

Owners Registration

including Confirmation of Identity and Bank Payment Authority

INDIVIDUAL REGISTRATION

Full name:	
Other Names known by (if any):	
Date of Birth:	Male/Female
Postal Address:	
	_
Phone No: (Mobile):(Home/Work):_	_
Email Address:	
IRD Number:	_
Personal Identification required: Attach copy of either: Current Drivers Licence Or Current Pas	sport
Ownership Verification Required: Maorilandonline Number:(www.	
BANK ACCOUNT NAME:	
BANK ACCOUNT NUMBER: Bank Verification STAMP * Once you have completed the above details please or please attach a Bank Deposit slip *(Or copy batthan 3 month)	ink statement no older
SIGNED: DATE: By signing you confirm that you have read and understood the notes to this form of	///

WHAKAPAPA (Optional):				
Mother's Full Name: Father's Full Name Spouse's Full Name:				
			Brothers and Sisters Full names (including decease	ed and whangai):
			Names	Email or Phone (if known)
Your Children's full names (including whangai):				
Names	Email or Phone (if known)			
Numes	Email of Frioric (if known)			
CONSENT AND ACKNOWLEDGEMENT:				
 By signing this form the owner authorises payment of grants to their nominated bank account. The information collected by this form will enable you to receive communications from the Incorporation by email or post and obtain the correct benefits and to assist the Incorporation locate other owners who may be entitled to registration and benefits. The intended recipients of this information are the Ngatimanawa Incorporation, P.O.Box 987 				
Rotorua, their employees and contractors for the purpose of administering the Ngatimanawa Incorporation.				
 Failure to provide the information requested information may result in your registration application being delayed or not actioned. 				
 You have the right of access to, and correction of, information held about you subject to the provisions of the Privacy Act 1993. 				
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FOR OFFICE USE ONLY:				
Date application received:				
Document validation:				
IRD Number Supplied y	es/no			
	es/no es/no			
Application Approved on:				

Applicant notified on: