

DECEASED ESTATES SPECIMEN SIGNATURES



This form is to be used to collect the specimen signatures of the Executors or Administrators and may be verified either by a Solicitor, JP or Notary Public or ASB officer.

ACCOUNT DETAILS

Account Number

Name of Deceased

SIGNATURES OF EXECUTORS / ADMINISTRATORS

1.

Name In Full *Signature*

2.

Name In Full *Signature*

3.

Name In Full *Signature*

Solicitor's Certification (if identities verified by Solicitor/ Justice of the Peace or Notary)

I confirm that I am not acting as an Executor of this Estate and that I have verified the identity of the above-named and have witnessed their signature(s).

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Signature of Solicitor/Notary Public/JP *Print Name* *Date*

For Bank Use Only

Signatures verified by:

Staff Signature	<input type="text"/>	Personnel Number	<input type="text"/>	Branch Number	<input type="text"/>
Primary ID	<input type="text"/>	Secondary ID	<input type="text"/>		
Primary ID	<input type="text"/>	Secondary ID	<input type="text"/>		
Primary ID	<input type="text"/>	Secondary ID	<input type="text"/>		