Rabobank Online Savings
Change of Authorised Signatory for Business and Trust Accounts

This form is to be completed when a Company, Partnership or Trust needs to change the Authorised Signatory on the associated Rabobank Online Savings Account.

Please print, sign and return this document to us via post or email:
Post: Freepost Rabobank Online Savings, PO Box 38396, Wellington 5045
Email: ClientMaintenanceNZ@rabobank.com

Rabobank Online Savings account details

Customer Number

Name of Account Owner

Full Name of existing Authorised Signatory

New Authorised Signatory details

The Director(s) of the Company, Partners of the Partnership or Trustees of the Trust must appoint one Authorised Signatory to operate the Business or Trust Account (as applicable).

The Authorised Signatory:

- Has full authority on the Account, as if they were the Account owner and any instruction given by the Authorised Signatory is deemed to be given on behalf of the Company, Partnership or Trust. Devices, PINs and most notices will be sent to the Authorised Signatory;
- Is responsible for the Account along with the Account owner, as if they were the Account owner, and also for the performance of any obligation the Account owner has; and
- Will be the only individual that Rabobank will accept instructions from in relation to transactions on the Account.

The Director(s), Partners, or Trustees (as applicable) confirm that the nominated Authorised Signatory is as follows:

Full Name

Please provide any other names you are known by, if any

Date of Birth

Email Address

Mobile Phone Number

Home Phone Number

Residential Address

Postal Address (if different from Residential Address)

New Authorised Signatory Identity Verification

Anti-Money Laundering legislation means we need to verify your identity before opening your Rabobank Online Savings account. We can attempt to verify your identity electronically, or you can provide certified identity documents.

Select how you would like to be verified:

Note: If you select 'manual' verification, you will need to post the original certified copies of your identity documents to Freepost: Rabobank Online Savings, PO Box 38396, Wellington 5045.

☐ **Electronically**

I give consent for Rabobank to verify my identity electronically by providing the details below to the NZ Transport Agency, the Department of Internal Affairs, a credit reporting agency or other entity for this purpose. Please provide as many of the following details as possible:

New Zealand Passport

Passport Number	Place of issue
Issue date	**Expiry date**

New Zealand Driver License

License Number	Place of issue
Issue date	**Expiry date**
License plate (on a vehicle registered in your name)	**License version (5b)**

Please note: to complete the Electronic Identification process, we will send a letter to your registered postal address containing a unique six-digit code.

Once you receive the letter, please follow the instructions provided by calling 0800 33 22 99 and quoting your code to a member of our Client Onboarding team, who will be happy to assist you.

☐ **Manually**

I agree to provide certified identity documents to Rabobank to verify my identity prior to operating this Account. For more information on certified documentation read our Identity Verification Checklist, which can be found on our website rabobank.co.nz/help-and-support/forms-and-brochures or contact us on 0800 722 615.

Declaration and Authority

The Director(s), Partners, or Trustees (as applicable) and Authorised Signatory instruct Rabobank to update the Account's Authorised Signatory as recorded in this form and act on instructions given by the Authorised Signatory in relation to each Rabobank Online Savings Account held. We declare and acknowledge the following:

1. All of the information provided in this form is true and correct and forms part of this declaration.
2. Only one Authorised Signatory can be appointed to a Rabobank Online Savings Account at any time.
3. The Director(s), Partners, or Trustees (as applicable) can choose to appoint a new Authorised Signatory by completing a Change Authorised Signatory Form at any time.
4. The Authorised Signatory, acting alone, has full authority and complete control over the Account, meaning they can authorise payments, place term deposits, change the Nominated Account, close the Account and do all other things as if they were the Account owner.
5. The Authorised Signatory is responsible for their internet banking access and the performance of any obligation the Account owner has.
6. It is the Authorised Signatory's and the Account owner's responsibility to update Rabobank when the:
    a. Director(s) or Shareholder(s) of the Company change;
    b. Partners of the Partnership change;
    c. Trustees of the Trust change.
7. The changes in this form will take effect once the new Authorised Signatory's identity verification has been completed and the form has been processed by Rabobank.
8. The Account owner(s) and Authorised Signatory are bound by and agree to Rabobank Online Savings Terms and Conditions, applicable Fee Schedule(s) and all other applicable terms and conditions, as made available to us. These are available on Rabobank's website at https://www.rabobank.co.nz/downloads/
9. We acknowledge that our personal information is being collected, used and disclosed in relation to the Account, including for the opening and operation of accounts with Rabobank, and that this personal information may be disclosed to entities related to Rabobank, Rabobank's contractors and relevant government authorities. We understand we can contact Rabobank on 0800 22 44 33 to gain access to our personal information held by Rabobank. Rabobank's Privacy Statement is available at www.rabobank.co.nz.

Account Owner(s) Signatures

This form must be signed as follows:

Companies: If there are two or more Directors, two Directors must sign. If there is only one Director, that Director must sign with a witness.

Partnerships: All Partners must sign.

Trusts: All Trustees must sign.

Signature	Signature
Full Name	Full Name
Designation (e.g. Director / Partner / Trustee)	Designation (e.g. Director / Partner / Trustee)
Date	Date

Signature

Signature

Full Name

Full Name

Designation (e.g. Director / Partner / Trustee)

Designation (e.g. Director / Partner / Trustee)

Date

Date

Witness

Full Name of Witness

Signature

Occupation

Date

New Authorised Signatory's Signature

Full Name

Signature

Date