ADVISER CODE (if applicable)



## Milford Investment Funds – Intermediary Company or Partnership Application Form

### Note: Company & Partnership applications have a minimum initial investment of \$100,000 (this can be split across multiple Funds).

# A - Investing Entity Details

COMPANY / PARTNERSHIP NAME

COMPANY IDENTIFIER OR REGISTRATION NUMBER (NZBN)

EMAIL ADDRESS (will receive account communications)		CONTACT PHONE NUMBER
REGISTERED COMPANY ADD	RESS (cannot be a PO Box)	SUBURB
CITY	COUNTRY	POSTCODE
POSTAL ADDRESS (if differen	nt from physical address)	SUBURB
CITY	COUNTRY	POSTCODE

### COMPANY / PARTNERSHIP IRD NUMBER\*

\*For New Zealand resident entities, if no IRD number has been received within six weeks of joining the Fund, we are required by law to close your account.

Please complete the following two questions if the entity is a Company or Limited Partnership.

### Does the Company or Limited Partnership have any nominee directors or nominee shareholders or nominee general partners?

Yes	- provide the name(s) of the nominee person(s) in the Notes Section (page 13) and include a copy of their ID and evidence
-	of the nominee relationship

No

### Prescribed Investor Rate ('PIR') for Company / Limited Partnership (Please tick appropriate box)

You can find out more about PIRs at www.ird.govt.nz/pir. If you are unsure of your PIR, we recommend you seek professional advice or contact Inland Revenue. If a PIR is not selected, or an IRD number is not supplied, a 28% PIR will apply.

0%	10.5%	17.5%	28%

How did you hear about Milford? (Please select as many that apply).

]Newspaper/magazine ac	dvertising Online	e advertising	Online search	Radio S	Social media	Referral
TV/video advertising	Other					

# B - Entity Foreign Tax Residency Details

International tax compliance regulations have been introduced to protect the integrity of tax systems around the world. These require Milford, along with other financial institutions, to collect information about their clients' foreign tax residency. Further information about the Foreign Account Tax Compliance Act ('FATCA') and the Common Reporting Standard ('CRS') is available from Inland Revenue, www.ird.govt.nz/international-tax/exchange-of-information.

### If you need tax advice, please contact a qualified tax professional.

1. Is the entity a foreign tax resident? Yes No

If 'Yes' please list below all countries, other than New Zealand, in which the entity is a tax resident and provide the Tax Identification Number ('TIN') for each country.

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)		

### 2. Is the entity a Financial Institution for FATCA or CRS purposes?

The term Financial Institution ('FI') as defined by FATCA and CRS includes custodial institutions, depository institutions, investment entities or specified insurance companies. A family trust is likely to be a Financial Institution if 50% or more of the trust's income is from financial assets and is managed by another Financial Institution.

No - please continue to Question 4 below

Yes - if applicable, please provide your Global Intermediary Identification Number (GIIN)

GIIN:

- then continue to Question 3 below

### 3. Are you a managed investment entity that is resident in a jurisdiction that is not participating in the OECD's CRS regime?

This would capture any entity, the gross income of which is primarily attributable to investing, reinvesting, or trading in financial assets, and that is (i) managed by a Financial Institution; and (ii) not tax resident in a jurisdiction with which an agreement is in place in relation to the automatic exchange of financial account information as set out in the CRS.

No - please continue to Section C

Yes - please continue to Section C and ensure you also complete Appendix 1 for each Associated Person<sup>^</sup> as applicable

### 4. Is the entity an Active or Passive Non-Financial Entity (NFE)?

Generally, an entity will be an Active NFE if less than 50% of its income is passive income and less than 50% of its assets produce (or could produce) passive income. An entity will be a Passive NFE if it primarily (50% or more) derives passive income and/or has assets that primarily (50% or more) produce (or could produce) passive income. **Passive income** generally includes non-trading investment income in the form of: interest or equivalents, dividends, annuities, other financial arrangements' income, and rents and royalties.

Active NFE - please continue to Section C

Passive NFE - please continue to Section C and ensure you also complete Appendix 1 for each Associated Person<sup>^</sup> as applicable

^In this context an Associated Person refers to any individual who owns, directly or indirectly, more than 25% of a company's share capital.

C - Director / Partner 1 Det	tails			
TITLE FIRST NAME MI	IDDLE NAME(S)		SURNAME	
PREFERRED NAME	DATE OF BIRTH		CONTACT NUME	BER
	/	/		
ROLE/RELATIONSHIP TO ENTITY OCCUPATION	N	EMAIL ADDRES	SS	
PHYSICAL ADDRESS (cannot be a PO Box)		SUBURB		
CITY CC	OUNTRY			POSTCODE
POSTAL ADDRESS (if different from physical address)		SUBURB		
CITY CC	OUNTRY			POSTCODE
IRD NUMBER Are you a US citizen or US tax resident? Are you a tax resident in any other country (other than the state of the above questions plic ('TIN') for each country. If you are a US citizen or US tax	ease list all countrie			
Country of Tax Residence	TIN (or r	eason why TIN	was unable to be	e obtained)
For further information on your personal tax residency status ple http://www.oecd.org/tax/automatic-exchange/crs-implementati		-residency or spea	ak to a tax adviser.	
Prescribed Investor Rate ('PIR') (Only required for Partn				
You can find out more about PIRs at www.ird.govt.nz/pi or contact Inland Revenue. <b>If a PIR is not selected, or an</b>				
0% (Notified Foreign Investor)* 0% (Transition	al resident)*	0.5% 17.5%	28%	
*Milford Global Equity Fund only. Please see additional documer	ntation requirements in	the Investor Guic	le to qualify for the	ese PIR rates.
<b>Investor Identification</b> We have two options for clients to confirm their identity	v. Please select <b>one</b> o	of the options b	elow.	
<b>Option 1 - Electronic Identity Verification and Proof of</b> Milford can confirm the identity and/or New Zealand ad Please note that we use an external third party system n	dress of many of ou		•	
I confirm that I give Milford authority to check my id I have included a copy of my current signed NZ Pas				
Option 2 - Certified Copies of Identity Documents U will provide certified identification documents. For further detail on document requirements, inclu	ding who can certif	y them and cor	rect certificatio	n wording, see page 11.

C - Director / Partner 2	2 Details		
TITLE FIRST NAME	MIDDLE NAME(S)	SURN	AME
PREFERRED NAME	DATE OF BIRTH	CONTAC	CT NUMBER
	/	/	
ROLE/RELATIONSHIP TO ENTITY OCCU	IPATION	EMAIL ADDRESS	
PHYSICAL ADDRESS (cannot be a PO Box)		SUBURB	
CITY	COUNTRY		POSTCODE
POSTAL ADDRESS (if different from physical add	dress)	SUBURB	
CITY	COUNTRY	[	POSTCODE
Tax Information			
Are you a US citizen or US tax resident? Are you a tax resident in any other country (other If you answered 'Yes' to either of the above ques ('TIN') for each country. If you are a US citizen or	tions please list all countrie		
Country of Tax Residence	TIN (or r	eason why TIN was una	ble to be obtained)
For further information on your personal tax residency shttp://www.oecd.org/tax/automatic-exchange/crs-imple		-residency or speak to a ta	x adviser.
Prescribed Investor Rate ('PIR') (Only required f	or Partners of a Partnershi	o)	
You can find out more about PIRs at www.ird.gov or contact Inland Revenue. <b>If a PIR is not selecte</b>			
0% (Notified Foreign Investor)* 0% (Tra	nsitional resident)*	0.5% 17.5% 28	3%
*Milford Global Equity Fund only. Please see additional	documentation requirements ir	1 the Investor Guide to qual	lify for these PIR rates.
<b>Investor Identification</b> We have two options for clients to confirm their	identity. Please select <b>one</b>	of the options below.	
Option 1 - Electronic Identity Verification and P Milford can confirm the identity and/or New Zeal Please note that we use an external third party sy I confirm that I give Milford authority to chec I have included a copy of my current signed	and address of many of ou ystem not owned by Milford k my identity and/or addre	d to conduct identity ch ess electronically using t	ecks in this way. he documentation provided.
Option 2 - Certified Copies of Identity Documer I will provide certified identification documer For further detail on document requirement	its.	y them and correct cer	tification wording, see page 11.

