtained.

4. Alterations to Partnership Deed

Where there is an alteration to the Partnership Deed or to any of the powers exercisable thereunder which might adversely affect HBS, HBS will be notified immediately and a new Partnership Certificate will be completed and forwarded to HBS.

5. Alteration to Partnership

Where any further persons become members of the Partnership or existing members resign or retire, HBS will be notified immediately and a new Partnership Certificate will be completed and forwarded to HBS.

The above Partners will continue to be jointly and severally liable for any obligations entered into by them until such time as HBS agrees to release them or any of them from their obligations and liabilities to HBS.



6. Execution of Documents

All documents which require execution by the Partnership will be properly signed by the Partnership in accordance with the Partnership Deed or practise and will bind all members of the Partnership.

7. No Invalidity

There are no circumstances known to the Partners which would invalidate any transaction entered into with HBS.

8. We the abovenamed acknowledge HBS's New Account Form has been completed and viewed by us. We confirm the signatories noted on that form are authorised to operate the account on behalf of the Partnership.

DATED the _____ day of _____

Name of Partner

Signature

Name of Partner

Signature

Name of Partner

Signature

Name of Partner

Signature