

Account name

Account number

1	2																		
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As resolved at a properly convened meeting of the governing body of the above account holder we request that the following changes be made to the authorised signatories for the above Account held with ASB Bank Limited (**ASB**).

### 1. Change Account Mandate

Please amend the existing number of account signatories required to operate the above Account OR, specify the account number for which this change relates to:

Account number

1	2																		
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Any one alone;
  Any two together; or
  Any three together.

Note: The above signing Authorities apply to all suffixes under the same unique number.

### 2. Delete the following Authorised Signatories

Name
1.
2.
3.
4.
5.
6.

### 3. Add the following new Authorised Signatories

The following additional persons are authorised to operate the account as "Authorised Signatories".

Identification and verification of all Account Signatories is mandatory. Individuals who are not existing ASB customers will be required to provide additional information (i.e. Identification, proof of address and specimen signature) as per the Identification Flyer. This flyer is available upon request or can be found at <https://www.asb.co.nz/documents/id-requirements.html>

Note: All new signatories must complete a Key Individuals involved with the organisation form (KI form).

Name	KI form completed
1.	<input type="radio"/>
2.	<input type="radio"/>
3.	<input type="radio"/>
4.	<input type="radio"/>
5.	<input type="radio"/>
6.	<input type="radio"/>

### 4. FastNet Classic and Mobile access

To enable or remove FastNet Classic and ASB Mobile access to your entity accounts and information, a **FastNet Classic and ASB Mobile - Entity Authorisation Form - Changing Signatory Access** will need to be completed. You can find this form on [asb.co.nz](http://asb.co.nz), at your local branch or request from your Relationship Manager.

## 5. Important information

By signing this form, the new Account Authorised Signatories agree to be bound by the applicable ASB product and service specific terms and conditions. The above amendments to Authorised Signatories will also apply to all foreign currency accounts where you have nominated, or otherwise agreed, that the persons authorised to operate the above account are also authorised to operate your foreign currency accounts. To be signed by the person or persons authorised by the governing body of the above account holder to make changes to the Authorised Signatories for the above account held with ASB.

Please print and sign this form as we cannot accept electronic signatures

Signed on behalf of the Enterprise by:

Dated the \_\_\_\_\_ day of \_\_\_\_\_

1. Name in full

Position/Designation

Signature

2. Name in full

Position/Designation

Signature

### FOR BRANCH USE ONLY

#### Checklist:

- Existing Signatories verified
- Links in Onyx and Teller updated
- Specimen Signature Form(s) completed
- Expired Signatures and Links deleted

Staff member name

Personnel number