

# Application - additional units

Integral Master Trust

This form is used to apply for units in the Integral Master Trust funds (Defensive Fund, Diversified 40 Fund, Diversified 60 Fund and Global Equities Fund), either on an ad-hoc basis, or by a regular application.

Please complete all Sections.

For new account applications, please complete the New investor application form available on our website: [nzbritannia.co.nz/existing-investors/integral-master-trust-documents](http://nzbritannia.co.nz/existing-investors/integral-master-trust-documents).

## 1. Investor details

Name of investor (1):	<input type="text"/>	Investor number:	<input type="text" value="NZB"/>
Name of investor (2):	<input type="text"/>	Investor number:	<input type="text" value="NZB"/>

## 2. Application payment

<b>For a Regular application</b> – Proceed to <b>Section 3</b> below.	
<input type="checkbox"/>	<b>Electronic funds transfer</b> to 'Integral Nominees Limited' <b>02-0500-0987710-000</b> The following details must be included with your transfer to avoid delays in identifying your payment: PARTICULARS: Your surname CODE: Your IRD number
Application payment amount: \$ <input type="text"/>	
<input type="checkbox"/>	<b>Source of funds/wealth*</b> Please tell us the original source of the funds you are investing e.g. property sale, inheritance, personal income: <input type="text"/> <small>*Please note this information is requested solely in relation to NZBritannia's Anti-Money Laundering obligations.</small>
Fund	Amount in NZD
Defensive Fund	\$
Diversified 40 Fund	\$
Diversified 60 Fund	\$
Global Equities Fund	\$
<b>TOTAL</b> (must equal application payment amount above)	\$



### 3. Regular direct debit application details

I/We wish to establish a new regular monthly application via direct debit from my/our bank account to purchase additional units.

☐

No

☐

Yes

Start date: 15 / /

☐

I/We have completed **Section 6 - Direct debit authority**

Please remember any rebalancing instructions previously given when completing this Section.

Fund	Amount in NZD
Defensive Fund	\$
Diversified 40 Fund	\$
Diversified 60 Fund	\$
Global Equities Fund	\$
<b>TOTAL DIRECT DEBIT</b>	<b>\$</b>

I/We wish to change the bank account from which my/our existing regular application is debited

☐

No

☐

Yes

(Complete effective from date below and Section 6 - Direct debit authority)

I/We wish to change the amount of my/our existing regular application

☐

No

☐

Yes

(Enter the new amount(s) above, complete effective from date below and Section 6 - Direct debit authority)

I/We wish to cancel our existing regular application

☐

No

☐

Yes

(Complete effective from date below)

☐

Effective immediately

OR

Effective from:

15 / /

☐

**Source of funds/wealth for regular payment\***

Please tell us the original source of the funds you are investing e.g. property sale, inheritance, personal income:

\*Please note this information is requested solely in relation to NZBritannia's Anti-Money Laundering obligations.

### 4. Privacy and your personal information

This application collects personal information about you to enable your financial adviser and Britannia Financial Services Ltd (NZBritannia) to arrange your investment and to correspond with you in relation to it. Your name and address may be used by NZBritannia or any of its related companies to provide you with newsletters and information about the Integral Master Trust (Scheme), and other products and services.

NZBritannia may have a statutory obligation to disclose your information should it be required to do so under legislation, regulation, applicable codes and licence conditions, including but not limited to the Financial Markets Authority and Inland Revenue, who may be required to share information with foreign tax authorities.



NZBritannia will use the information you supply to verify your identity in accordance with the requirements of the Anti-Money Laundering and Countering Financing of Terrorism Act 2009; and may disclose the information to the parties we consider to be appropriate for this purpose.

You have the right to access all of your personal information that NZBritannia holds, and if any of the information is incorrect you have the right to have it corrected.

You acknowledge that you are authorised to provide personal information on behalf of the applicant and evidence of this authority is provided (in the case of a parent/guardian/other providing information about the applicant).

## 5. Declaration and authority

I/We have received and read a copy of the Product Disclosure Statement (PDS) for the Scheme and I/we understand the risks of investing in the Scheme (and receiving benefits associated with my membership of the Scheme) as described in the PDS and on the Disclose Register at **[companiesoffice.govt.nz/disclose](https://companiesoffice.govt.nz/disclose)**. If my membership is accepted, I/we agree to be bound by the terms of the Scheme's governing documents, PDS and documents filed on the Disclose Register located at **[companiesoffice.govt.nz/disclose](https://companiesoffice.govt.nz/disclose)**.

