



# CATHOLIC DEVELOPMENT FUND

## NEW DEPOSITOR DETAILS - ORGANISATIONS

(NON PARISH / CHURCH)

Organisation Name

Organisation Address

Postcode

Postal Address

Postcode

Contact Person

Position

Telephone (Business)

Telephone (Private)

Email

Organisation IRD #

Tax Exemption Certificate Held (please provide copy)

YES / NO

Password

Nominated Bank A/C  
(please provide deposit slip)

A/C Name:

A/C Number:

CDF Online services required

Yes / No

We wish to open **(please tick)**

- Term Investment \$  for  months
- On Call Savings Account \$

Source of Funds

*I/We acknowledge that neither any trustee of the Catholic Development Fund, nor any of its employees or agents (nor any other person on its behalf) is providing any financial advice, or financial advice service (as such terms are defined in the Financial Markets Conduct Act 2013); for the avoidance of doubt, they have not provided any recommendation, guidance or opinion in connection with any investment in the Catholic Development Fund.*

### IMPORTANT INFORMATION

*This application is issued with the Product Disclosure Statement (PDS) dated 22 July 2021 for an offer of debt securities issued by The Christchurch Catholic Diocesan Development Fund, trading as the Catholic Development Fund (CDF). The PDS and the Trust Deed can be viewed on the following websites: NZ Companies Office [www.business.govt.nz/disclose](http://www.business.govt.nz/disclose), CDF [www.cdf.org.nz](http://www.cdf.org.nz) or CDF Office at 2/9 Washington Way, Sydenham, Christchurch.*

### Privacy Act

*I/We acknowledge that personal information concerning me/us provided to the Catholic Development Fund whether contained in this application or otherwise obtained, may be held and used by the Catholic Development Fund:-*

- *To enable any application made to the Catholic Development Fund to be processed and/or accepted*
- *To enable any account or loan to be serviced and maintained*
- *To enable the Catholic Development Fund to provide me/us with information concerning its products and services*

*The personal information provided in this application is collected by and will be held by the Catholic Development Fund, Unit 2 / 9 Washington Way, Christchurch.*

*I/we have the right under the Privacy Act 2020 to obtain access to and to request correction of any personal information held by the Catholic Development Fund concerning me/us*

### Other Conditions

*It is the account holder's responsibility*

- *To notify the Catholic Development Fund of any change of address*
- *To advise the Catholic Development Fund immediately if the password becomes known to non-account holders*

Signatory 1

Date

Signatory 2

Date

DD / MM / YYYY

**Please include two certified copies for each signatory as listed below:**

**Signatory 1:** Name

ID Type:  Passport  Drivers Licence & Eftpos Card  Other

**Signatory 2:** Name

ID Type:  Passport  Drivers Licence & Eftpos Card  Other

### OFFICE USE ONLY: (on file)

Identification Confirmed

Address Confirmed

Type

Employee Name

Signature

Date:

DD / MM / YYYY