C - Director / Partner 3	Details				
TITLE FIRST NAME		1E(S)		SURNAME	
	DATE OF BI	IRTH			BER
		/	/		
ROLE/RELATIONSHIP TO ENTITY OCCUP	ATION	E	MAIL ADDRE	SS	
PHYSICAL ADDRESS (cannot be a PO Box)			SUBURB		
CITY	COUNTRY				POSTCODE
POSTAL ADDRESS (if different from physical addre	ess)		SUBURB		
CITY	COUNTRY				POSTCODE
Tax Information					
Are you a US citizen or US tax resident? Are you a tax resident in any other country (other If you answered 'Yes' to either of the above questio ('TIN') for each country. If you are a US citizen or U	ons please list all	countries			
Country of Tax Residence		TIN (or re	ason why TIN	was unable to be	e obtained)
For further information on your personal tax residency sta http://www.oecd.org/tax/automatic-exchange/crs-implem		stance/tax-ı	residency or spe	ak to a tax adviser.	
Prescribed Investor Rate ('PIR') (Only required for You can find out more about PIRs at www.ird.govt. or contact Inland Revenue. If a PIR is not selected,	.nz/pir. If you are	unsure of	your PIR, we		
0% (Notified Foreign Investor)* 0% (Trans	sitional resident)	* 10.	5% 17.5%	28%	
*Milford Global Equity Fund only. Please see additional do	cumentation requir	rements in t	the Investor Guid	de to qualify for the	ese PIR rates.
<b>Investor Identification</b> We have two options for clients to confirm their id	entity. Please sel	ect <b>one</b> o	f the options b	elow.	
Option 1 - Electronic Identity Verification and Pro Milford can confirm the identity and/or New Zealar Please note that we use an external third party sys I confirm that I give Milford authority to check	nd address of ma tem not owned k my identity and/	oy Milford ′or addres	to conduct ide s electronicall <u>y</u>	entity checks in t y using the docu	this way. mentation provided.
I have included a copy of my current signed N Option 2 - Certified Copies of Identity Documents I will provide certified identification documents For further detail on document requirements,	<b>S</b>				

C - Director / Partner 4	l Details		
	MIDDLE NAME(S)	SUF	RNAME
PREFERRED NAME	DATE OF BIRTH	CONT	ACT NUMBER
	/	/	
ROLE/RELATIONSHIP TO ENTITY OCCU	IPATION	EMAIL ADDRESS	
PHYSICAL ADDRESS (cannot be a PO Box)		SUBURB	
CITY	COUNTRY		POSTCODE
POSTAL ADDRESS (if different from physical add	dress)	SUBURB	
CITY	COUNTRY		POSTCODE
IRD NUMBER Are you a US citizen or US tax resident? Are you a tax resident in any other country (othe If you answered 'Yes' to either of the above ques ('TIN') for each country. If you are a US citizen or	tions please list all countrie		
Country of Tax Residence	TIN (or r	eason why TIN was u	nable to be obtained)
For further information on your personal tax residency s http://www.oecd.org/tax/automatic-exchange/crs-imple		<pre>c-residency or speak to a</pre>	tax adviser.
Prescribed Investor Rate ('PIR') (Only required f You can find out more about PIRs at www.ird.gov or contact Inland Revenue. If a PIR is not selected	rt.nz/pir. If you are unsure o	of your PIR, we recom	
0% (Notified Foreign Investor)* 0% (Tra	nsitional resident)*	0.5% 17.5%	28%
*Milford Global Equity Fund only. Please see additional of	documentation requirements in	n the Investor Guide to q	ualify for these PIR rates.
<b>Investor Identification</b> We have two options for clients to confirm their	identity. Please select <b>one</b>	of the options below.	
Option 1 - Electronic Identity Verification and P Milford can confirm the identity and/or New Zeal Please note that we use an external third party sy I confirm that I give Milford authority to chec I have included a copy of my current signed	and address of many of ou ystem not owned by Milfor k my identity and/or addre	d to conduct identity	checks in this way. g the documentation provided.
Option 2 - Certified Copies of Identity Documer U I will provide certified identification documer For further detail on document requirement	nts.		

