

## Customer Consent to Electronic Identity Check

### Section 1: Basic Details

All fields are mandatory.

#### Name

Given Name

Middle Name(s)

Family Name

#### DOB

Day

Month

Year

#### Address

Number and Street

Suburb

City/Town

Post Code

*Ensure all names and spellings are exactly as per the documents to be checked. For passport, birth certificate and NZ Citizenship Certificate checks you must include all middle names.*

### Section 2: Document Details

Complete the details for any documents to be checked in this section.

<input type="checkbox"/>	<b>NZ Driving Licence</b>	<input type="text"/>	<input type="text"/>
		Licence Number <small>The Licence Number may be under the heading 5a</small>	Licence Version <small>The Version Number may be under the heading 5b</small>
<input type="checkbox"/>	<b>NZ Passport</b>	<input type="text"/>	<input type="text"/>
		Passport Number	Passport Expiry DD/MM/YY
<input type="checkbox"/>	<b>NZ Birth Certificate</b>	<input type="text"/>	
		Birth Certificate Registration Number	
<input type="checkbox"/>	<b>NZ Citizenship Certificate</b>	<input type="text"/>	<input type="text"/>
		Citizenship Certificate Number	Country of Birth <small>Must match the details shown on certificate.</small>
<input type="checkbox"/>	<b>Australian Driving Licence</b>	<input type="text"/>	<input type="text"/>
		State of Issue	Licence Number
<input type="checkbox"/>	<b>Australian Passport</b>	<input type="text"/>	<input type="text"/>
		Passport Number	Passport Gender

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**Section 3: Vehicle Registration**

This section is optional.

**Vehicle Registration**

Registration Number

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**Section 4: PEP and Sanctions**

This section is optional but will improve the accuracy of the search.

Country of Residency

Country of Citizenship

Whitelist

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**Step 5: Consent**

This section is mandatory.

I, ....., confirm that I am authorised to provide the personal details presented and I consent to my information being passed to and checked with the document issuer, official record holder and authorised third parties for the purpose of verifying my identity and address.

Date:

Signature: \_\_\_\_\_

Please check this form for accuracy and clarity. Identity checks that fail due to typing or spelling errors will still be charged.

Check performed by \_\_\_\_\_