

Common Reporting Standard

Client Account Number

Individual Tax Residency Self-Certification

You must complete all fields marked *

1: Identification of Individual Account Holder

Full legal name* _____
 Date of birth* _____
 Physical address* _____
 Country of residence* _____

2: Countries of Tax Residence

Are you a tax resident of another country (other than NZ)*? Yes No

Please list all your other countries of tax residency

Country of tax residence	Tax number (or equivalent)	No tax number reason code ¹ (see below)

Reason codes:

A - The country does not issue tax numbers or equivalent to its residents.

B - You are unable to obtain a tax number or equivalent. Please provide an explanation

C - No Tax Number or equivalent is required for the country (Note: only use this reason where the relevant country does not require the collection of a Tax Number or equivalent under domestic law).

3: Declaration

- I certify that I am the account holder of the account to which this certificate relates.
- I confirm that all of the information in the certificate is true and correct
- I agree to notify Fisher Funds immediately if there is any change which affects my tax residency status or causes the information above to become incorrect or incomplete, and to provide Fisher Funds with an updated certificate within 20 days (or sooner if requested by Fisher Funds) of such change in circumstances.
- I acknowledge that the information contained in this certificate and information related to my account may be reported to New Zealand Inland Revenue and exchanged with tax authorities of other countries or jurisdictions in which the account holder may be a tax resident pursuant to intergovernmental agreements to exchange financial account information.

Signature _____

Name _____ Date _____

Capacity: _____

If you are not the account holder, please indicate the capacity in which you are signing.