

# DSNZ TRUST LIMITED

## TRUST ESTABLISHMENT QUESTIONNAIRE

This application form is intended as a preliminary step for drafting the trust instrument. We might require additional information or clarifications to ensure that the final trust instrument reflects the wishes of the Settlor(s). It is essential that full and clear instructions be given

### 1. PROPOSED NAME OF THE TRUST

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### 2. DATE OF CREATION

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### 3. DURATION OF TRUST

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### 4. REASON(S) FOR ESTABLISHING TRUST / FACILITIES IN NEW ZEALAND

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### 5. PURPOSE / OBJECTIVE OF TRUST

- |   |   |
|---|---|
| <input type="checkbox"/> Asset Protection               | <input type="checkbox"/> Quoted and Unquoted Investment Holding |
| <input type="checkbox"/> Family Devolution              | <input type="checkbox"/> Estate and / or Tax Planning           |
| <input type="checkbox"/> Holding Managed Company Shares | <input type="checkbox"/> Mixed Asset Holding                    |
| <input type="checkbox"/> Quoted Investment Holding      | <input type="checkbox"/> Property Holding                       |
| <input type="checkbox"/> Other (please specify) _____   |   |

### 6. TYPE OF TRUST REQUIRED

- |  |   |
|--|---|
| <input type="checkbox"/> Discretionary Trust *         | <input type="checkbox"/> Fixed Interest Trust               |
| <input type="checkbox"/> Fixed and Discretionary Trust | <input type="checkbox"/> Accumulation and Maintenance Trust |
| <input type="checkbox"/> Charitable Trust              | <input type="checkbox"/> Purpose Trust                      |
| <input type="checkbox"/> Revocable                     | <input type="checkbox"/> Irrevocable                        |
| <input type="checkbox"/> Other (please specify) _____  |   |

\* A Memorandum of Wishes is required

### 7. PROPER LAW OF TRUST

- New Zealand       Other (specify) \_\_\_\_\_

**8. TAX STATUS**

Exempt  New Zealand Tax Resident

**9. SETTLOR(S)**

Name of Settlor \_\_\_\_\_

Maiden Name \_\_\_\_\_

Country of Residence \_\_\_\_\_

Country of Domicile \_\_\_\_\_

Occupation \_\_\_\_\_

Date of Birth \_\_\_\_\_

ID / Passport Number \_\_\_\_\_

Nationality \_\_\_\_\_

Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Correspondence Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Tel (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Mobile Number \_\_\_\_\_

Fax (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Email \_\_\_\_\_

Please describe the main activity of the Settlor or the nature of his/her business

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Global Assets of Settlor**

Are any of the global assets of the Settlor derived from a cash-intensive business (such as casinos, currency dealers, money remitters) and/or a high risk industry (such as arms, gems, gold)?

Yes  No

If yes, please provide details

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Background information on Settlor (please continue on separate sheet if there is more than one Settlor)

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**10. CONFIRMATION AND IDENTIFICATION OF SETTLOR(S)**

Please provide two references from professional advisers (e.g. lawyers, accountants, banker or tax adviser) confirming the identity and address of each Settlor and any other person introducing funds.

Referee's Name \_\_\_\_\_

Referee's Address \_\_\_\_\_

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Referee's Name \_\_\_\_\_

Referee's Address \_\_\_\_\_

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**Please provide the following details for each Settlor to comply with our internal procedures and local legislation.**

**Enclosed**

**To follow** *(please tick as appropriate)*

**1. Certified copy of passport / identity card**

To be certified by Bankers, Lawyers, Commissioner of Oaths, Notaries or the Police

**2. Evidence of residential address**

For example an original or certified copy of a utility bill, bank statement or credit card statement not more than 3 months old. *Please note that documents evidencing a PO Box address are not acceptable*

**3. Please provide a bank reference letter from a reputable bank** addressed to DSNZ Trust Limited, confirming that the client has maintained an account with them and that they have no reason to doubt the credit worthiness of the client (see sample Appendix C).

**11. TRUSTEES**

Is DSNZ Trust Limited to be the sole Trustee?

Yes

No

If not please provide the following details on the Trustee(s)

**Trustee (1)**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

ID/Passport Number \_\_\_\_\_

Nationality \_\_\_\_\_

Relationship with Settlor \_\_\_\_\_

Email Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Tel (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Mobile Number \_\_\_\_\_

Fax (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

**Trustee (2)**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

ID/Passport Number \_\_\_\_\_

Nationality \_\_\_\_\_

Relationship with Settlor \_\_\_\_\_

|                    |              |
|--------------------|--------------|
| Email Address      | _____        |
| Permanent Address  | _____        |
|                    | _____        |
| Contact Tel (Home) | _____ (Work) |
| Mobile Number      | _____        |
| Fax (Home)         | _____ (Work) |

\* Please continue on separate sheet if more than two Trustees are required

## 12. IDENTIFICATION OF TRUSTEE(S)

In instances where DSNZ Trust Limited is not the sole Trustee, please provide the following details for each Trustee (as applicable).

*If a Corporate please provide these details for the Directors / Shareholder / Beneficial Owners together with certified copies of the Corporate's incorporation documents including certificates of good standing and incumbency.*

**Enclosed**                      **To follow** *(please tick as appropriate)*



**1. Certified copy of passport / identity card**

To be certified by Bankers, Lawyers, Commissioner of Oaths, Notaries or the Police



**2. Evidence of residential address**

For example an original or certified copy of a utility bill, bank statement or credit card statement not more than 3 months old.  
*Please note that documents evidencing a PO Box address are not acceptable*



**3. Company incorporation details**

## 13. BENEFICIARIES

Is the Settlor to be included as a Beneficiary?

Yes

No

Please provide the following details on the beneficiaries:

### Beneficiary (1)

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_  
ID/Passport Number \_\_\_\_\_  
Nationality \_\_\_\_\_  
Relationship with Settlor \_\_\_\_\_  
Email Address \_\_\_\_\_  
Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Contact Tel (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
Mobile Number \_\_\_\_\_  
Fax (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

**Beneficiary (2)**

Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Occupation \_\_\_\_\_  
ID/Passport Number \_\_\_\_\_  
Nationality \_\_\_\_\_  
Relationship with Settlor \_\_\_\_\_  
Email Address \_\_\_\_\_  
Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Contact Tel (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
Mobile Number \_\_\_\_\_  
Fax (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

**Beneficiary (3)**

Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Occupation \_\_\_\_\_  
ID/Passport Number \_\_\_\_\_

|                           |              |
|---------------------------|--------------|
| Nationality               | _____        |
| Relationship with Settlor | _____        |
| Email Address             | _____        |
| Permanent Address         | _____        |
|                           | _____        |
| Contact Tel (Home)        | _____ (Work) |
| Mobile Number             | _____        |
| Fax (Home)                | _____ (Work) |

**14. IDENTIFICATION OF BENEFICIARIES**

Please provide the following details for each Beneficiary

**Enclosed**                      **To follow** *(please tick as appropriate)*

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <p><b>1. Certified copy of passport / identity card</b><br/>To be certified by Bankers, Lawyers, Commissioner of Oaths, Notaries or the Police</p>  |
| <input type="checkbox"/> | <input type="checkbox"/> | <p><b>2. Evidence of residential address</b><br/>For example an original or certified copy of a utility bill, bank statement or credit card statement not more than 3 months old</p> <p>(Please note that documents evidencing a PO Box address are not acceptable)</p> |

**15. EXCLUDED PERSONS**

Should any person be excluded from becoming a beneficiary?

Yes                       No

If yes, please give names and addresses of the people to be excluded

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**16. PROTECTOR (if appointed)**

Name \_\_\_\_\_

Country of Residence \_\_\_\_\_

Country of Domicile \_\_\_\_\_

|                        |                    |
|------------------------|--------------------|
| Occupation             | _____              |
| Date of Birth          | _____              |
| ID / Passport Number   | _____              |
| Nationality            | _____              |
| Permanent Address      | _____              |
|                        | _____              |
|                        | _____              |
| Correspondence Address | _____              |
|                        | _____              |
|                        | _____              |
| Contact Tel (Home)     | _____ (Work) _____ |
| Mobile Number          | _____              |
| Fax (Home)             | _____ (Work) _____ |
| Email                  | _____              |

Specify the powers that the Protector is to have in relation to the Trust

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**17. IDENTIFICATION OF PROTECTOR**

Please provide the following details for the Protector

**Enclosed**

**To follow** *(please tick as appropriate)*

**1. Certified copy of passport / identity card**

To be certified by Bankers, Lawyers, Commissioner of Oaths, Notaries or the Police

**2. Evidence of residential address**

For example an original or certified copy of a utility bill, bank statement or credit card statement not more than 3 months old

(Please note that documents evidencing a PO Box address are not acceptable)



**18. PRINCIPAL CONTACT FOR THE TRUST (ONCE ESTABLISHED)**

Who will be DSNZ Trust Limited's principal contact in relation to the affairs of the Trust?

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If not a Settlor / a Trustee / the Protector, please provide the following details:

Name \_\_\_\_\_

Occupation \_\_\_\_\_

Date of Birth \_\_\_\_\_

ID / Passport Number \_\_\_\_\_

Nationality \_\_\_\_\_

Email Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Tel (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Mobile Number \_\_\_\_\_

Fax (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Please provide details the following details for the Principal Contact

**Enclosed**

**To follow** *(please tick as appropriate)*

**1. Certified copy of passport / identity card**

To be certified by Bankers, Lawyers, Commissioner of Oaths, Notaries or the Police

**2. Evidence of residential address**

For example an original or certified copy of a utility bill, bank statement or credit card statement not more than 3 months old (Please note that documents evidencing a PO Box address are not acceptable)

**3. Company incorporation details**

For example, a letter from the Trustees confirming authority to act and any limitation to such authority, a copy of Trust's resolutions regarding appointment and authority, or a certified copy of an appropriate form of Power of Attorney document.

**19. INITIAL ASSETS TO BE PLACED IN THE TRUST**

(a) Investments

| Type of Investment | Location | Value |
|--------------------|----------|-------|
|                    |          |       |
|                    |          |       |
|                    |          |       |
|                    |          |       |

Please provide copy of valuation if available

(b) Bank Accounts

| Type of Investment | Location | Value |
|--------------------|----------|-------|
|                    |          |       |
|                    |          |       |
|                    |          |       |
|                    |          |       |

(c) Other Assets

| Type of Investment | Location | Value |
|--------------------|----------|-------|
|                    |          |       |
|                    |          |       |
|                    |          |       |
|                    |          |       |

When considering a transfer of assets, a simple transfer may not be possible for tax or other reasons. Therefore please provide fullest details for us to consider these issues for you

Source of Funds *(please be specific as to how the funds to be placed into the trust arose):*

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Are the Trust assets derived from a cash-intensive business (such as casinos, currency dealers, money remitters) and/or a high risk industry (such as arms, gems, gold)?

Yes       No

If yes, please provide details:

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Will the trust own companies and/or trusts administered by DSNZ Trust Limited  Yes  No

If yes, please specify:

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Does the trust require an underlying company to hold the assets?  Yes  No

Confirm if the Settlor has the capacity to transfer assets specified above to the trust  Yes  No

Has the Settlor any knowledge of present or future creditors who may legally have a claim to the trust assets?

Yes       No

If yes, please provide details:

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**20. ACCOUNTS**

It is a legal requirement for financial accounts to be maintained for a trust. Please indicate whether you would like DSNZ Trust Limited to provide bookkeeping and accounts preparation services

Yes       No

Accounting Year End \_\_\_\_\_

If no, please indicate who will provide such services:

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**21. TRANSACTIONAL AND JURISDICTIONAL FACTORS**

What type and frequency of transactions is the Trust intending to undertake as part of its “usual course of business”? Please provide details

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Is the Trust likely to use wire transfers on a regular basis  Yes  No

What country(ies) is/are the Trust intending to deal with or do business? Please list those countries.

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**22. BANK ACCOUNTS**

Do you require a bank account to be opened in New Zealand?

Yes  No

If no, specify where: \_\_\_\_\_ Currency \_\_\_\_\_

**23. HOW WERE YOU INTRODUCED TO DSNZ TRUST LIMITED?**

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**DECLARATION** (to be signed by the Settlor(s))

**To: DSNZ TRUST Limited**

18 Glenbrae Place  
Loburn, RD2 Rangiora, New Zealand

**I/We confirm the following:**

(a) All funds or assets to be placed in the proposed Trust have not been or will not be:

- derived from any illegal source or activity; or
- the subject of any litigation in any other jurisdiction;
- connected to persons holding or having held high public or political positions in a jurisdiction other than New Zealand, and all supporting documents will be provided to DSNZ Trust Limited to that effect.

(b) The Trust including the funds and assets within the Company will not be used for any illegal activities, including but not limited to:

- accepting and/or distributing the proceeds from drug trafficking or any associated activities;
- engaging in any form of money laundering;
- dealing with sanctioned persons or entities in breach of applicable United Nations sanctions; and/or
- facilitating the financing of terrorism or terrorist acts.

**I/We confirm that** I/we do not and will not deal, and the Trust does not and will not deal, with shell banks or financial institutions that have a correspondent banking relationship with any shell banks.

**I/We confirm that** I/we am/are not a person holding or having held high public or political positions in a jurisdiction other than in New Zealand (for example, a senior judge, governments minister or senior foreign representative or ambassador).

**I/We confirm that** I/we have obtained the appropriate legal and taxation advice pertaining to the structure which I/we wish to establish, and which I/we instructed you to establish on my/our behalf.

**I/We confirm that** I/we have read and understood the Standard Terms and Conditions of DSNZ Trust Limited for the provision of Trustee services, as shown in Appendix A.

**I/We confirm that** I/we have read and understood the extracts of the:

- (a) Criminal Proceeds (Recovery) Act 2009;
- (b) Mutual Assistance in Criminal Matters Act 1992;
- (c) Financial Transactions Reporting Act 1996 and its successor the Anti-Money Laundering and Countering Financing of Terrorism Act 2009;
- (d) Terrorism Suppression Act 2002; and
- (e) Regulations made under the United Nations Act 1946; highlighting their essential features, as shown in Appendix B.

**I/We hereby confirm** that the above details are true and accurate and I/we undertake to advise you in the event that any of my/our circumstances change, which may affect the Limited Company structure which I/we wish to put into place.

**I/We hereby acknowledge** the receipt and confirm my/our acceptance of the Terms and Conditions of Business, which shall be incorporated as an essential part of this agreement entered hereto and together with this Questionnaire shall be read as a single document.

**This Agreement shall be governed by the Laws of New Zealand**

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Signature of Settlor

Signature of Settlor

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Name

Name

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Date

# APPENDIX A: TERMS AND CONDITIONS

## DSNZ Trust Limited

This document contains the standard terms and conditions of DSNZ Trust Limited (referred to as “we/us/or” such expression where appropriate will include associated companies, individual directors and senior officer) for the provision of trustee and corporate services. Unless otherwise expressly agreed in writing, use of our services will be deemed to constitute acceptance of these terms and conditions, which are subject to revision at our discretion from time to time.

## Trustee Services

We (or designated associated companies and/or individual directors or senior officers of us) may be nominated as trustee of a trust. In providing trustee services, we (or nominated senior staff) will act in accordance with the law governing the Trust and the terms of the trust instrument.

## Registered/Administrative Office

Our address will be made available as the registered or administrative office of the Trust and notice of it will be given to the appropriate statutory bodies/authorities.

## Books of Account

It is a legal requirement to prepare financial accounts for New Zealand Foreign Trusts in order to provide financial statements for the consideration and approval of trustees. Information about investments and cash movements will be provided to us at appropriate intervals. We will require to be provided with such information as may be necessary to enable us to ensure that books of account are maintained and to provide the statements referred to above.

## Taxation Advice

We will not provide taxation advice other than that pertaining to New Zealand taxation unless specifically appointed to do so. Should it be necessary for us to contract with a specialist firm to enable it to give such advice, additional funds on account may be required in order that we may discharge such financial obligations to third parties as and when they arise.

## Administration Fees

Administration fees for our services are usually charged on a time spent basis subject to our annual minimum fee, although we (and our associated companies) reserve the right where appropriate to charge a premium rate. Administration fees will be charged monthly in advance.

Should there be any outstanding fees due to us or to third parties by the trust we reserve the right to procure that the trust realise assets to enable it to discharge such liabilities.

All fees are subject to revision from time to time at our absolute discretion and without prior notice.

## Communications relating to Trusts

We (or any of its directors), when acting as Corporate Trustee or personal Trustee respectively, may accept communication relating to the business of the Trust from any person, whether settlor, beneficiary, co-trustee, investment adviser, or otherwise a person whom we reasonably believe to have authority to communicate with us in relation to the Trust or the business of the Trust. We may in our absolute discretion accept such communication given in person, or by letter, cable, telex, facsimile, telephone or email. We will expect to receive written confirmation of oral communication as soon as reasonably possible. We shall be entitled to rely on any communications without any liability whether for mistake in the interpretation of such communication or because of lack of authority on the part of the person providing the communication or because of any contradiction between our understanding of such communication when first received and any written confirmation thereof subsequently received.

## Confidentiality

The information provided by you to us will be used to supply you with the services/products you seek from us. This may include making recommendations as to the products and/or services that meet your needs and/or objectives and further our relationship with you. Please ensure the information is accurate, relevant and complete so that we can provide you with the services and/or products you seek from us.

Information that you provide to us will be kept strictly confidential. Access to your personal information is limited to those of our employees or officers that are involved in providing, or facilitating the provision of, products and/or services to you. If we are working with other advisers on a particular matter, we shall assume, unless you notify us to the contrary, that we may discuss any such information with those advisers and discuss it with them when necessary.

You should note that there is now a statutory duty imposed on us, to report to the authorities any knowledge or suspicion of money laundering or the financing of terrorism, particularly if it relates to drugs, terrorism or other serious crime. As well, the new Financial Markets Authority has power to obtain information, documents and evidence by written notice where it considers it necessary or desirable for the purposes of performing or exercising its functions, powers or duties. It may also be necessary to release information in a non-identifiable for research or statistical purposes. This obligation overrides our duty of client confidentiality and we shall not be held liable for any breach of client confidentiality arising therefrom.

You may have access to the personal information held about you and ask us to correct or update such information. To protect you and the privacy of others, we will have to verify who you say you are before we give you access to, or change, information held about you.

## Loss or Damage

In providing services to its clients, we (and our associated companies and their officers and employees), shall not in the absence of fraud, wilful misconduct or gross negligence, be responsible for any loss or damage sustained or suffered as a result of or in course of the discharge of the duties specified and shall be indemnified against any such loss or damage by the Trust and its beneficiaries.

# APPENDIX B: NEW ZEALAND'S LEGISLATIVE PROVISIONS RELATING TO MONEY LAUNDERING

A number of key pieces of legislation are designed to prevent money laundering and terrorist financing.

## 1. CRIMINAL LAW

*Section 243 of the Crimes Act 1961 & Section 12 Misuse of Drugs Act 1975 (Money Laundering Offences)*

Money laundering is criminalised under both of these Acts. These offences apply to persons that engage in money laundering transactions knowing or believing that all or part of the property is the proceeds of a serious offence (an offence punishable by 5 years imprisonment or more) or a specified drug offence (controlled drugs, cultivation of prohibited plants or drug paraphernalia), or being reckless as to whether it is the proceeds of such an offence. A person engages in a money laundering transaction if that person deals with such property or assists another to do so for the purpose of concealing the property. It is also an offence to possess laundered property. A person may be convicted of a money laundering offence even though they have no connection to the criminal offence that generated the funds (referred to as the "predicate offence"). For instance, if someone generates money from an illegal drug transaction and provides those funds to a "professional money launderer", that launderer may be found guilty of money laundering.

### **Criminal Proceeds (Recovery) Act 2009**

This Act provides that persons convicted of serious offences may be deprived of the instruments and the proceeds of their offending by way of forfeiture orders and/or pecuniary penalties. It also establishes a non-conviction based forfeiture regime that allows the freezing and/or confiscation of the instruments of crime or the funds generated from it, in instances where a person is not convicted of a crime but they cannot demonstrate that their assets were acquired in a legitimate fashion. Many overseas jurisdictions, such as Australia, Canada and the United Kingdom also have non conviction based forfeiture systems like the one proposed in the Bill.

### **Mutual Assistance in Criminal Matters Act 1992**

This Act allows overseas jurisdictions to request assistance from New Zealand in a wide range of criminal matters, including the registration of foreign confiscation and restraining orders in this country. It also enables New Zealand to request similar assistance from overseas jurisdictions.

*The Extradition Act 1999* also forms part of a comprehensive framework of legislation aimed at combating money laundering.

## **OTHER KEY LEGISLATION**

The Financial Transactions Reporting Act 1996 (FTRA)

This Act is aimed at ensuring that when money laundering occurs, it can be brought to the attention of the New Zealand Police's Financial Intelligence Unit (FIU). The FIU has the responsibility for enforcing offences under the FTRA

The FTRA requires financial institutions to:

- verify the identity of customers when new facilities are opened, when certain transactions are conducted (including cash transactions which exceed NZD9,999.99), or where money laundering transactions are suspected.

- retain records of transactions and customer verification details
- report suspicious transactions to the FIU

It also requires all persons arriving in or leaving New Zealand to declare to Customs any cash in their possession if it is more than NZD9,999.99. The declarations are referred to the FIU. The FIU has issued guidelines to assist financial institutions in reporting suspicious transactions. These guidelines set out the features of a transaction that may give rise to suspicion that the transaction may indicate or be relevant to money laundering offences.

### **Anti-Money Laundering and Countering the Financing of Terrorism Act 2009 (AML/CFT Act)**

The AML/CFT Act comes into full force on 30 June 2013. It forms part of the legislative package that will implement the first phase of reforms to New Zealand's AML/CFT regulatory regime.

The AML/CFT Act requires reporting entities to undertake a full risk assessment and have an internal AML/CFT compliance programme which includes appropriate customer due diligence measures, ongoing due diligence and account monitoring, record keeping requirements, and suspicious transaction reporting measures.

Customer due diligence under the AML/CFT Act will involve more than verifying the identity of customers as this obligation is extended to include verifying beneficial owners of customers and those acting on behalf of customers (as applicable). This will apply, on a risk based approach, to both new and existing customers. The new requirements also necessitate in certain circumstances identifying source of wealth and/or funds of a customer (and/or its beneficial owner), and determining whether a customer (and/or its beneficial owner) is a politically exposed person (PEP).

As well, the AML/CFT Act prohibits establishing or continuing business with a shell bank or any financial institution that has a correspondent banking relationship with any shell bank(s); and requires care is taken when dealing with jurisdictions identified as having insufficient AML/CFT systems or measures in place.

### **Terrorism Suppression Act 2002**

The Terrorism Suppression Act 2020 contains a number of key sections. For instance:

- it defines what a 'terrorist act' is
- it establishes a mechanism to designate persons or groups as terrorist entities
- it creates a number of offences such as financing terrorists or recruiting persons into terrorist groups.

The Act also requires financial institutions to report suspicious transactions involving designated terrorists to the FIU and it allows for the freezing and forfeiture of terrorist assets so that those assets cannot be laundered or used for terrorist purposes.

### **Regulations made under the United Nations Act 1946**

These regulations put into effect various United Nations sanctions. They require New Zealand persons and entities to ensure that they do not do business with or deal with parties that are subject to such sanctions.

## APPENDIX C: SPECIMEN BANK REFERENCE LETTER

Bank's Letterhead

Date:

**To: DSNZ TRUST Limited**

18 Glenbrae Place  
Loburn, RD2 Rangiora, New Zealand

Dear Sir,

Please be advised that \_\_\_\_\_ has been our customer since early \_\_\_\_\_ and currently maintains an account with us. We confirm that the client's residential address is situated at \_\_\_\_\_

Our experience with their accounts and their management has been very satisfactory.

Please note that the information and opinion provided are given in confidence for your private use only and is furnished as a matter of business courtesy on the express understanding that no responsibility is assumed on the part of the Bank or any of its officers whether in tort, contract or otherwise.

Yours faithfully

\_\_\_\_\_  
(Authorised Signatory)

Name: \_\_\_\_\_

Position: \_\_\_\_\_