

CONSENT TO BE APPOINTED AS TRUSTEE

Te Ture Whenua Māori Act 1993
Sections 220, 222 and 239

For more information visit www.justice.govt.nz/courts/maori-land-court

WHAT IS THIS FORM FOR?

Use this form to indicate that you consent to be appointed as a trustee for any trust involving the jurisdiction of the Māori Land Court.

Your Full Legal Name:

CONTACT DETAILS

Contact Address:

.....

.....

(Address to which documents or correspondence in connection with the application can be posted or delivered)

Phone Number(s):

| | |
|----------------|-------|
| Home: | Work: |
| Mobile: | Fax: |
| Email Address: | |

NOTICE OF CONSENT

I hereby confirm as follows that: (Please tick the statement that applies)

- I do not have any criminal convictions for dishonesty or any other offences that may disqualify me from being a trustee;
- I do not have any civil or criminal proceedings pending before any Court;
- I am not currently an un-discharged bankrupt or subject to any proceedings under the Insolvency Act 2006;
- I am not subject to a compulsory detention order, or suffer from any condition covered under, the Mental Health (Compulsory Assessment and Treatment) Act 1992;
- I am not subject to any property order made under the Protection of Personal Property Rights Act 1988, or in relation to Kaitiaki Trust orders involving disability;

I have not previously been removed as a trustee of any trust by the High Court under the Trustee Act 1956 or by the Māori Land Court under section 240 of Te Ture Whenua Māori Act 1993;

I consent to my appointment as a trustee for the (enter name of trust):

.....;

I was nominated at a hui/meeting held on: (date).....
at (venue)

I undertake to familiarise myself with the trust order/deed or regulations associated with the trust;

I will properly carry out my duties as a trustee; and

I am 20 years of age or older.

The country in which I currently reside is:

.....

To enable the Court to make a determination about your suitability as a trustee, please supply the following information (if relevant):

a) I am a current or past trustee on other trusts or am or was a member of other organisations, namely:

| Name of Trust/Committee | Position held |
|-------------------------|---------------|
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b) I have the following relevant work or other experience; e.g kaumātua associated with the land or reservation:

| Place of work | Position or responsibilities |
|---------------|------------------------------|
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c) I have the following qualifications:

| Qualification | Year attained | Institute |
|---------------|---------------|-----------|
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|-------------------------------|--------------------------|
| SIGNATURE OF PROPOSED TRUSTEE | Dated: / / |
|-------------------------------|--------------------------|

| | |
|----------------------|--------------------------|
| SIGNATURE OF WITNESS | Dated: / / |
| Name | |
| Address | |
| Occupation | |

MĀORI LAND COURT CONTACT DETAILS

This consent form should be lodged along with the appropriate application with the Registrar of the Māori Land Court where your application will be heard.

| | | | |
|--|---|--|--|
| <p>TAITOKERAU</p> <p>Level 1 16 Rathbone Street WHANGĀREI</p> <p>DX Box AX 10086 WHANGĀREI</p> <p>PH: (09) 983 9940 Fax: (09) 983 9941 mlctaitokerau@justice.govt.nz</p> | <p>TAITOKERAU</p> <p>Auckland Information Office Avanti Finance Building 65B Main Highway Ellerslie, AUCKLAND</p> <p>DX Box EX10912 AUCKLAND</p> <p>PH: (09) 279 5850 Fax: (09) 279 5852 mlctamakimakaurau@justice.govt.nz</p> | <p>WAIKATO MANIAPOTO</p> <p>L2, BNZ Centre 354-358 Victoria St HAMILTON</p> <p>DX Box GX10101 HAMILTON</p> <p>PH: (07) 957 7880 Fax: (07) 957 7881 mlcwaikato@justice.govt.nz</p> | <p>WAIARIKI</p> <p>Hauora House 1143 Haupapa St ROTORUA</p> <p>DX Box JX10529 ROTORUA</p> <p>PH: (07) 921 7402 Fax: (07) 921 7412 mlcwaiariki@justice.govt.nz</p> |
| <p>TAIRĀWHITI</p> <p>Ngā Wai e Rua Building Cnr Lowe Str & Reads Quay GISBORNE</p> <p>DX Box PX10106 GISBORNE</p> <p>PH: (06) 869 0370 Fax: (06) 869 0371 mlctairawhiti@justice.govt.nz</p> | <p>TĀKITIMU</p> <p>Hastings District Court 106 Eastbourne Street West HASTINGS</p> <p>DX Box MX10024 HASTINGS</p> <p>PH: (06) 974 7630 Fax: (06) 974 7631 mlctakitimu@justice.govt.nz</p> | <p>AOTEA</p> <p>Ingestre Chambers 74 Ingestre Street WHANGANUI</p> <p>DX Box PX10207 WHANGANUI</p> <p>PH: (06) 349 0770 Fax: (06) 349 0771 mlcaotea@justice.govt.nz</p> | <p>TE WAIPOUNAMU</p> <p>Level 1 20 Lichfield Street CHRISTCHURCH</p> <p>DX Box WX11124 CHRISTCHURCH</p> <p>PH: (03) 962 4900 Fax: (03) 962 4901 mlctewaipounamu@justice.govt.nz</p> |