

Heartland account application

Individuals

All accounts and services are provided by Heartland Bank Limited (Heartland Bank).

By completing and signing this application form, you acknowledge that you have read the relevant terms and conditions on www.heartland.co.nz, including:

- Heartland Bank Limited's current Account and Service General Terms and Conditions; and
- the Heartland Term Deposits Factsheet and Heartland Savings Account Fact Sheet (as applicable);
 and agree they will be binding on you.

A copy of these documents and Heartland Bank's latest Disclosure Statement can be obtained at www.heartland.co.nz.

☐ Individual ☐ Joint ☐ Child (under 16)	☐ Other (please specify)
Please state why you are opening this account and how	w you intend to fund it:
Primary account holder (overseas residents must	t provide a physical overseas address)
☐ Existing customer – customer number	Occupation
□ Mr □ Mrs □ Miss □ Ms □ Other	Date of birth
First name(s) in full	Preferred name
Surname	Country of birth
\Box If your country of birth, citizenship, residency and ta	ax residency are all NZ, please tick and move to the next section.
Countries you have residency or citizenship	
Countries you are tax resident in	
(If any overseas tax residencies, a self-certification form must be comp	pleted)
Tax details	
Tax Identification number	umber
	of tax residency
NZ residents, please indicate your choice of RWT rate I	below. If exempt, please provide an exemption certificate.
10.5% 17.5% 30.0% 🗆 33.0%	39.0% 28.0% (company ☐ Exempt
Non-residents, please specify: NRWT	AIL
Additional tax identification number Additional c	country of tax residency
Contact details	
Postal address	
Suburb City or	town Post code
Physical address (if different from above)	
Suburb City or	town Post code
Email	
(Please note, by providing an email address, you consent to receiving	·
Ph (hm) Ph (wk)	Mob

Joint account holder (overseas residents must provide a physical	overseas address)	
☐ Existing customer – customer number	Occupation	
□ Mr □ Mrs □ Miss □ Ms □ Other	Date of birth	
First name(s) in full	Preferred name	
Surname	Country of birth	
$\hfill\Box$ If your country of birth, citizenship, residency and tax residency are	all NZ, please tick and move to the next section.	
Countries you have residency or citizenship		
Countries you are tax resident in (If any overseas tax residencies, a self-certification form must be completed)		
Tax details		
Tax Identification number ☐ NZ IRD number		
or country of tax residency		
NZ residents, please indicate your choice of RWT rate below. If exemp	t, please provide an exemption certificate.	
□10.5% 17.5% 30.0% □ 33.0% 39.0%	☐ 28.0% (company) ☐ Exempt	
Non-residents, please specify: $\ \square$ NRWT $\ \square$ AlL		
Additional tax identification number Additional country of tax re	sidency	
Contact details Postal address Suburb City or town		
Physical address (if different from above)		
Suburb City or town		
Email City of town		
(Please note, by providing an email address, you consent to receiving communications in e		
Ph (hm) Ph (wk)	•	
Account details		
Account type: ☐ Term Deposit ☐ Notice Saver 32 d	lays	
☐ Everyday Account ☐ Notice Saver 90 d	ays Direct Call Account	
	(No minimum amount except \$1,000 for Term Deposit accounts. \$5,000,000 maximum deposit limit applies to each account)	
Term Deposit details		
Term:	Interest rate: % per annum	
_	ank account below	
Investment payment frequency: 3 Monthly \Box on matur	ity	
Opening balance (Select one of the following options for transferring	g your opening balance)	
☐ Cash ☐ Direct Credit – Heartland: 03-1783-0500515-00 ☐ Direct ☐ Transfer from existing Heartland account:	· · · · · · · · · · · · · · · · · · ·	
Account nominated (Nominated account for interest payments and	withdrawals)	
Account name:		
Signing rules Bank	Branch Account Suffix	
☐ Anyone to sign by themselves ☐ All signatories must sign	☐ At least must sign	

Operator details (if different from Primary or Joint Account holder)		
□ Mr □ Mrs □ Miss □ Ms □ Other	Date of birth	
Signature		
First name(s) in full	Surname	
Physical address		
Ph (hm) Ph (wk)	Mob	
Email	Occupation	
Countries you have residency or citizenship		
Countries you are tax resident in		
Tax details		
Tax Identification number ☐ NZ IRD number		
or country of tax residency		
NZ residents, please indicate your choice of RWT rate below. If exempt, please provide an exemption certificate.		
□ 10.5% □ 17.5% □ 30.0% □ 33.0% □ 39.0%	\square 28.0% (company) \square Exempt	
Non-residents, please indicate: $\ \square$ NRWT $\ \square$ AlL		
Additional tax identification number Additional country of tax residency		
Operator details		
□ Mr □ Mrs □ Miss □ Ms □ Other	Date of birth	
Signature		
First name(s) in full	Surname	
Physical address		
Ph (hm) Ph (wk)	Mob	
Email	Occupation	
Countries you have residency or citizenship		
Countries you are tax resident in (If any overseas tax residencies, a self-certification form must be completed)		
Tax details		
Tax Identification number ☐ NZ IRD number		
or country of tax residency		
NZ residents, please indicate your choice of RWT rate below. If exempt	t, please provide an exemption certificate.	
□ 10.5% □ 17.5% □ 30.0% □ 33.0% 39.0% □ 28	8.0% (company) 🗆 Exempt	
Non-residents, please indicate: $\ \square$ NRWT $\ \square$ AlL		
Additional tax identification number Additional country of tax re	sidency	
Account services (tick the options you would like)		
☐ Heartland Mobile App access ☐ EFTPOS card for all signatories (for Heartland Everyday accounts only)		
☐ Other (please specify)		

How did you hear about us? Online/digital/social media (please specify) _______ Club or event Radio Newspaper (please specify) _______ Club or event Heartland office Word of mouth Other (please specify) Further information (if you have any additional comments or further information, please add it here) Privacy In this declaration, "Heartland", "we" or "us" means Heartland Bank Limited, and its related entities, successors, assigns, agents and associates, and "you" means the person completing this application and each other person named in this application. Heartland is collecting information about you in accordance with the Privacy Act 2020 and our

Privacy Statement, and we may not be able to provide you with products or services if you do not provide that information. That information may be used by us to consider this application for an account or service, including to establish and verify your identity and to assess your creditworthiness and financial position from time to time, and any future application for products or services which involves you. We can also use it to administer and monitor products or services provided to you, to comply with legal and regulatory requirements (e.g. identity verification requirements and tax reporting), to provide you with information about other products or services, including those of selected third parties, generally to develop and run our business, and as otherwise described in our Privacy Statement. You agree that - for those purposes - we can provide information about you to, and obtain information about you from, other organisations or people we consider appropriate. Those organisations might include our service providers, other financial and insurance institutions, government departments, your employer or accountant, third parties for the purposes of fraud prevention, identity verification, and any other purpose relevant to those purposes (those third parties may retain information and use it for identity verification and fraud detection purposes), and other appropriate persons. We may also exchange information about you (including default information) with credit reporting agencies on an ongoing basis. Those agencies may retain that information and provide it to other customers who use their credit reporting services. You have rights to access and request correction of your personal information under the Privacy Act 2020. You can do so by contacting us using the details provided on heartland.co.nz/contact-us.

By proceeding, you confirm that:

- each person named in this application form has read and agrees to the terms above;
- all information provided to us is correct, complete and not misleading; and
- none of those people is an un-discharged bankrupt.

Signed by the primary account holder or on behalf of	Signed by the joint account holder or on behalf of
Name	Name
Signature	Signature
Date	Date