



Please complete all applicable fields and return this form to:  
 office@ashergroup.co.nz or PO Box 189, Waikato Mail Centre, Hamilton 3240

**OWNER DETAILS**

SH Number (if known)	
Full Name/Whanau Trust (as per Māori Land Court)	
Other names known by (if different from above)	
Street Address	
Suburb / Town	
City & Postcode	
Phone Number	
Email Address	
Date of Birth (if individual)	
IRD Number	
Other Owner Names on Register	

**BANK ACCOUNT DETAILS**

Name of Bank	
Bank Branch	
Account Name	
Bank Account Number	<p><i>Bank – Branch – Account – Suffix</i>                      e.g. 12 – 3456 – 1234567 – 000</p> <div style="border: 1px solid black; width: 100%; height: 20px; display: flex; justify-content: space-between; align-items: center;"> <span style="border: 1px solid black; width: 15%; height: 15px;"></span> <span style="border: 1px solid black; width: 15%; height: 15px;"></span> <span style="border: 1px solid black; width: 40%; height: 15px;"></span> <span style="border: 1px solid black; width: 10%; height: 15px;"></span> </div>

**CONSENT & SIGN**

I give permission for Waihi Pukawa Trust to share my contact details with other Māori land blocks or entities I have ownership interests in	<input type="checkbox"/> Yes <input type="checkbox"/> No
Signature	
Date	

**IMPORTANT – Please attach the following:**

1. Photo ID – driver licence, firearms licence, or passport
2. Copy of Māori Land Court Orders or Whānau Trust Order (if applicable)
3. Bank Account Verification – bank account showing account name and number, or pre-printed deposit slip.

Note: If a Whānau Trust - the IRD and bank account number **MUST** be in the whānau trust name and not an individual.