

Overseas Customer Request Form

Kiwibank Limited, Private Bag 39888, Wellington 5045

1. Types of identification combinations required

Acceptable forms of primary photo ID*:

- Passport
- New Zealand refugee travel document
- New Zealand emergency travel document
- New Zealand firearms licence

OR

One form of primary non-photo ID

- New Zealand full birth certificate
- Certificate of New Zealand citizenship

PLUS

One form of secondary photo ID*

- Driver licence
- New Zealand Defence Force photo ID
- Mational photo ID

ALSO

One of the following proof of residential address

No more than 6 months old:

- Utilities bill, e.g. water, power, telephone
- Bank statement
- Employment agreement (no more than three months old)

2. Acceptable certifiers

The certifier must not be a parent, brother, sister, aunt, uncle, cousin, spouse, partner or live at the same address as the customer. The certifier must not be involved in the transaction or business requiring the certification.

- 1. Commonwealth representative
 - This includes Ambassador, High Commissioner, Commissioner, Minister, Counsellor, Chargé d'Affaires, Head of Mission, Consular Officer, Pro-Consul, Trade Commissioner (or anyone lawfully acting on behalf of any of the above)
- 2. Lawyer
- 3. Notary Public
- 4. Honorary Consul
- 5. Member of Parliament

3. Details of what is required of the customer and of the certifier

Required of the customer

- Take original of appropriate form(s) of identification and address, as well as copies of each, to the certifier.
- Ensure the certifier stamps, signs, puts their occupation, and dates each copy.
- Ensure the certifier completes the contact details section below.
- Send an emailed scan of, or a fax of, or post the copy(s) and the certification document back to Kiwibank representative.

Required of the certifier

- Review and sight both the original and copy.
- If satisfied that the copy is a true copy, stamp, sign, put your occupation, and date each copy. For photo ID, confirm it is a true likeness.
- Complete contact details below.
- If any document is in a language other than English, please provide a translation to English.
- Name the individual(s) being certified below.

4. Name of individual being certified

Hamadanat t	nemy ce	61417512	

5. Certifier contact details

Name of Certifier

Occupation

Position title

Organisation

Address

Suburb

Town/City

Postcode

Country

Email address	
Contact numbers	
Home []	

Mobile [] Work []

Date of completion

^{*} must be no more than 3 months expired.