

# Individual Tax Residency Self-Certification

## New Zealand Bankers' Association Form for Tax Residency and Foreign Tax Information

Under New Zealand law, Financial Institutions must collect a self-certification from you about your tax residency status, including before they can open an account for you or in other situations. The Financial Institution may provide your information (even if you refuse to give information or a declaration) to Inland Revenue, who may share that information with overseas tax authorities under international agreements.

If you're an individual (including sole trader) or the Controlling Person of an entity, you may be asked to complete this self-certification form and return it to the Financial Institution where your account is held. Or, an agent, like your solicitor, may ask you to complete this form and they will provide it to the Financial Institution for you.

Where two or more individuals jointly hold an account, each individual must complete a separate self-certification. You can have someone complete this form for you – you will need to give them authority to do this and they may need to provide evidence of that authority. An appropriate entity representative may provide controlling persons self-certifications on their behalf.

If you are unsure how to complete this form or do not understand the consequences of not providing the correct information, please seek advice from a tax professional, lawyer, or other adviser before you complete this form. For more information about why you need to complete this form, see Inland Revenue's "Your obligations if you hold or control financial accounts" brochure (IR1033). You can also find a glossary of terms used at the end of this form.

### SECTION 1. Account holder details (or Controlling Person details where applicable)

Full Legal Name

First name(s)
Middle name(s)
Surname

Date of birth

D	D	M	M	Y	Y	Y	Y
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Residential address (do not provide a PO Box or in-care-of address)

Street address
City/town
Province/State
Postal code/zip code
Country

If you are completing this form as a Controlling Person for an entity, please provide the entity's name and your relationship to the entity:

Name of Entity

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Relationship to Entity (e.g. director, shareholder, settlor, trustee, beneficiary, director of company as controlling person / professional trustee)

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### SECTION 2. Account holder tax residence(s) (or Controlling Person tax residence(s) where applicable)

Are you a tax resident in a country other than New Zealand?

- No (go to section 3) **OR**
- Yes, I am a tax resident of one or more countries other than New Zealand and I have listed all these below  
(please note, United States of America Citizens are considered to be tax residents of the United States of America)

	Country of tax residence 1	Country of tax residence 2	Country of tax residence 3
Countries of tax residence (other than New Zealand)			
Tax Identification Number (TIN) (or country equivalent)			
<b>OR</b> Select reason if TIN is not provided	<input type="checkbox"/> Country doesn't issue TIN <input type="checkbox"/> Country has not issued a TIN to me <input type="checkbox"/> Country doesn't require collection of TIN under domestic law	<input type="checkbox"/> Country doesn't issue TIN <input type="checkbox"/> Country has not issued a TIN to me <input type="checkbox"/> Country doesn't require collection of TIN under domestic law	<input type="checkbox"/> Country doesn't issue TIN <input type="checkbox"/> Country has not issued a TIN to me <input type="checkbox"/> Country doesn't require collection of TIN under domestic law
If you selected 'Country has not issued a TIN to me' above, please give an explanation			



## Additional information for Tax Residency Self-Certification Form



### Proof of address

We require proof of your current residential address. This is not required if you have recently provided such a document from the list below. Please send us one of the following documents that proves your current residential address. This must be made out to your legal name.

Proof of address	Dated within the last:
Bank Statement	12 months
Government Agency Statement	12 months
Utility Bill (for fixed services only)	3 months
Local Authority Bill	3 months
Current Insurance Policy	3 months
Current Vehicle Registration	12 months
Letter from a NZ Educational Institute	3 months
Electoral Commission Correspondence	12 months
Superannuation Scheme Correspondence	12 months
Tenancy Agreement	3 months

You may take your proof of address document along with this form to an ASB Group branch near you.

If you are sending this directly to us please note we require an original document or a copy certified by a trusted referee. Please refer to the 'certification guidelines' section.

If the documentation is in a foreign language it must be accompanied by an independent and certified English translation provided to you by a professional translator.

### Special requirements for the United States

If you have any of the following US specific information but you are not a US tax resident we require you to provide the relevant documentary evidence.

