

**SUITABILITY NOTICE FOR DIRECTOR UNDER THE NON-BANK DEPOSIT TAKERS  
ACT 2013**

Name of Non-bank Deposit Taker  
(‘NBDT’) NBDT licence applicant this  
notice relates to:

**Section 1: Director to whom this suitability notice relates**

Full name of director or proposed  
director to which this suitability notice  
relates:

Date of birth:

Previous names (if any):

Is this person currently a director or  
senior officer of the above entity?

Yes / No

If this is a role that the person proposes  
to take up in the future, when are they  
expected to take up this role?

Has this director been resident  
overseas in the past 10 years (if yes,  
list relevant jurisdictions)?

Yes / No

**Section 2: Contact details for the director to whom this suitability notice relates**

Correspondence address:

Name of Director this notice relates to: \_\_\_\_\_

Residential address (if different):

Telephone:

E-mail address:

### Section 3: Certification

I have read and understood this notice and the "[Guidance note on suitability assessments under the Non-bank Deposit Takers Act 2013](#)", and I certify that I **do / do not** [*delete as appropriate*] raise one or more of the suitability concerns set out in the Non-bank Deposit Takers (Debt Securities and Suitability Concerns) Regulations 2014. Any suitability concerns that I raise have been listed in Appendix 1 of this document.

I understand that any person who signs a suitability notice and who knows, or ought to know, that the suitability notice is false or misleading in a material respect may be committing an offence.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

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

Date: \_\_\_\_\_

Note: Directors who do raise one or more suitability concerns should list all of the concerns in Appendix 1. Further information about suitability concerns (see paragraph 29 of the "[Guidance note on suitability assessments under the Non-bank Deposit Takers Act 2013](#)" (PDF)) can be included in Appendix 1 or provided separately in another document.

The completed suitability notice should be accompanied by the other information requested by the Bank as set out in paragraph 66 of the "[Guidance note on suitability assessments under the Non-bank Deposit Takers Act 2013](#)" (PDF).

Name of Director this notice relates to: \_\_\_\_\_

**Submitting this form**

Completed suitability notices and accompanying documentation for all directors and senior officers should be sent to the Reserve Bank together with the rest of the NBDT licence application. Further information about submitting suitability notices and licence applications to the Bank is contained in "[Guideline for Non-bank Deposit Taker Licence applicants](#)" (PDF), available from the [NBDT licensing](#) page.

Name of Director this notice relates to: \_\_\_\_\_

## Privacy and Confidentiality Statement

Personal information collected by the Bank during the process of determining whether a person is unsuitable to be a director or senior officer (as the case may be) of an NBDT may be used for the purpose of performing the Bank's functions under the Non-bank Deposit Takers Act 2013 or other such purpose permitted by law.

Information supplied or disclosed to, or obtained by, the Bank during the process of determining whether a person is unsuitable to be a director or senior officer (as the case may be) of an NBDT will be treated as confidential under section 54 of the Non-bank Deposit Takers Act 2013 and will only be published or disclosed by the Bank in accordance with that section.

## Contact for further information

### Website

[http://www.rbnz.govt.nz/regulation\\_and\\_supervision/non-bank\\_deposit\\_takers/licensing/](http://www.rbnz.govt.nz/regulation_and_supervision/non-bank_deposit_takers/licensing/)

### Email

[nbd@rbnz.govt.nz](mailto:nbd@rbnz.govt.nz)

### Telephone

+64 4 471 3949

### Mail

Reserve Bank of New Zealand  
Prudential Supervision – NBDT Licensing  
PO Box 2498  
Wellington 6140

**APPENDIX 1 – LIST OF SUITABILITY CONCERNS RAISED BY DIRECTOR (if applicable)**

Further information about any suitability concerns listed here may either be included in this appendix or provided separately in another document.

Name of Director this notice relates to: \_\_\_\_\_

**APPENDIX 2 – CONSENT TO MAKE ENQUIRIES ABOUT CREDIT AND CRIMINAL HISTORY** (to be completed by the (proposed) director to which this suitability notice relates)

I understand that the Reserve Bank of New Zealand ('the Bank') may make whatever enquiries it thinks fit to assist the Bank to determine my suitability as a director of a Non-bank Deposit Taker. I acknowledge that such enquiries may include asking any person that the Bank considers may assist with an assessment of my suitability to supply information or respond to queries.

As part of these enquiries I authorise the release to the Bank of credit information held about me by credit reporters. I agree to cooperate with the Bank and take whatever steps are necessary to enable the Bank to undertake criminal and credit history checking.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

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

Date: \_\_\_\_\_

Name of Director this notice relates to: \_\_\_\_\_