Fisher Funds Premium Service Withdrawal Request - Entity

If you would like help in completing this form, please email **support@fisherfunds.co.nz** or phone us on **0508 FISHER (0508 347 437).**

You can complete this form on-screen by typing directly into each field. Once you have completed this form:

- If you have selected Option 1 as your preferred identification method you can email your completed application to **support@fisherfunds.co.nz**
- If you have selected Option 2 as your preferred identification method you must post your withdrawal request and supporting documents to **Fisher Funds Management Limited, Private Bag 93502, Takapuna, Auckland 0740** or send by courier to **Fisher Funds Management Limited, Level 1 Crown Centre, 67-73 Hurstmere Road, Takapuna, Auckland 0622.**

If your fully completed form and supporting documents are received by 3pm on any business day, your withdrawal will usually be processed at the unit prices calculated as at the close of the markets on that day. This usually means your withdrawal will be processed the next business day for funds that only invest in assets listed in New Zealand or Australia, or in 2 business days for other funds.

Who should complete this form?

Please use this form to apply for a withdrawal if you have one of the following types of Fisher Funds Premium Service accounts:

- Trust
- Company
- Partnership
- Incorporated Society
- Estate

If you wish to request both a partial and regular withdrawal, you can select both options on this form.

Section 1 — Entity details

Account name

Fisher Funds account number

P S

IRD number

Contact phone

( )

Email address

Address

City

Country

Postcode

Prescribed Investor Rate (PIR) — *please tick one*

○ 0% ○ 10.5% ○ 17.5% ○ 28%

To work out your PIR, or for more information, visit fisherfunds.co.nz/pircalculator or call us on 0508 347 437.

If your selected PIR differs to the rate we have on file, the change will require one business day to update before your withdrawal can be processed. The PIR for a New Zealand resident company will be 0%. If the entity is a non-resident investor, your PIR is 28%. If you do not select a PIR, your withdrawal will be processed at the rate we hold on file for this account.

Section 2 — Details of associated owner(s) of the entity

Trust accounts: all trustees must complete this section (and if you have a professional trustee company associated with your account, two directors must also complete this section). If you have nominated delegate(s) on your account, the delegate(s) only need to complete this section.

Company accounts: all directors must complete this section

Partnership accounts: all current partners must complete this section

Incorporated societies: all current officers must complete this section

Estate accounts (where a trust hasn't been established): all executors must complete this section

Fisher Funds is required to verify the identity of clients and associated parties under the Anti-Money Laundering and Countering Financing of Terrorism Act 2009 ('AML Act'). We offer clients two ways to confirm their identity. We are required to identify all persons in this section.

We may have your identification documents on file, please contact us to confirm this. We may request new identification documents from you.

Option 1

Electronic identity verification

Fisher Funds has the ability to electronically verify your identity and address. Once we have received your application we will send you an SMS via our third party partner to biometrically verify your identity. To complete this method of verification you must have: a smartphone (with a front camera that is capable of taking a photo/video) and a current (not expired) version of one of the following: New Zealand Passport; New Zealand Drivers Licence; Australian Passport; Australian Drivers Licence.

If this method of identification is unsuccessful you will be required to provide certified ID and proof of address.

Option 2

Certified copies of identity documents and proof of residential address

Please provide a certified copy of your identity documents and proof of your residential address. Refer to sections 3 and 4 for information on acceptable identity documents and who can certify them.

Investor 1

What is your relationship to the account? i.e. trustee, director, partner, officer

Title

First name(s)

Surname

Contact phone

( )

Email address

Address

City

Country

Postcode

Investor 2

What is your relationship to the account? i.e. trustee, director, partner, officer

Title

First name(s)

Surname

Contact phone

( )

Email address

Address

City

Country

Postcode

Section 2 — Details of associated owner(s) of the entity (continued)

Investor 1: Preferred identification method — please select one of the following options:

- **Option 1** – I would like Fisher Funds to electronically verify my identity
- **Option 2** - I would like to provide Fisher Funds with certified copies of my identity documents

Investor 2: Preferred identification method — please select one of the following options:

- **Option 1** – I would like Fisher Funds to electronically verify my identity
- **Option 2** - I would like to provide Fisher Funds with certified copies of my identity documents

Investor 3

What is your relationship to the account? i.e. trustee, director, partner, officer

Title

First name(s)

Surname

Contact phone

( )

Email address

Address

City

Country

Postcode

Investor 4

What is your relationship to the account? i.e. trustee, director, partner, officer

Title

First name(s)

Surname

Contact phone

( )

Email address

Address

City

Country

Postcode

Investor 3: Preferred identification method — please select one of the following options:

- **Option 1** – I would like Fisher Funds to electronically verify my identity
- **Option 2** - I would like to provide Fisher Funds with certified copies of my identity documents

Investor 4: Preferred identification method — please select one of the following options:

- **Option 1** – I would like Fisher Funds to electronically verify my identity
- **Option 2** - I would like to provide Fisher Funds with certified copies of my identity documents

Section 3 — Certified identity documents

If you selected Option 2 as your preferred way for us to verify your identity please select one of the certified identification options below. If you have selected Option 1 you do not need to provide certified ID now.

