

## Electronic Verification Details Form



Please print, sign and return this document to us via post or email:

Post: Freepost Rabobank Online Savings, PO Box 38567, Wellington 5045

Email: ClientMaintenanceNZ@rabobank.com

### Personal Details

#### Customer number

#### Account name

#### Full name




#### Date of birth

#### Residential address






### Identity Verification Details

#### New Zealand Passport

##### Passport Number

##### Expiry Date

#### New Zealand Driver's Licence

##### Licence Number

##### Expiry Date

##### Licence plate (on a vehicle registered in your name)

##### Licence version

### Declaration

I give consent for Rabobank to verify my identity electronically using the details entered by providing those details to the NZ Transport Agency, the Department of Internal Affairs or a credit reporting agency or other entity for that purpose.

#### Signature

#### Date