



Individual Tax Residency Self-Certification

Section 1: Account holder details

All fields marked * are mandatory

Full legal Name*			
Date of Birth*			
Physical address* <small>(Do not provide a PO Box or in-care-of address)</small>	Street address		
	Suburb		
	Town/City		
	Postcode		
	Country		
NZ IRD Number*			Tax Rate*

Section 2: Account holder tax residence(s)

- Are you a current tax resident of another country (other than NZ)?* No Yes
- Are you a US Person (i.e. US Citizen) for the purposes of the Foreign Account Tax Compliance Act (FATCA)?* No Yes
(Please note US Persons are considered to be Tax Residents of the US. For further information please refer to ird.govt.nz and search for FATCA.)

If you answered Yes to any of the questions above please complete the following table:

	Country of Tax Residence 1	Country of Tax Residence 2	Country of Tax Residence 3
Countries of Tax Residence <small>(Other than New Zealand)</small>			
Tax Identification Number (TIN) (or country equivalent)			
OR Select reason if TIN is not provided	<input type="checkbox"/> Country doesn't issue TIN <input type="checkbox"/> Country has not issued a TIN to me <input type="checkbox"/> Country doesn't require collection of TIN under domestic law	<input type="checkbox"/> Country doesn't issue TIN <input type="checkbox"/> Country has not issued a TIN to me <input type="checkbox"/> Country doesn't require collection of TIN under domestic law	<input type="checkbox"/> Country doesn't issue TIN <input type="checkbox"/> Country has not issued a TIN to me <input type="checkbox"/> Country doesn't require collection of TIN under domestic law
If you selected 'Country has not issued a TIN to me' above, please provide an explanation			

Section 3: Declaration and Consent

I confirm the information in this form is true and complete. I understand that not giving information or giving false information could have serious consequences under New Zealand law.

I authorise Somerset Smith Partners "SSP" to make any enquiries it considers necessary for confirmation of the above.

I understand that the information and forms will be held by SSP. I also understand that SSP may have to share the information and forms with Inland Revenue, who may exchange it with tax authorities of overseas jurisdictions.

I certify that all statements made in this Declaration also extend to any information that I (or an authorised person on my behalf) may supply to SSP, in whatever manner, subsequent to signing this form.

I agree to provide extra information if asked and if my circumstances change or the information becomes incorrect, I will promptly provide SSP with updated information within 20 days of the change including completing an updated tax residency self-certification form.

Signature:
Name:
Date: