

4 Where you live (continued)

Postal address, if different from where you live

Address

If we have trouble contacting you, who else could we call that does not live at the same address as you?

What is their name?

What is their relationship to you (mother, uncle, friend etc.)?

Their work phone

Their home phone

Their mobile phone

5 Where you work

Please tell us where you work so we can check this against our records.

Employer

Address

Employer

Address

6 Your income

Please tell us about your (joint) income

Monthly income from employment

Monthly income from benefits

Other income

Please specify source of other income

7 Other commitments

Please tell us about your current expenses

Monthly mortgage/rent payments

Monthly loan/HP/credit card payments

Monthly student loan repayments

Monthly living expenses

8 Things you need to send us

If your transaction accounts, such as your cheque and savings accounts, are not with Kiwibank, or have been with Kiwibank for less than three months, please provide copies of your bank statements for the last three months from the other banks your accounts are/were with.

If all income sources are not direct credited to your Kiwibank account, or are not included in the other bank statements above, then you'll need to provide other documents with this application to prove your income.

9 Acknowledgement

I/We acknowledge that the completion of this application does not constitute an offer of credit by Kiwibank, and that Kiwibank may reject this application for any reason. I/We confirm that all of the information in this application is true and correct. I/We will notify Kiwibank immediately if there is any change in any information given in this application.

I/We acknowledge that Kiwibank will collect and use the information set out in this application for the purpose for which it is provided. Kiwibank will hold the information securely and will only use it in developing and running Kiwibank and/or providing me/us information about products and services that Kiwibank thinks might be of interest to me/us (including from Kiwibank's selected business partners). If I/we ask Kiwibank not to provide me/us with this information, Kiwibank will comply with my/our request. I/We may ask Kiwibank to show me/us the information it holds about me/us and to make corrections to it.

I/We agree that Kiwibank or any authorised agent of Kiwibank may collect information from any person who can provide Kiwibank with information that is of relevance to it. I/We consent to Kiwibank giving my/our information to any person who can assist it in developing or running its business.

I/We understand that Kiwibank will credit check me/us. As part of that credit check, Kiwibank will give my/our information to credit reporting agencies, and credit reporting agencies will give my/our information to Kiwibank. Credit reporting agencies will use the information provided by Kiwibank to update their credit reporting databases. When other parties use the credit reporting agencies' services, they will be provided my/our updated information. Kiwibank might use credit reporting agencies' services in the future for purposes related to the provision of credit. For example, Kiwibank may use credit reporting agencies' monitoring services to receive updates if any of the information held about me/us changes. If I/we default in my/our payment obligations to Kiwibank, the default information will be listed on the credit reporting agencies' databases and will therefore be disclosed to other parties when they use the credit reporting agencies' services.

I/We certify that I am/each of us is 18 years of age or older and not an undischarged bankrupt, subject to a proposal, summary instalment order or the no asset procedure under Part 5 of the Insolvency Act 2006 or otherwise liable under the Insolvency Act 2006, and I/we have not filed a statement of affairs with the Official Assignee, made a proposal to creditors or made an application for a summary instalment order or entry into the no asset procedure under the Insolvency Act 2006.

I/We agree that if Kiwibank accepts this application, Kiwibank's Overdraft Terms and Conditions for personal banking will apply – copies of which are available from any Kiwibank branch or www.kiwibank.co.nz.

Application must be signed by all signatories on the account.

Signed

Day Month Year

Signed

Day Month Year

Bank use only

PostShop staff please complete the following information.

Application received at
PostShop name

Application accepted by
Staff member's name

Staff member's signature

Date received stamp

Action: Please send this completed application to Overdraft Applications in the overnight bag for processing.