



Whānau Trust

Update Information Form

TRUSTS & INCORPORATIONS - PLEASE TICK ALL THAT APPLIES TO YOU

- | | | |
|---|---|---|
| <input type="checkbox"/> Haumingi 1A2 Trust | <input type="checkbox"/> Kokako Trust | <input type="checkbox"/> Mangorewa Kaharoa A Trust |
| <input type="checkbox"/> Ngāti Manawa Incorporation | <input type="checkbox"/> Paengaroa South 5 Trust | <input type="checkbox"/> Parekarangi A4 Trust |
| <input type="checkbox"/> Te Whaiti Nui A Toi Trust | <input type="checkbox"/> Waione 3B8 Incorporation | <input type="checkbox"/> Whakapoungakau Lands Trust |
| <input type="checkbox"/> Mangakaretu 1E 2B 3C Trust | | |

INDIVIDUAL CONTACT DETAILS REQUIRED

Whānau Trust Name:

Date of Trust Deed/Order:

Primary Contact for the Whānau Trust:

Postal Address:

Phone No (Mobile): Home/Work:

Email Address:

PERSONAL IDENTIFICATION REQUIRED

- Attach a copy of either: ☐ Current Drivers License
☐ Current Passport

OWNERSHIP VERIFICATION

Reference Number:

Ownership Verification Required:

Māori Land Online Number
 (www.maorilandonline.govt.nz):

or attach a copy of your Māori Land Court Vesting Orders



BANK ACCOUNT DETAILS

Bank Account Name:

Bank Account Number: - - -

For proof of bank account please attach a bank deposit slip or bank statement to verify your account. Please ensure the bank slip or bank statement clearly shows: Bank Name, Account Name, Account Number.

Proof of bank account attached: ☐ Yes
☐ No

TRUSTEES IN THE WHĀNAU TRUST

List the Trustees Full Names and their email or phone number if known:

Full Names	Email or Phone (if known)



CONSENT & ACKNOWLEDGEMENT

By signing this form, the whānau trust authorises the Trust to update its records with the information provided.

The information collected will be used to:

- Ensure the whānau trust's contact and banking details are current
- Allow the Trust to communicate with the whānau trust effectively
- Ensure continued access to grants, dividends, and other benefits

This information is for use by the Trusts and Incorporations managed by **Awhi Rōpū Consultants**, P.O. Box 987, Rotorua, and may be accessed by their employees and contractors for administrative purposes.

Failure to provide the requested information may result in delays or disruption to your payments or communications.

The whānau trust has the right to access and correct any information held about it, in accordance with the **Privacy Act 2020**.

Signed on behalf of the Whānau Trust by:

Name:

Signature:

Date:

FOR OFFICE USE ONLY:

Date Application Received:

Documentation Validation:

IRD Number Supplied:

Yes | No | N/A

Bank Account Verified:

Yes | No | N/A

Identification Supplied:

Yes | No | N/A

Ownership Verified:

Yes | No | N/A

Applications Approved on:

Applicant Notified on: