

This form is used to advise Integral Master Trust of your personal details, and to select options in relation to your investment. It is also used to update your details. Please complete ALL sections.

New investor: ☐ Existing investor update: ☐

1. Investor details

Investor type (choose one only)

A ☐ Individual and joint account holders

B ☐ Trust or company

Name of trust or company:

Complete the investor details section below with trustee or director details.
Complete the trust and company section with additional trust or company details.

C ☐ Investment on behalf of a minor

Name of minor investor:

Relationship to minor investor:

Age at which the above-named investor(s)
may have control of this investment:

Investor (1)

Investor number:
(office use)

NZB

Title: Mr / Mrs / Miss / Ms / Dr

Full name:

Date of birth:

/ /

Residential
address:

Postal address:
(if different)

Postcode:

Postcode:

Preferred
contact number:

Email:

Salutation:
(for correspondence)



Investor (1) continued

PIR: ☐ 0% ☐ 10.5% ☐ 17.5% ☐ 28% (default if not selected)
(Prescribed Investor Rate)

IRD number:

☐ I have provided my identity and proof of address documents as detailed in the Identification of individuals form

☐ I am the primary contact for correspondence purposes

Investor (2)

Investor number:
(office use)

Title:

Full name:

Date of birth:

Residential address:

Postcode:

Postal address:
(if different)

Postcode:

Preferred contact number:

Email:

Salutation:
(for correspondence)

PIR: ☐ 0% ☐ 10.5% ☐ 17.5% ☐ 28% (default if not selected)
(Prescribed Investor Rate)

IRD number:

☐ I have provided my identity and proof of address documents as detailed in the Identification of individuals form

☐ I am the primary contact for correspondence purposes

If there are more than two investors, please record the details on another investor details form and attach.

Trust and companies additional information

Investor number:
(office use)

Trust or company IRD number:

Trust or company PIR: ☐ 0% ☐ 10.5% ☐ 17.5% ☐ 28% (default if not selected)
(Prescribed Investor Rate)



Trusts and companies additional information (continued)

Physical address:

Postcode:

Postal address:
(if different)

Postcode:

Trustee company:
(if applicable)

For trusts with a trustee company, provide identification and proof of address documents for the authorised signatory of the trustee company. The authorised signatory is required to sign this form in Section 6.

Online access to the NZBritannia portal

You can use our secure online service to view details of your investment including your current balance, transactions that have taken place, and various correspondence.

Instructions for registering for the portal will be provided in your welcome letter once funds are invested.

For trusts and companies: The primary contact identified above will be able to register using their personal IRD number. To arrange online access for additional individuals, please email investments@nzbritannia.co.nz.

2. Adviser details

Adviser name:

Adviser company:

3. Adviser fee details

Fees will be redeemed from your investment on a monthly basis.

We will deduct fees from the Fund you choose below. If you do not choose a Fund, we will deduct fees from your lowest risk Fund.

☐ Defensive Fund
 ☐ Diversified 40 Fund
 ☐ Diversified 60 Fund
 ☐ Global Equities Fund
 ☐ Focused Growth Fund

Adviser service fee

GST: ☐ Excluding ☐ Including

% of fee subject to GST: %

% of fee that is tax deductible: %

Ongoing fee: %

Flat fee: \$

Deducted: ☐ Monthly ☐ Quarterly ☐ Annually

Tiered adviser fee			
<input type="checkbox"/> As per tiers:		OR <input type="checkbox"/> As per attached fee schedule	
≤\$	% pa	≤\$	% pa
≤\$	% pa	≤\$	% pa
≤\$	% pa	≤\$	% pa

Implementation fees			
On initial investment:	\$	OR	%
On subsequent investments:	\$	OR	%
		Up to a maximum:	\$
		Up to a maximum:	\$

4. Investment profile/rebalancing

The following 'investment profile' should be recorded against my/our account and will be used to assist my/our adviser in monitoring my/our investment.

The Manager can undertake automatic rebalancing based on the allocation percentage. Any fund can be excluded from this rebalancing by ticking the 'Exclude' box. Your portfolio will not be rebalanced if you have a regular fund switch request.

☐ I wish to opt into monthly rebalancing.

Fund	Allocation %	Exclude
Defensive Fund	%	<input type="checkbox"/>
Diversified 40 Fund	%	<input type="checkbox"/>
Diversified 60 Fund	%	<input type="checkbox"/>
Global Equities Fund	%	<input type="checkbox"/>
Focused Growth Fund	%	<input type="checkbox"/>
TOTAL	100%	

☐ I wish to opt out of rebalancing. I understand the investment profile will no longer be maintained.

5. Privacy and your personal information

This statement relates to the personal information that you are providing to the Manager by way of this application and any subsequent personal information which you may provide in the future.

The personal information you have supplied may be used by the Manager and Public Trust (and related entities thereof) for the purposes of enabling the Manager to arrange and manage your investment, and to contact you in relation to your investment.

The Manager will provide you (on request) with the name and address of any entity to which information has been disclosed.

Under the Privacy Act 2020, you have the right to access all personal information held about you by the Manager, and if any of the information held is incorrect, you have the right to have it corrected.

Under the Privacy Act 2020, you have the right to access all personal information held about you by the Manager, and if any of the information held is incorrect, you have the right to have it corrected.

You acknowledge that you are authorised to provide personal information on behalf of the applicant and evidence of this authority is provided (in the case of a parent/guardian/other providing information about the applicant).

6. Declaration and authority

I/we certify that I/we have received, read and understood the current Product Disclosure Statement and this form in their entirety.

I/we hereby apply to invest and agree to be bound by the terms and conditions as set out in the current Product Disclosure Statement, the Trust Deed and this form.

I/we have read and agree to the terms outlined above in relation to privacy and my/our personal information.

I/we consent to NZBritannia using the information I/we supply to verify my/our identity in accordance with the requirements of the Anti-Money Laundering and Countering Financing of Terrorism Act 2009, and that NZBritannia may disclose the information to parties NZBritannia considers to be appropriate for this purpose.

I/we understand that the value of my/our investment is liable to fluctuations and may rise and fall from time to time.

I/we understand the manner in which the fees will be deducted from my/our investment.

I/we consent to the provision of information to me in electronic form to the extent permitted by law.

Number of signatures required for a partial redemption:

All signatures are required for a full closure.

The signatures that appear below are required to withdraw money from this account:

Signature of applicant,
trustee or director:

Date:

 / /

Name:

Signature of applicant,
trustee or director:

Date:

 / /

Name:

Signature of applicant,
trustee or director:

Date:

 / /

Name:

Signature of applicant,
trustee or director:

Date:

 / /

Name:

If you wish to appoint further authorised signatories, please attach a list of the specimen signatures.

Date:

 / /

Please return this form to your adviser.