D - Investment Details					
Source of Funds*					
Please tell us the original source of the funds you are investing with us.					
Inheritance/windfall Property sale Asset/Business sale Personal income Accumulated savings/earnings Superannuation					
You will need to supply proof of the source of funds (this documented evidence may need to be certified). See page 12 for further examples of suitable verification of the source of your funds.					
Please provide further details. For example, sale of property at 123 Sample Street for \$600,000 on 21/06/2014.					
Primary Purpose for the Investment*					
Please tell us the primary reason you are investing these funds with us.					
Retirement     Income     Investment     Other (please specify)					
How do you intend to transact on this account?					
Deposits (please select at least one)					
Regular     Now and then     Lump sum (one-off)					
Withdrawals (please select at least one)					
Regular   Now and then   Lump sum (one-off)					

\*Please note this information is requested solely in relation to Milford's Anti-Money Laundering and Countering Financing of Terrorism Act 2009 obligations and is not used to assess the suitability of your product selection, or to provide financial advice.

### **Investment Details**

### Minimum initial investment for Company or Partnership account applications is \$100,000 (can be split across multiple funds).

		Indicative Investment Amount (Minimum of \$1,000 Per Fund)	(If no option is seled	on Options cted, all distributions invested)
	Milford Conservative Fund	\$	Reinvest	Direct Credit
nds	Milford Diversified Income Fund	\$	Reinvest	Direct Credit
Multi-Asset Funds	Milford Balanced Fund	\$	N/A	N/A
ti-Ass	Milford Active Growth Fund	\$	N/A	N/A
Mult	Milford Australian Absolute Growth Fund	\$	N/A	N/A
	Milford Aggressive Fund	\$	N/A	N/A
Fixed Funds	Milford Cash Fund	\$	N/A	N/A
h & Fi me Fu	Milford Trans-Tasman Bond Fund	\$	Reinvest	Direct Credit
Cash & Income	Milford Global Corporate Bond Fund	\$	Reinvest	Direct Credit
spu	Milford Global Equity Fund	\$	N/A	N/A
Equity Funds	Milford Trans-Tasman Equity Fund	\$	N/A	N/A
Equ	Milford Dynamic Fund	\$	N/A	N/A
	Total	\$		

### **Payment details & process**

### Please note your account must be established with Milford before we can accept any funds for investment.

Once your account has been setup we will contact you with the appropriate bank account details and references for you to make a direct credit payment.

## E - Bank Account Details

Please provide us with your bank account details, including proof of these.

- The bank account you provide will be the account we can accept payments from (you need to initiate the payment).
- Any withdrawal requests will be paid into this bank account.
- We recommend using your cheque account rather than a savings account.
- · We are unable to accept payments from international or third party bank accounts.

### ACCOUNT NAME (must be in the same name as your Milford Funds holding)

BANK	BRANCH
ACCOUNT NUMBER	
BANK BRANCH ACCOUNT NUMBER SUFFIX	

### **PROOF OF BANK ACCOUNT**

Must be a NZ domiciled bank account in the name of the Company or Partnership.

Please provide a bank record or document that:

- Was issued in the last 12 months
- Includes bank account name
- Includes bank account number
- Includes bank logo

Examples of this include a bank statement, letter from the bank, or mobile banking screen shot.

## F - Authority to Act (optional)

Complete this section to give authority to a specified subset of Directors/Partner to act on behalf of all others.

We the Directors/Partners:

- 1. Confirm that we are all the current and validly appointed Directors/Partners of the Company/Partnership
- 2. Confirm that we have decided to invest in one or a number of Milford Funds from time to time
- 3. Authorise that the following named Directors/Partners (acting jointly where more than one name is given)

NAME	NAME
NAME	NAME

may, until further written notice to the contrary, instruct Milford on behalf of all of the Directors/Partners to:

a) reallocate any or all amounts invested between Funds in the name of the Company/Partnership

b) withdraw any or all amounts from any Fund(s) provided that such amounts are payable to the Company/Partnership c) deposit any further amounts into any Fund(s) in the name of the Company/Partnership

- 4. Ratify the actions of the above authorised Directors/Partners so acting
- 5. Indemnify Milford in respect of any liability incurred by Milford in acting in reliance upon this Authority to Act.

Please note, you must immediately notify Milford of any changes to the Directors/Partners of the Company/Partnership. This Authority to Act will then be revoked and, if required, a new Authority to Act will need to be completed.

