

Date:

To: China Construction Bank (New Zealand) Limited ("Bank")

Making Changes to Personal Account Form (For Personal Customer Only)

- 1. Please complete in BLOCK LETTERS, " √ " where appropriate.
- 2. * Please Cross or Input N/A whichever is not appropriate
- 3. Return the completed form to us at Level 29, Vero Centre, 48 Shortland Street, Auckland 1010, New Zealand

Section 1 - Cust	omer Details (This Section must be completed)	
Part A - Existing Cus	stomer Information	Effective Date
Full Name (For Joint Accou	ints, please state the full name of the person to whom the following information is related.)	Immediate From
ID Туре	:	Please allow 3-5 working days for processing
ID Number	:	Joint Account or not: Yes No
Part B - Tell us what Please tick at least one b	t you want to do box: You can choose more than one option.	

- Full Replacement of Complete Part A, B, D.01, E & H
 - This will remove all existing signing rules and Authorised Signatories (including Account owners) and replace them with what has been completed on this form
- Add a Authorised Signatory Complete sections A, B, D.01 & H
- This will add a Authorised Signatory or Authorised Signatories to your existing authority.
- They will have authority to operate the account in accordance with the current signing rule.
- Remove a Authorised Signatory Complete sections A, B, D.02 & H
- Ensure any access via Phone, Online Banking or Card is removed.
- Change of signing rule Complete sections A, B, E & H
- Change of Name- Complete sections A, B, C.01 & H
- Refer to documentation requirements in Part C to support changes.
- Change of contact details Complete sections A, B, C.02 (and/or C.03) & H This change will affect all accounts where you are the primary Account owner
- This change will affect all accounts where you are the primary Account owne

Section 2 - Details of Changes Required

Part C - Change of Information

This will change the Basic details on the Customer Profile mentioned in Part A

C.01 - Change of Name

• If an Account owner's legal name has changed, please supply a copy of the marriage certificate/deed poll or other evidence of the change

	First Name(s)	Surname
1 - Change name to :		
2 - Change name to:		
3 - Change name to :		

C.02 - Change of Address - Account owner(s) Only

• PI	lease supply evidence of the Add	; change
	New Residential Address	
	New Postal Address	

C.03 - Change of Contact Number/Fax No./E-mail Address - Account owner(s) Only

Full Ex	isting Replacement by			
	E-mail Address - 1 :	1 - Tel No.	1 - Fax No.	
	E-mail Address - 2 :	2 - Tel No.	2 - Fax No.	
	E-mail Address - 3 :	3 - Tel No.	3 - Fax No.	
Add				
	E-mail Address - 1 :	1 - Tel No.	1 - Fax No.	
	E-mail Address - 2 :	2 - Tel No.	2 - Fax No.	
	E-mail Address - 3 :	3 - Tel No.	3 - Fax No.	
Remov	re			
	E-mail Address - 1 :	1 - Tel No.	1 - Fax No.	
	E-mail Address - 2 :	2 - Tel No.	2 - Fax No.	
	E-mail Address - 3 :	3 - Tel No.	3 - Fax No.	



Part D - Authorised Signatory Changes

D.01 - Add an Authorised Signatory/Full Replacement

• If more than 3 Authorised Signatories, ask for a List of extra Authorised Signatories form

• Treat all fields as mandatory. The more contact information we have the easier it is for us to contact you when there is an issue. Where, for example, you don't have a fax please write N/A.

• Each Authorised Signatory's mobile and email, if applicable, are important should we need to contact anyone urgently regarding the account, so please ensure these fields are completed.

• If you are advising a change of Basic & contact details, please just complete the relevant fields in Part C of the Making Changes to Account form.

• If you are adding another Account owner, you need to make this clear on the form under Designation.

• We are, or may be, required to verify the identity of the extra Authorised Signatories listed in this form and certain other information provided in this form.

• For Account owners only: If you don't advise your IRD and/or tax rate we are obliged by the IRD to use the maximum tax rate.

	Add	Full Replacement		
	All Accounts		Details: Mr. Mrs. Miss. Ms. Other (Please specify)	
	The Following Account(s) Or	nly (Please Specify)	Full Name	
	Account Name (if different from Above)	Account Number List	Home Address	
			Email Phone No.	
			Occupation Date of Birth	
			ID Type ID No.	
	Specimen Signature		ID Expiry Date IRD No.	
			RWT Rate 10.5% 17.5% 30% 33%	
			NRWT	
	* Account owner	Yes No	AIL	
			Exempt Please Inculde a copy of your exemption certificate	
	By signing you are bound by ti	he conditions on the reverse and	the Bank's General Terms and Conditions.	
	For Account owners only (ple	ase complete the following info	ormation)	
	Are you a US Citizen?	Yes No	Additional Country(s) of Tax Residency (if any)	
	Main Country of Tax Residenc	zy	Foreign Tax Identification Numbers (FIN)	
2	Add	Full Replacement		
	All Accounts		Details: Mr. Mrs. Miss. Ms. Other (Please specify) Full Name	
	The Following Account(s) Or	nly (Please Specify)		_
	Account Name (if different from Above)	Account Number List	Home Address	
			Home Address Email Phone No.	
			Email Phone No.	
			Email Phone No. Occupation Date of Birth	
	from Above)		Email Phone No. Occupation Date of Birth ID Type ID No.	
	from Above)		Email Phone No. Occupation Date of Birth ID Type ID No. ID Expiry Date IRD No.	
	from Above)		EmailPhone No.OccupationDate of BirthID TypeID No.ID Expiry DateIRD No.RWT Rate10.5%17.5%30%33%	
	from Above) Specimen Signature	Account Number List	Email Phone No. Occupation Date of Birth ID Type ID No. ID Expiry Date IRD No. RWT Rate 10.5% 17.5% NRWT INC	
	from Above) Specimen Signature * Account owner	Account Number List	Email Phone No. Occupation Date of Birth ID Type ID No. ID Expiry Date IRD No. RWT Rate 10.5% 17.5% 30% 33% NRWT Internet Internet Internet Internet AlL Internet Internet Internet Internet	
	from Above) Specimen Signature * Account owner By signing you are bound by th	Account Number List	Email Phone No. Occupation Date of Birth ID Type ID No. ID Expiry Date IRD No. RWT Rate 10.5% 17.5% 30% NRWT International of the second of the	
	from Above) Specimen Signature * Account owner By signing you are bound by th	Account Number List Yes No he conditions on the reverse and	Email Phone No. Occupation Date of Birth ID Type ID No. ID Expiry Date IRD No. RWT Rate 10.5% 17.5% 30% NRWT International of the second of the	

CCB - Sub



Add	Full Replace	ement								
All Accounts			Details:	Mr.	Mrs.	Miss.	Ms.	Other (Ple	ease specify)
The Following Account(s) Or	nly (Please Spec	cify)	Full Name							
Account Name (if different from Above)	Account Num	nber List	Home Add	ress						
			Email					Phone No	Э.	
			Occupation	n				Date of B	irth	
			ID Type					ID No.		
Specimen Signature			ID Expiry D	ate				IRD No.		
			RWT Rate		10.5	5%	17.5%	30%	33%	
			NRWT							
* Account owner	Yes	No	AIL							
			Exempt	Ple	ase Incul	de a copy	of your exe	emption certi	ificate	
By signing you are bound by t	he conditions or	n the reverse and th	e Bank's Gen	eral Ter	ms and C	onditions	5.			
For Account owners only (ple	ase complete t	he following inform	nation)							
Are you a US Citizen?	Yes	No	Additional	Country	y(s) of Tax	Residen	icy (if any)			
Main Country of Tax Residence	CY		Foreign Ta	x Identii	fication N	umbers	(FIN)			

D.02 - Remove an Authorised Signatory

Account owners only:

• If any account has a lending or credit card facility, or is overdrawn, then the Bank's consent is required prior to removal of an Account owner.

• Account owners will also need to sign Part I (Authorising Changes) if they are being removed.

1. Full Name	:	Email Address	
2. Full Name	:	Email Address	
3. Full Name	:	Email Address	

Part E - Change Signing Rules

*Note: If you choose a rule that requires more than one signature and in an event such as death or removal of a Authorised Signatory that would result in insufficient Authorised Signatories to enable signing in accordance with this rule, then all remaining Authorised Signatories must sign together until such time as the relevant Account owners expressly change the rules.

• if you don't tick anything, we will default to the existing signing rule held.

Please tick just ONE box		Change to Authorised Signatory				
<u>All Accounts</u>		Any Authorised Signatory, acting individually All Authorised Signatories must sign together	At Least must sign together Others, (as described below)			
The Following Account(s) O	nly (Please Specify)					
Account Name (if different from Above)	Account Number List	Any Authorised Signatory, acting individually All Authorised Signatories must sign together	At Least must sign together Others, (as described below)			
Account Name (if different from Above)	Account Number List	Any Authorised Signatory, acting individually All Authorised Signatories must sign together	At Least must sign together Others, (as described below)			
Account Name (if different from Above)	Account Number List	Any Authorised Signatory, acting individually All Authorised Signatories must sign together	At Least must sign together Others, (as described below)			



Part F - Info you may need to know

What's the difference between an Account owner and an Authorised Signatory?

- Account owner(s) is the person or persons shown on the full name of the account. They are able to open a new account, add/remove another Authorised Signatory or change contact details.
- A Authorised Signatory is authorised by the Account owner to operate the account in accordance with the signing rule (e.g. make payments and view transactions).

What supporting documentation will I need?

• We are, or may be, required to verify the identity of the people listed in this form and certain other information provided in this form

Part G- Declaration

I/We

- agree to be bound by the terms and conditions set out in this application in addition to any other conditions which may apply
- acknowledge having been provided with the the Bank's General Terms and Conditions and agree to be bound by the terms as amended or replaced from time to time
- agree to read the the Bank General Terms and Conditions as it contains important statements about my/our rights and obligations
- certify that all information supplied in this application, including the List of Extra Authorised Signatories (if any) is true, correct and complete in every respect and understand that if it is not true, correct and complete, this application may be declined and/or I/we may be liable to the Bank.

I/We authorise

• the Authorised Signatories named in this authority and the List of Extra Authorised Signatories (if any) to operate this account(s) and do everything relating to your relationship with the Bank for this account(s) (this is called the banker/customer relationship), and as provided in the Bank General Terms and Conditions

• other Authorised Signatories to be added to or removed from this authority

• this authority is to apply to the accounts over page in Section A and in the List of Extra Account numbers (if any) – subject to your signing rule – and nobody can delegate the authority you have given them.

Receiving and acting on instructions by fax, phone, electronic communication or other means

I/We agree that as part of doing business, the Bank may communicate with you by fax, phone, electronic communication and may accept telephone, facsimile, electronic communication or other instructions in the course of the banker/customer relationship

- However, the Bank:
- is not obliged to accept them
- will not be liable to you or any other party if the instructions are unauthorised, forged or fraudulently given and the Bank could not have reasonably detected that from the instructions received.

I/We indemnify the Bank

to the maximum extent permitted by law I/We will indemnify the Bank for its losses in acting on such instructions.

Adding or removing Authorised Signatories to/from the authority

Additional Authorised Signatories may be appointed and any Authorised Signatory may be removed only by notice in writing to the Bank signed in the same manner by the Account owner(s) as this form.

Part H - Authorising Change

I/We confirm everything in this form is correct and I/we have read and accepted the Bank's terms and conditions in Part G.

Account owner's Full Name:		Account owner's Full Name :	
Account owner's Signature :		Account owner's Signature :	
Date :		Date :	
By signing you are auth	orising all changes contained in this document to be made	e to the account and confirming that you re	emain bound by the declaration in Part G.

Account owner's Full Name :		Account owner's Full Name :	
Account owner's Signature:		Account owner's Signature :	
Date :		Date :	
By signing you are auth	orising all changes contained in this document	to be made to the account and confirming that you re	emain bound by the declaration in Part G.

Bank Use Only

Signature Verified by:	
Processor:	
Authorizer:	
Date:	