

WAIHI PUKAWA TRUST OWNER REGISTRATION FORM

Tēnā koe

The information provided in this form is used for identification purposes and to update our database with your current details. We would appreciate if you could complete the form and return it to: office@ashergroup.co.nz OR post to Waihi Pukawa Trust, c/- PO Box 7233, Hamilton East, Hamilton 3247, New Zealand. Please contact us on 0800 274 374 if you have any queries.

Nāku noa,

Waihi Pukawa Trust

SH No. (if known)

Owner Details

Full Owner Name as listed on share register:

Commonly used name (if different from above):

Address:

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Phone Numbers:

Email:

Date of Birth (if individual owner):

IRD Number:

Names of persons you received these land interests from:

If you have more than one shareholding in this Trust please list your other full owner names as listed on the share register:

Please attach a form of photo identification, for example a copy of your driver or firearm licence or passport, and a copy of the Maori Land Court Succession Orders. This will help us to ensure our owner records are accurate.

Bank Account Details

Name of Bank:

Bank Branch:

Bank Account in the name of:

Bank Account Number:			-					-						-			
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Please show all account numbers, including zeros. Please provide verification of your account name and number by attaching a pre-printed deposit slip or a copy of your bank statement.

I give permission for Waihi Pukawa Trust to share my contact details with other Maori land blocks or entities that I have ownership interests in (please select) **YES / NO**

Signature:

Date: