

# Eligible Investor Certificate

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## ACKNOWLEDGEMENT

You acknowledge that by signing this certificate, you understand the consequences of certifying yourself to be a wholesale investor, including that:

- You will be treated as a wholesale investor under the FMCA;
- Certain disclosures under the FMCA will not need to be made to you in relation to the Financial Products; and
- You will have access to fewer legal protections than if you had not certified yourself as a wholesale investor.

This form relates to the offer of financial products by Mann NZ 2019 Ltd. It must be completed by an investor wishing to subscribe for the Financial Products as an eligible investor under clause 3(3)(a) of Schedule 1 to the Financial Markets Conduct Act 2013 (FMCA) and the certification must be confirmed by an authorised financial adviser, a chartered accountant or a lawyer.

For your application under an Offer to be accepted you must provide the completed certificate below together with the confirmation attached in the appendix (signed by an authorised financial adviser, chartered accountant or lawyer) prior to acceptance.

I, \_\_\_\_\_ (name of investor), hereby certify that:

1. As a result of having previous experience in acquiring or disposing of financial products, I am able to assess:

- a. The merits of Offers of Financial Products (including assessing the value and the risks of the Financial Products involved); and
- b. My own information needs in relation to an Offer; and
- c. The adequacy of the information provided by any person involved in an Offer.

2. I understand the consequences of certifying the matters set out in paragraph 1 above. The grounds on which I make the certification in paragraph 1 above are:

- a. \_\_\_\_\_
- b. My information needs have been satisfied adequately through the information provided by Mann NZ 2019 Ltd in the Term Sheet dated \_\_\_\_\_; and
- c. I have assessed the merits of the Offer and have been advised by Mann NZ 2019 Ltd to seek independent financial and legal advice before committing myself.

**I also confirm that I understand that:**

- The usual legal rules that require information to be given to investors for offers of financial products do not apply to an Offer made to me.
- I may not receive a complete and balanced set of information about this investment.
- I have fewer legal protections for this investment; and
- I have elected to be treated as an eligible investor within the meaning of clauses 3(3)(a) and 41 of Schedule 1 to the FMCA.
- this investment is not suitable for retail investors; and
- I have been advised to ask questions, read all documents carefully and seek independent financial advice.

Signed : \_\_\_\_\_

Full name : \_\_\_\_\_

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



# APPENDIX - THIRD PARTY CONFIRMATION

(As per Clause 43 of Schedule 1 to the Financial Markets Conduct Act 2013)

The following form must be completed by an authorised financial adviser, a chartered accountant or a lawyer.

I, \_\_\_\_\_ (name of authorised financial adviser, chartered accountant or lawyer), hereby confirm that:

1. I am a (Please tick the appropriate box)

Chartered Accountant	
Lawyer	
Authorised Financial Adviser	

2. I have reviewed \_\_\_\_\_ (the Investor) 's eligible investor certification (certification), a copy of which is attached to this confirmation; and
3. I have considered the grounds set out in the certification on which the Investor believes that as a result of having previous experience in acquiring or disposing of financial products, the Investor is able to assess:
- a) the merits of an Offer (including assessing the value and the risks of the financial products involved);
  - b) The Investor's information needs in relation to an Offer; and
  - c) The adequacy of the information provided by any person involved in an Offer.

**Having considered those matters, I certify that:**

- a) I am satisfied that the Investor has been sufficiently advised of the consequences of the certification made; and
- b) I have no reason to believe that the certification is incorrect or that further information or investigation is required as to whether or not the certification is correct.

Signed \_\_\_\_\_

Name \_\_\_\_\_

Company/Firm \_\_\_\_\_

Date \_\_\_\_\_