I/We understand that it is important for me to obtain personal financial and tax advice prior to joining the Scheme and that it is my decision whether or not to do so.

I/We agree to the terms and conditions outlined in Section 4 in relation to my personal information.

I/We agree with the terms of NZBritannia's privacy policy (refer to the NZBritannia website at **[nzbritannia.co.nz](https://nzbritannia.co.nz)**) which explains how NZBritannia complies with the requirements of the New Zealand Privacy Act 2020.

I/We confirm that I give NZBritannia complete authority to provide, obtain and share any of my personal information in relation to my investments with other members of the NZBritannia Group, my financial adviser and/or with other investment/saving providers as required.

Signature of applicant, trustee or director:	<input type="text"/>	Date:	<input type="text" value="/"/>	<input type="text" value="/"/>
Name:	<input type="text"/>			
Signature of applicant, trustee or director:	<input type="text"/>	Date:	<input type="text" value="/"/>	<input type="text" value="/"/>
Name:	<input type="text"/>			
Signature of applicant, trustee or director:	<input type="text"/>	Date:	<input type="text" value="/"/>	<input type="text" value="/"/>
Name:	<input type="text"/>			
Signature of applicant, trustee or director:	<input type="text"/>	Date:	<input type="text" value="/"/>	<input type="text" value="/"/>
Name:	<input type="text"/>			

Please return this form to your adviser.

I/we authorise you until further notice in writing to debit my/our account with you with all amounts which Integral Nominees Limited (hereinafter referred to as the Initiator), the registered initiator of the above authorisation code, may initiate by direct debit.

I/we acknowledge and accept that the Bank accepts this authority only upon the conditions listed on this form.

Signature of account holder:	<input type="text"/>	Date:	<input type="text"/>
Signature of account holder:	<input type="text"/>	Date:	<input type="text"/>
Signature of account holder:	<input type="text"/>	Date:	<input type="text"/>
Signature of account holder:	<input type="text"/>	Date:	<input type="text"/>

Approved		For bank use only		Bank stamp
		Date received	Recorded by	Checked by
		Original – Retain at branch Copy – Forward to Initiator if requested		

## Conditions of this Authority to accept direct debits

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### 1. The Initiator:

- a. Has agreed to give notice to the Customer of the commencement date, frequency and amount of the direct debit no later than the day the direct debit is initiated. This notice will be provided in writing (including by electronic means where the Customer has provided prior written consent to communicate electronically).
- b. May, upon the relationship which gave risk to this Authority being terminated, give notice to the Bank that no further Direct Debits are to be initiated under the Authority. Upon receipt of such notice the Bank may terminate this Authority as to future payments by notice in writing to me/us.

### 2. The Customer may:

- a. At any time, terminate this Authority as to future payments by giving notice of termination to the Bank and to the Initiator by the means agreed by the customer, Bank and Initiator.
- b. Stop payment of any direct debit to be initiated under this authority by the Initiator by giving written notice to the Bank prior to the direct debit being paid by the bank.

### 3. The Customer acknowledges that:

- a. This Authority will remain in full force and effect in respect of all direct debits passed to my/our account in good faith notwithstanding my/our death, bankruptcy or other revocation of this Authority until actual notice of such event is received by the Bank.
- b. In any event this Authority is subject to any arrangement now or hereafter existing between me/us and the Bank in relation to my/our account.
- c. Any dispute as to the correctness or validity of an amount debited to my/our account shall not be the concern of the Bank except in so far as the direct debit has not been paid in accordance with this Authority. Any other dispute lies between me/us and the Initiator.
- d. Where the Bank has used reasonable care and skill in acting in accordance with this Authority, the Bank accepts no responsibility or liability in respect of:
  - The accuracy of information about direct debits on bank statements.
  - Any variations between notices given by the Initiator and the amounts of direct debits.
- e. The Bank is not responsible for, or under any liability in respect of the Initiator's failure to give notice in accordance with 1(a) nor for the non-receipt or late receipt of notice by me/us for any reason whatsoever. In any such situation the dispute lies between me/us and the Initiator.

### 4. The Bank may:

- a. In its absolute discretion conclusively determine the order of priority of payment by it of any monies pursuant to this or any other Authority, cheque or draft properly signed by me/us and given to or drawn on the Bank.
- b. At any time terminate this Authority as to future payments by notice in writing to me/us.
- c. Charge its current fees for this service in force from time to time.