### All Directors/Partners must sign the Agreement on page 9 before the Authority to Act will be in place.

# Your Agreement

### **Privacy Statement**

1. The personal information you provide in this Application Form (and identity information collected in connection with this Application Form), or in the future, will be collected and held by Milford Funds Limited ("Milford") for purposes relating to the administration, marketing, operation, security and management of the Funds, the provision of services to you, and compliance with any laws, rules and regulations whether in New Zealand or in any other country. Milford will do this in accordance with all applicable New Zealand privacy laws and our Privacy Policy which can be accessed on our website at milfordasset.com/privacy-policy. Your personal information may be disclosed to, and held and used by, the following persons:

- The Supervisor of the Funds
- Milford Asset Management Limited or any of its subsidiaries or related companies (together, the "Milford Group")
- Inland Revenue
- Financial Markets Authority

- Any third party, whether in New Zealand or elsewhere, that provides services to the Milford Group. In particular, if you have opted for electronic identity verification, the information will be shared with external agencies who may use a credit file header database to verify your address (note, this is not a credit check)

- Your own financial adviser (and their staff), this only applies if you have notified us of this relationship (you are responsible for advising us if and when this relationship ends)

- Any other person or entity where it is relevant to do so for the purposes set out above.

We can also release personal information to third parties as instructed by you and in other ways permitted by the Privacy Act.

- 2. Your personal information may also be used by, and you consent to the use of your personal information by, Milford or any other member of the Milford Group to keep you informed about other financial opportunities, products and services of any Milford Group member, including by email, by text message, by Milford Group's online portal or by any other electronic means. Any electronic communication offering other financial opportunities, products or services will include an unsubscribe facility.
- 3. You have the right to access and request correction to the personal information you have supplied, by contacting Milford on 0800 662 345 or by emailing us at info@milfordasset.com. Any update to your personal information may be used to update other information held about you by any member of the Milford Group.

#### **Electronic provision of information**

4. We consent to receiving any communication from the Supervisor or any member of the Milford Group electronically via Milford Group's online portal, or at the email address specified in this Application Form, or any other email address advised to any Milford Group entity from time to time. These communications include those required by law and those provided in connection with your Fund, including annual reports, annual tax certificates and six-monthly transaction confirmations.

#### Declaration

- We have received and read a copy of the Product Disclosure Statement dated 20 June 2024 ("PDS"), and understand that additional information about the Funds is available on the Funds' online register entry.
- We agree to be bound by the terms and conditions of the PDS and the Trust Deed.
- We understand that the value of our investment is liable to fluctuations and may rise and fall from time to time.
- We accept that it is solely our decision to make this investment and that we have chosen the appropriate Fund for our risk tolerance and circumstances.
- We understand that Milford has not assessed the suitability of this investment for our personal financial situation, financial needs or goals.
   We understand the manner in which the fees will be deducted from our investment.
- We acknowledge that we will be unable to make any withdrawal from the Funds until Milford has received our signed withdrawal
  request and any supporting or identification information required.
- All the information we have provided in this Application Form is to the best of our knowledge and belief, correct and complete.
- We will immediately advise Milford about any changes to our personal details (including our residential or email address, telephone number, legal status or capacity).
- We undertake to notify Milford of any change in tax residency status or a change which causes the information to become incorrect or incomplete.
- We confirm that particulars of all current directors/partners have been listed in this application and we will immediately advise Milford
  of any changes to the directors/partners of the entity.
- We understand that if Milford receives contradictory instructions from any persons authorised to operate our account, Milford can refuse to act on any or all such instructions.
- We will immediately advise Milford of any changes, variations or amendments to the entity which affects the directors/partners powers of investment.
- We acknowledge and agree to the terms of the Privacy Statement and electronic provision of information above.

NAME OF DIRECTOR / PARTNER 1	SIGNATURE	DATE
NAME OF DIRECTOR / PARTNER 2	SIGNATURE	DATE
		/ /
NAME OF DIRECTOR / PARTNER 3	SIGNATURE	DATE
NAME OF DIRECTOR / PARTNER 4	SIGNATURE	DATE
		/ /
NAME OF DIRECTOR / PARTNER 5	SIGNATURE	DATE
		/ /

If required, you may make a copy of this page for additional signatories. Please note we cannot accept electronic signatures.

## Appendix 1 (You may make copies of this page if required)

To be completed by the following individuals (unless they have completed Section C):

- Additional Directors or Partners or Officers
- Any Associated Person which refers to any individual owning more than 25% of the company shares or has more than 25% of the voting rights
- Additional persons with the power to control the Company/Partnership or alter its constitutional document
- Individuals with effective control of a trading company, such as a CEO or CFO
- Any person who has been given the authority to act

COMPANY / PARTNERSHIP NAME

TITLE	FIRST NAME	MIDE	DLE NAME(S)	SURNAME	
PREFERRE	DNAME	DATE OF BIRTH	CONTACT NUMBER	IRD NUMBER	
		/ /			
ROLE/REL	ATIONSHIP TO ENTITY	OCCUPATION	EMAIL A	DDRESS	
PHYSICAL	ADDRESS (cannot be a	PO Box)	SUBU	RB	
CITY		COU	NTRY		POSTCODE
POSTAL A	DDRESS (if different from	n physical address)	SUBU	RB	
CITY		COU	NTRY		POSTCODE
Are you a l	JS citizen or US tax resid	ent?	Ye	s 🗌 No	
Are you a t	ax resident in any other	country (other than the	US or NZ)?	s 🗌 No	
•			e list all countries below a sident your TIN will typica	•	

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)

For further information on your personal tax residency status please see

http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency or speak to a tax adviser.

### Investor Identification

Please select **one** of the options below.

### **Option 1 - Electronic Identity Verification and Proof of Address**

Milford can confirm the identity and/or New Zealand address of many of our clients electronically, with their permission. Please note that we use an external third party system not owned by Milford to conduct identity checks in this way.

I confirm that I give Milford authority to check my identity and/or address electronically using the documentation provided. I have included a copy of my current signed NZ Passport (preferred) or NZ Driver Licence (front & back).

**Option 2 - Certified Copies of Identity Documents** 

I will provide certified identification documents.

	s, including who can certify them and correct certification wording	

### Declaration

I acknowledge that the information contained in this form and information regarding the account may be reported to New Zealand Inland Revenue and exchanged with the tax authority of another pursuant to intergovernment agreements to exchange financial account information. I will notify Milford if any of this information changes, including any changes in my tax residency status. I agree to Milford's Privacy Policy found here milfordasset.com/privacy-policy.

SIGNATURE

DATE /

/

# Investor Identification

If you have opted not to use Electronic Identity Verification or did not pass this system check then you will need to provide the following documentation:

### Please provide a certified photocopy of each document:

- The documents can be verified by a Milford employee or certified by a Trusted Referee as described below.
- These documents cannot be scanned to us (we need the physical copy that has been certified).
- Please do not send in original versions of your identity documents.

### 1. CERTIFIED COPY OF IDENTIFICATION

Option One o	<b>n 1</b> f the following:	Option	2
	Current signed Passport (preferred)		New Zealand Driver Licence (front and back)
	New Zealand Firearms Licence	In com	pination with one of the following:
OR			Bank statement dated within the last 12 months
			Valid credit or debit card with name embossed and signature
			Birth certificate
			Citizenship certificate
			Government agency letter (IRD, Work & Income, Electoral Commission) dated within the last 12 months
			SuperGold card with photo, name and signature

### 2. PROOF OF ADDRESS

Must state name and physical address, cannot be a PO Box address.

One	One of the following documents that has been issued in the last 12 months:			
	Bank statement (we accept downloaded bank statements)			
	Current house or contents insurance policy or renewal statement			
	Current vehicle registration			
	Government agency letter (IRD, Work & Income, Electoral Commission)			
	Utility bill (power, water, internet, fixed home phone, SKY)			
	Rates bill			
	Tenancy agreement			
	Letter issued by local Health Board			

### 3. ACCEPTED TRUSTED REFEREES FOR CERTIFICATION

Originals can be verified by a Milford employee **OR** certified by a Trusted Referee in accordance with the instructions outlined below. Certified copies of identification must be presented to Milford within three months of certification.

Identification must be certified by one of the following:

- Lawyer with a current practising certificate
- Chartered Accountant
- Member of the Police
- Justice of the Peace
- Registered Medical Doctor
- Registered Teacher

- New Zealand Honorary Consul
- Notary Public
- A person who has the legal authority to take statutory declarations or the equivalent in New Zealand
- If outside New Zealand, a person authorised by law to take a statutory declaration (or equivalent) in that country

The certifier must:

- For photographic ID, make the statement "I certify this to be a true copy of the original which I have sighted and represents a true and correct likeness of [name of the person presenting the documentation for certification]."
   For certification of other documents, make the statement "I certify this to be a true copy of the original which I have sighted."
- Include their **name, occupation and capacity to be a certifier** e.g. registration number (if applicable), **signature and date** of certification.
- Not be living at the same address, a relative or spouse of the individual presenting the documents or, be involved in the transaction or business requiring the certification.