US specific information	Documentary evidence required
You were born in the US	Evidence of your citizenship or nationality in a country other than the US (e.g. a non-US passport or other government issued identification) AND a copy of your Certificate of Loss of Nationality of the US
You are a US citizen	OR provide a signed and dated explanation of: <ul style="list-style-type: none"> <li>• why you do not have such a certificate; or</li> <li>• why you did not obtain US citizenship at birth</li> </ul>

Please send copies of these documents along with the accompanying form back to the Customer Verification Services Team at PO Box 35, Shortland Street, Auckland 1140. Alternatively you can scan and email these to [UpdateDetails@asb.co.nz](mailto:UpdateDetails@asb.co.nz).

### Certification guidelines

The trusted referee must:

- sight the original document, and
- make a statement confirming the document provided is a true copy of the original and, in the case of identification represents a true and correct likeness of the named individual, and
- certification must include the name, occupation and signature of the trusted referee and the date of certification, and certification must have been carried out in the three months preceding the presentation of the copied document

The trusted referee:

- must be over 16 years of age, and
- must not be related to the customer (e.g. parent, child, brother, sister, aunt, uncle, cousin, spouse or partner), and
- must not live at the same address as the customer, and
- must not be involved in the transaction or business requiring certification

Who can certify documents in New Zealand?

- a Lawyer listed on the New Zealand Law Society, or
- a Chartered Accountant listed on the NZICA Directory, or
- a Notary Public listed on the New Zealand Society of Notaries Directory, or
- a Justice of Peace listed on the Royal Federation of New Zealand Justices' Associations Inc. Directory, or
- a registered Medical Doctor, or
- an Honorary Consul at a New Zealand Consular Office (certified copy must be stamped by New Zealand Consulate), or
- a person who has the legal authority to take statutory declarations or the equivalent in New Zealand

Electronic copies of certified documents are only acceptable when:

- the certified copy is sent directly from the trusted referee, and
- the electronic image is clear and legible, and
- there are no doubts as to the integrity of the electronic scans

Please contact us for further information if the documents are being certified overseas. Call the Customer Verification Services Team on 0800 111 373 or +64 9 337 4564 if you're calling from overseas or email us at [UpdateDetails@asb.co.nz](mailto:UpdateDetails@asb.co.nz).

# Professional Trust - Additional Controlling Person Tax Residency Self-Certification Form



## 1. Controlling person

A. Full name:

B. Date of birth:

C. Current residential address:   
  
 Postcode:

D. Please confirm if you are a citizen of the United States (US):

- Yes, I am a US citizen. Under US law you are considered a US tax resident, please enter 'US' and your Social Security Number in E.1  
 No, I am not a US citizen. Please proceed to E.1.

E1. Please list all applicable country/jurisdiction(s) where you are tax resident, including New Zealand.

For each country/jurisdiction, except New Zealand, you will need to provide a taxpayer identification number (TIN) or equivalent, in the table below. If a TIN is not available for that country/jurisdiction, use the appropriate reason A, B or C.

**Reason A** The country/jurisdiction where I am tax resident does not issue a TIN to its residents

**Reason B** I have not been issued a TIN by my country/jurisdiction of tax residence (please include an explanation as to why a TIN was not issued to you in the table below (E.2) within the corresponding entry number)

**Reason C** The domestic law of the country/jurisdiction where I am tax resident does not require the collection of a TIN

Country/Jurisdiction(s) of tax residence (if more than one, please specify all)	Taxpayer identification number(s) (e.g. SSN, TFN, PAN, UTR, NINO, RRN, ITN, HKID, INN) OR Reason (A, B or C)
1	
2	
3	

E2. If you have selected Reason B above please explain why a TIN was not issued to you.

Explanation for Reason B
1
2
3

E3. If the country you are residing in according to Section C is not included as one of your country/jurisdiction(s) of tax residence in E.1 please provide an explanation:

  
  

F. I declare that all the information provided in this form, to the best of my knowledge, is correct and complete. I will advise ASB as soon as any of this information changes, including any change in the tax residency status of the controlling person identified in Section A of this page.  
I acknowledge that the information contained in this form may be shared with the IRD and that the IRD may then exchange this information with tax authorities of another country/jurisdiction in which the controlling person may be tax resident.

Name (please print):

Signature:

Date:

Related entity:

Relationship to entity:

**Note:** If you are not the controlling person please indicate the capacity in which you are signing the form. If signing under a power of attorney please attach a certificate of non-revocation of power of attorney.

Capacity:

### FOR BANK USE ONLY

Date stamp