



Special Purpose Account Mandate Form

For members who want to operate social clubs amongst themselves with an account with the Police Credit Union

We wish to join the Police Credit Union and agree to conform to its Rules and amendments thereof and subscribe for at least one share.

Your clubs name: [text input]

Primary account holder

Member Number, Surname, First names, Date of Birth, Phone Number, Email, Address [text inputs]

Joint account holder

Member Number, Surname, First names, Date of Birth, Phone Number, Email, Address [text inputs]

Eligibility for membership (Primary account holder)

Police, Police Employee, Retired or Resigned [radio buttons]

Eligibility for membership (Joint account holder)

Police, Police Employee, Retired or Resigned [radio buttons]

Your Clubs IRD Number [text input]

Please note : If your club does not have an IRD number any income from interest will be taxed at the non-declaration rate of 45%pa.

Your Clubs Resident Tax Rate (please select one) 10.5%, 17.5%, 30.0%, 33.0%, 39.0% [radio buttons]

Citizenship and residency (Primary account holder)

Country of Citizenship, Are you a citizen of another country?, If yes, please list, Are you a Tax resident of another country?, If Yes Country, Tax Number [text inputs]

Citizenship and residency (Joint account holder)

Country of Citizenship, Are you a citizen of another country?, If yes, please list, Are you a Tax resident of another country?, If Yes Country, Tax Number [text inputs]

Debit Mastercard® application

As the primary account holder, I wish to be issued an Debit Mastercard® and agree to the Terms and Conditions overleaf. [radio button]

Electronic Banking

Please register me for Internet Banking and Mobile Banking. I understand that by signing this mandate I, as the primary account holder (above) will be registered for Electronic Banking and when I choose to activate these services I will abide by the Terms and Conditions.. [checkbox]

Beneficial Ownership and Source of Funds - The Anti Money Laundering and Countering Financing of Terrorism (AML/CFT) Act 2009 requires the Police Credit Union to identify the Beneficial Owners of your club. This form MUST be accompanied by the Beneficial Owner and Source of Funds Declaration form. Without this we are unable to open your account.

Debit Mastercard® Terms and Conditions

1. I hereby apply for an Debit Mastercard® and a PIN (Personal Identification Number) to be issued to me to enable me to access my Credit Union accounts at authorised electronic banking terminals such as Automated Teller Machines (ATMs) and Point of Sale terminals (EFTPOS).
2. I confirm that I will read, understand and agree to abide by the Police Credit Union's Cardholder Terms and Conditions of Use governing the use of the Debit Mastercard® at the time of issue and as amended from time to time.
3. I confirm that I will read, understand and agree to abide by the Police Credit Union's Fees and Charges applicable for the issue and use of the Debit Mastercard® as per the Police Credit Union website, policecu.org.nz.
4. I acknowledge that my signature on this application form signifies my unconditional acceptance of the above details and undertaking provided herein.
5. I understand that my application is subject to confirmation and acceptance.
6. Should my accounts become overdrawn without prior approval from the Police Credit Union due to the use of my Debit Mastercard®, I acknowledge that all shares and deposits held with the Police Credit Union in my name may be utilised (set off) towards payment of any debt incurred through my use of the Debit Mastercard®.

Terms and Conditions:

Membership - Membership of the Police and Families Credit Union, (Credit Union) shall be open to all persons eligible under Section 7 of our Rules, (which are available online at www.policecu.org.nz).

A member may withdraw from the Police Credit Union at any time, but 60 days' notice of withdrawal may be required. All amounts paid in on shares of any kind together with any interest credited thereto to the date thereof shall be paid to such withdrawing members as their funds become available and only after deducting therefrom any amounts due from such member to the Police Credit Union.

Accuracy of information - The Credit Union does not accept any responsibility or liability for the accuracy of the information given by you, or anyone acting on your behalf (other than us), in any instruction. You will be solely responsible for ensuring such information, including other parties' bank account numbers, is accurate.

Instructions to the Police Credit Union - You agree that the Credit Union may, at its sole discretion, accept instructions from you or people authorised to operate your account(s) by post, telephone, email, text, electronic banking service or any other means in the course of our relationship, and you authorise the Credit Union to act on any such instructions.

You also authorise the Credit Union to carry out any transactions initiated by any means using your PIN (e.g. at an automatic teller machine), any of your Security Details, or by any other means agreed with you. The Credit Union may not take any further steps to verify such instructions or transactions. This authority applies regardless of any operating authorities that exist for an account and may not be withdrawn.

The Credit Union will exercise reasonable care and skill to ensure transactions are made as instructed. It is your responsibility to ensure there is enough money in your account at all times to ensure such transactions can be made.

You agree to maintain appropriate internal controls to ensure that unauthorised, forged or fraudulent instructions are not given to the Credit Union.

Set-Off -The Credit Union may at any time without notice, set-off, combine or apply any other credit balance of the member to meet the member's obligations to the Police Credit Union.

Liability - To the extent permitted by law you indemnify the Credit Union against all liability incurred by the Credit Union resulting from the Credit Union acting or omitting to act in accordance with a telephone or electronically generated instruction or any other instruction to the Credit Union regarding your account(s).

Information - You have the right to access the information held by the Credit Union and to correct any information that is wrong.

Disclosure of Information – You authorise the Credit Union to disclose information to selected third parties, including the New Zealand Police Association Inc and Police Welfare Fund Ltd in connection with any services provided, and in other instances where we are required by or authorised under the law to do so.

Complaints - You can send your complaint to the Police and Families Credit Union via secure bank messaging through our Internet Banking service or mail to Police and Families Credit Union PO Box 12344, Wellington 6144 or phone 0800 429 000 or email info@policecu.org.nz.

If you are still unhappy you can contact our independent dispute resolution provider Financial Services Complaints Limited (FSCL). This service is free to you. FSCL contact details are Financial Services Complaints Limited, PO Box 5967, Lambton Quay, Wellington 6145 or phone 0800 347 257 or fax 04 472 3728 or email info@fscl.org.nz or via their website fscl.org.nz.

Electronic Identity Verification:

You consent to us verifying your identity electronically against external data sources. We do this by providing your details securely to a third party which specialises in electronic identity verification. Your details will not be forwarded to any other third parties or used for any other purpose.

Signing Authority – By signing this form I agree to be bound by the terms and conditions as detailed above and the General Terms and Conditions of the Police Credit Union which is available online at policecu.org.nz

I include copies of the required certified identification documents as detailed in the "Identification Guide"

I confirm that this authority is validly executed and binding on me/us

Primary member's signature	<input type="text"/>	Joint account holder's signature	<input type="text"/>	Date	<input type="text"/>
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Once completed please print, sign and return to the Police Credit Union, via email to info@policecu.org.nz or by mail to PO Box 12344, Wellington, 6144 or DX SX11257.