# Verification of Source of Funds

Verification is not required for Trading Companies (i.e. a business selling products or services).

Source of Funds	Suggested Verification/Evidence (not exhaustive)
Employment	<ul> <li>Pay slip (or bonus) from within the last three months</li> <li>Bank statement details</li> <li>IRD documents</li> <li>Employment agreement</li> </ul>
Disposal of Business or Assets	<ul><li>Latest audited company accounts</li><li>Letter from solicitor or accountant (see below example)</li></ul>
Investment income	<ul> <li>Investment/savings certificates, contract notes or surrender statements</li> <li>Bank statements clearly showing receipt of funds and investment company name</li> <li>Signed letter detailing funds from a regulated accountant or solicitor</li> </ul>
Superannuation lump sum or annuity/retirement plan payments	<ul><li>Closing statement</li><li>Letter confirming collection</li></ul>
Inheritance	<ul> <li>Grant of Probate (copy of the will) which includes value of inheritance amount or estate</li> <li>Letter from solicitor or accountant (see below example)</li> </ul>
Maturity or surrender of life policy	<ul><li>Closing statement</li><li>Letter confirming surrender</li></ul>
Business proceeds	<ul> <li>Latest audited company accounts</li> <li>Letter from solicitor or accountant (see below example)</li> </ul>
Sale of property	<ul><li>Sale contract</li><li>Letter from solicitor or accountant (see below example)</li></ul>
Lottery/Betting win	Lotteries commission letter
Insurance or compensation claim	<ul><li>Closing statement</li><li>Letter confirming claim</li></ul>
Gift	<ul> <li>Evidence of the donor's source of funds and a letter from the donor confirming details of the gift.</li> <li>Letter from solicitor (see below example)</li> </ul>
Other Income	Anything not listed that otherwise proves source of funds and is independent

### Example letter template for solicitor or accountant

These should be on the organisation's letterhead, include the author's name, title and contact details and make a statement including the below points:

- We act as **[solicitors/accountants]** for the **[company/partnership name]** and are familiar with the company/partnership's history.
- We can confirm that the funds within the company/partnership, invested with Milford, is originally derived from:
  - Detail of how the funds held by the company/partnership was sourced
  - Detail the amount(s)
  - Detail the date of the source event(s), or the time frame over which the funds were accumulated
- Include any details and/or information that may better help clarify the above statements, if required.

Application Form Checklist					
Application form completed and signed by all relevant individuals					
Constitution, Rules, and any amendments (for Incorporated and Unincorporated Entities)					
Proof of bank account in the Company's/Partnership's name					
Details and verification of source of funds (certified copy may be required)					
Section C completed for the following persons:					
<ul> <li>Directors / Partners or General Partners</li> <li>All Officers (for Incorporated and Unincorporated Entities)</li> </ul>					
Appendix 1 completed for the following persons (unless they have completed Section C):					
<ul> <li>Additional Directors or Partners or Officers</li> <li>Any Associated Person which refers to any individual owning more than 25% of the company</li> </ul>	charge or here we th				
<ul> <li>Any Associated Person which refers to any individual owning more than 25% of the company 25% of the voting rights</li> </ul>	shares or has more than				
<ul> <li>Additional persons with the power to control the Company/Partnership or alter its constitutio</li> <li>Individuals with effective control of a trading company, such as a CEO or CFO</li> </ul>	onal document				
<ul> <li>Any person who has been given the authority to act</li> </ul>					
If the company has any nominee directors or nominee shareholders, list their names in the Note copy of their ID (if not already provided as part of the application) and provide evidence of the	,				
If a Limited Partnership has any nominee general partners, list their names in the Notes section their ID (if not already provided as part of the application) and provide evidence of the nomine					
Notes					

### **RETURNING YOUR COMPLETED FORM**

Please send your application and all supplementary documentation in hard copy to the address details below: Milford Funds Limited PO Box 960 Shortland Street Auckland 1140