

Application to register security or securities for approved issuer levy (AIL) or zero-rating

	Please read the notes in our booklet <i>Approved issuer levy (IR 395)</i> to help you fill in this form. You can get this from our website at www.ird.govt.nz or order a copy by phoning 0800 Self service on 0800 257 773. If you already have approved issuer status, use this form to register each additional security—fill in a separate form for each security you want to register. Please answer all the questions and make sure you sign the declaration. If you need any help completing this form, contact our Non-resident Centre on +64 3 9512020, fax +64 3 9512216 or email nonres@ird.govt.nz							
Pa	yer's details							
1.	IRD number	(8 digit number	rs start in the	second box.	12345678)			
2.	Print full name of borrower/issuer	Individu	al (please inc	licate first and	ast names)	1	Non-individual	(Tick one)
		Name						
		Address						
	Country of residence/incorporation							
3.	Print full name of lender	Individua	al (please inc	licate first and	ast names)	1	Non-individual	(Tick one)
		Name						
		Address						
	Country of residence/incorporation							
Se	curity details							
4.	Description of security to be	Description						
	registered (attach copy of loan/security agreement)	Amount						
		Term						
		Purpose						
		Security						
5.	Is the security a corporate bond qualifying for zero-rating?	Yes	No	Currency				
6.	Is the security a fixed or variable principal instrument?	Fixed	Variabl	е				
7.	Show the issue and redemption date of the expected security	Issue date	Day Mon	th Year	Redemption	date	Day Month	Year
8.	Show the face value of the security in New Zealand dollars	Face value	NZ\$	•	Redemption	value	NZ\$	·
9.	Show the interest or coupon rate (per annum)			%				
10.	Is interest being paid to an associated person or persons?	Yes (AIL	is not applica	able and NRW	Γ must be deducted)		No	(Tick one)
Declaration 11. I declare that the information given in this form is true and correct Signature of authorised person / / Date							/	
Send this form to Inland Revenue, PO Box 39050, Wellington Mail Centre, Wellington 5045								
Of	fice use only Date prep	ared Day	Month	Year	Prepared by			
	Date appr		Month	Year	Approved by			
			Operator code		Correspondenc	e indicato	or	