We are only able to accept original certified copies of certified ID (i.e. the copy that has been physically certified). These documents must be posted to us, our postal address is on page 1.

Option A: (preferred)

- ○ **Passport** (containing name, date of birth, photograph and signature)

OR

- ○ **New Zealand Firearms Licence**

Option B:

- ○ **New Zealand Driver Licence** (front and back)

OR

- ○ **18+ Card/Kiwi Access Card**

AND one of the following

- ○ **Full Birth Certificate**
- ○ **SuperGold Card (front and back)**
- ○ **Bank Statement from a registered bank dated within 12 months**
- ○ **Statement from a government agency dated within 12 months**

Option C:

- ○ **New Zealand Driver Licence** (front and back)

AND

- ○ **Certificate of citizenship issued by the New Zealand Government or a foreign government**

Your photo identification must be current (not expired). If you're unable to provide the above documentation please contact us to discuss other options.

A Fisher Funds representative can verify your identity documents if you visit our office.

How to have your ID correctly certified

I certify this to be a true copy of the original document and confirm it represents the identity of Joe Smith.

Name: Jane Doe

Occupation: Justice of the Peace

Date: 28/2/2024

Signature:

Photocopy ID at 150%

So the details are legible.

Please do not send in your physical identity documents e.g. passport, driver's licence, birth certificate etc.

Please note: Certification is valid for three months and must have been carried out within three months of application.

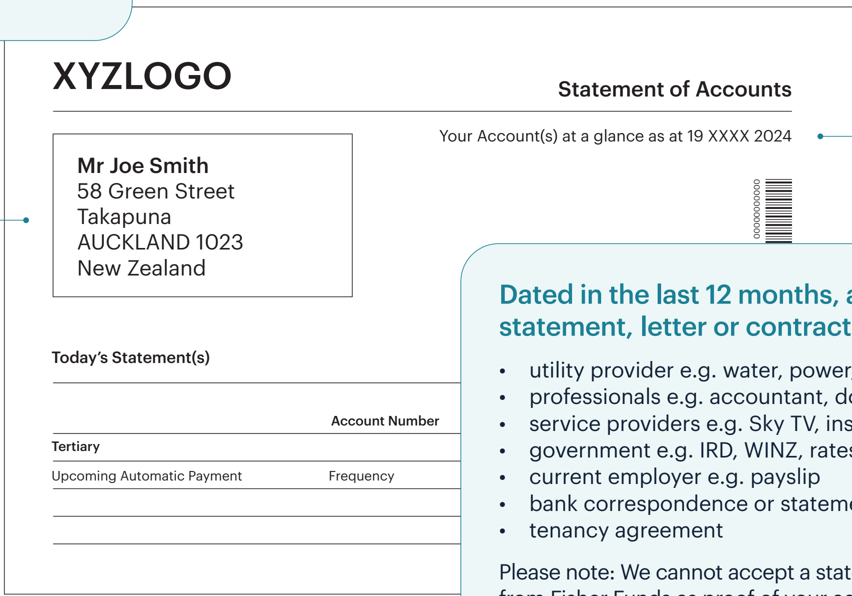
Your identity documents must be certified by one of the following people: Justice of the Peace, Registered Lawyer, Chartered Accountant, Registered Teacher, Registered Doctor, Police Officer, Notary Public, Registrar/Deputy Registrar.

Section 4 — Proof of address

If you have selected Option 2 as your preferred identification method please provide proof of your residential address as set out below. Your proof of address does not need to be certified. If you have selected Option 1 you don't need to provide proof of address.

Current physical address

Can't be a PO Box number



Dated in the last 12 months, an invoice, statement, letter or contract from:

- utility provider e.g. water, power, phone
- professionals e.g. accountant, doctor
- service providers e.g. Sky TV, insurance
- government e.g. IRD, WINZ, rates notice
- current employer e.g. payslip
- bank correspondence or statement
- tenancy agreement

Please note: We cannot accept a statement/correspondence from Fisher Funds as proof of your address.

Section 5 — Supporting information for entities

These documents may have already been provided to Fisher Funds, please contact us to confirm this. If any changes have been made to the entity that you have not notified Fisher Funds about (e.g. change in trustee) we will require supporting documentation.

Trusts or Estates

- Trust deed including any amendments
- Copy of probate and will (for Testamentary trusts and Estates only)
- Full name and date of birth for any named beneficiaries in a non-discretionary trust
- Details and documentation relating to the Source of Wealth for the trust

Company

- Details and documentation relating to the Source of Wealth for the trust if the company is a vehicle for holding personal assets

Partnerships

- Copy of the partnership agreement (if one has been created)

Incorporated societies

- Documentation relating to the rules of the societies

Section 6 — Payment details

○ Please pay the withdrawal into the entity's nominated bank account held on file.

If you have not previously provided the entity's bank account details including proof of the bank account, or the bank account has changed, please complete the section below and provide proof of your bank account (refer below) along with this form.

We will only make payments in New Zealand dollars to either a New Zealand bank account or an international bank account held in the name of the entity (the cost of an international transfer is paid by the member). Any payment will be adjusted for tax at the notified Prescribed Investor Rate (PIR) on your account.

Name of account

Account details

Bank *Branch* *Account Number* *Suffix*

Bank/Branch address

Please provide proof of your bank account (one of the following)

- Bank statement
- Internet banking screenshot
- Over the counter receipt with a teller's stamp

The proof of bank account must contain the account name, number and the logo of your bank.

Section 7 — Withdrawal options

○ **Full withdrawal**

Withdraw the full account balance and close the account

○ **Partial withdrawal**

Make a partial withdrawal from the account outlined below
*(please note we require a minimum balance amount of $1,000)**

In accordance with my current Investment Allocation **Total amount of withdrawal** $

OR

Name of fund/s	Amount of withdrawal*		
Premium Income Fund	units	or	$
Premium Property & Infrastructure Fund	units	or	$
Premium New Zealand Fund	units	or	$
Premium Australian Fund	units	or	$
Premium International Fund	units	or	$
Total	0 **units**	**or**	$ 0

* *If you would like to withdraw from one Fund entirely, please write "all" in front of units.*

○ **Regular withdrawal**

Set up a regular withdrawal from the account outlined below
*(please note the minimum withdrawal amount is $100)**

In accordance with my current Investment Allocation **Total amount of withdrawal** $

OR

Name of fund/s	Amount of withdrawal*		
Premium Income Fund	units	or	$
Premium Property & Infrastructure Fund	units	or	$
Premium New Zealand Fund	units	or	$
Premium Australian Fund	units	or	$
Premium International Fund	units	or	$
Total	0 **units**	**or**	$ 0

* *Regular withdrawals can only be paid into a New Zealand bank account.*

Start Date*: / /

Frequency: ○ Weekly ○ Fortnightly ○ Monthly ○ Quarterly ○ Annually

* *Please note this is the date your withdrawal will be priced, it will then be paid 3-5 working days after this date. Please bear this in mind if you want to receive the funds by a certain date.*

Section 7 — Withdrawal options (continued)

○ **Transfer my withdrawal to another Fisher Funds investment**

Please contact us on 0508 347 437 if you would like to talk to a financial adviser about suitable investments for you.

Account number you wish to transfer to ○○○○○○○○

Name of Fund/s[1] you wish to transfer to	Amount[2]		Percentage
	$	or	%
	$	or	%
	$	or	%
Total *(percentage total must equal 100%)*	$ 0	or	0 %

1. *If you are a new investor in this scheme you will need to receive a product disclosure statement and complete the corresponding application form*
2. *Minimum investment amounts may apply.*

Section 8 — Declaration

All associated owners of the entity must sign this form.

I/we agree that Fisher Funds Management Limited and the Supervisor (and related entities of either) may collect and use the information set out in (or in connection with) this form for the purpose for which it is provided. Additionally, they may use that information to promote to me/us other products and services. Fisher Funds will provide me/us (on request) with the name and address of any entity to which information has been disclosed. If I/we do not provide the information required by this form, Fisher Funds and/or the Supervisor may not be able to process my/our request. I/we have the right to access all personal information held about me/us. If any of the information is incorrect, I/we have the right to have it corrected. The information set out in this form will be collected and held by Fisher Funds Management Limited and Trustees Executors Limited whose respective addresses are Level 1, Crown Centre, 67-73 Hurstmere Road, Takapuna, Auckland 0622 and Level 9, Spark Central, 42-52 Willis Street, Wellington 6011.

I/we hereby request the following withdrawal to my/our investment in accordance with the provisions of the Fisher Funds Premium Service product disclosure statement and Governing Document.

Name	Signature	Date
		/ /
		/ /
		/ /
		/ /