YT

[Provider name] application to the Trust Framework Authority for [service name]

[Date]

V1.1 July 2025

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# Applying for accreditation

The Trust Framework Authority is the regulator for accredited digital identity service providers and services in Aotearoa New Zealand.

This form must be completed by providers as part of the application process for:

* applications to be accredited as a Trust Framework provider and to provide an accredited digital identity service(s).
* applications for an additional identity service(s) once a provider has already been accredited as a digital identity provider and for a digital identity service.

The provider is required to evidence that the provider and service meets the requirements in the Digital Identity Services Trust Framework legislation. It should be read and completed in conjunction with the **Trust Framework Authority application guidance for providers**.

If you are interested in applying for accreditation, please contact the Trust Framework Authority at [TFA@dia.govt.nz](mailto:TFA@dia.govt.nz), and provide the following information:

* Provider name.
* Service type and description.
* Key contact – work phone number and work email address.

We will then communicate with the key contact to discuss your application with you, including how to submit the required application information to the Trust Framework Authority.

### Quick checklist

**Please ensure you have followed the checklist below before initiating your application, and completing this application form:**

Talk to a representative of the Trust Framework Group to ensure you’re ready to apply. Contact us at [TFA@dia.govt.nz](mailto:TFA@dia.govt.nz).

Ensure you are familiar with the [Trust Framework legislation a](https://www.dia.govt.nz/Trust-Framework-for-Digital-Identity-Legislation)nd **Trust Framework Authority application guidance for providers**

If you have an NZBN, check the information on the NZBN Register and Companies Register is up to date and correct.

If you are subject to a formal investigation or proceedings currently being undertaken by the Privacy Commissioner, you must declare it. The Trust Framework Authority may not complete its assessment of your application until the investigation or proceeding has concluded.

If you are in receivership, liquidation, bankrupt or subject to a No Asset Procedure under subpart 4 of Part 5 of the Insolvency Act 2006 (or a similar procedure under a law of an overseas jurisdiction), you must declare it.

Collate the information and documents you need to complete the application form.

Note: Please remember it is an offence under section 99 of the Digital Identity Services Trust Framework Act 2023 (the Act) to fail to give information or specified information in an application for accreditation. It is also an offence under section 98 of the Act to knowingly or recklessly give false information in an application for accreditation.

### Privacy statement

As part of the application, the Trust Framework Authority will collect personal and organisation information including names and contact details of key individuals involved in the organisation.

The Trust Framework Authority will contact these key individuals for more information so please ensure they are aware their name and email address will be provided and that they will be contacted as part of the assessment process.

Your data will be kept secure with access only available to staff who need it in for their role.

If you or one of the named key individuals choose not to provide the required information, the Trust Framework Authority may be unable to accredit your organisation as a provider of digital identity services.

The Trust Framework Authority may consult with other government agencies such as security services, to support specific aspects of the application assessment process, particularly where national security or national interest considerations are involved.

If you have any questions about this process or the information required, get in touch with us at [TFA@dia.govt.nz](mailto:TFA@dia.govt.nz).

You have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is wrong. If you’d like to ask for a copy of your information, or to have it corrected, please contact us at [TFA@dia.govt.nz](mailto:TFA@dia.govt.nz).

### Demonstration

The Trust Framework Authority will contact you to acknowledge that your application has been received. They may arrange a time for you to demonstrate the service or services included in this application. The demonstration can be in person in the Wellington office of the Trust Framework Authority or carried out remotely. Details of what needs to be included in the demonstration are included in the **Trust Framework Authority application guidance for providers.**

### Questions and answer session

You may also be invited to a question and answer session with the Trust Framework Authority. The purpose of this session is to answer any questions the Trust Framework Authority has in relation to your application. This is to support our understanding of your service and application.

# Application form

Refer to the **Trust Framework Authority application guidance for providers** to let you know why the question is being asked and how to provide this information.

| No | Question | Applicant type  (All, Organisation, Individual, NZ government agency) | Relevant services | Required |
| --- | --- | --- | --- | --- |
| **Application type** | | |  |  |
| 1 | What type of application is this? | All | All services | Yes |
| Application to be a digital identity service provider and for a digital identity service  Application for an additional digital identity service | | | |
| **Application details** | | | | |
| 2 | What is the legal name of the applicant? | All | All services | Yes |
|  | | | |
| 3 | Are you:   * a New Zealand government agency * an organisation * an individual | All | All services | Yes |
| New Zealand government agency  Organisation  Individual  *One option must be selected* | | | |
| **Provider details** | | | | |
| 4 | What is your New Zealand Business Number (NZBN)? | All | All services | For NZBN holders |
|  | | | |
| 5 | What type of organisation are you? | Organisation | All services | For organisations |
| Select one option from the options below:  NZ Limited Company  Overseas company registered in New Zealand  Co-operative company  Unlimited company  Sole trader  Partnership  Other: Please specify  Examples: Limited Partnership, Limited Partnership (Overseas) | | | |
| 6 | What is/are your trading name/s? | All | All services | Yes |
|  | | | |
| 7 | Are you registered or incorporated in New Zealand, and carrying on business in New Zealand? | Organisation | All services | For organisations |
| Yes  No | | | |
| 8 | What is your address and registered address if different?  Please note which is your registered address | All | All services | Yes |
|  | | | |
| 9 | What is your internet site address? | All | All services | Yes |
|  | | | |
| 10 | Describe the ownership structure of the organisation. If your response requires further explanation, please provide additional details as an attachment. | Organisation | All services | For organisations |
|  | | | |
| 11 | Is the organisation a subsidiary of an overseas company or does it have offices overseas? | Organisation | All services | Yes |
| Yes  No  If yes, provide details including:   * If there are any offices overseas. * If any personal information from the service(s) for which you are seeking accreditation will be accessible outside of NZ. * Any overseas subsidiaries. * What personal information from the service(s) you are seeking accreditation will be accessible by subsidiaries. | | | |
| 12 | Does the applicant or any of its officers and those involved in the management of, or employed by, or contracted by the applicant, have any interests in overseas defence contracts or overseas government contracts? | All | All services | Yes |
| Yes  No  If yes, outline any interests in overseas defence contracts or overseas government contracts.  If you are unable to provide details due to contractual or other restrictions, contact the Trust Framework Authority to discuss next steps. |  |  |  |
| 13 | Has the applicant experienced any data breaches, data losses or cybersecurity attacks? | All | All services | Yes |
| Yes  No  If yes, provide details of the breach, data loss or cybersecurity attack including the date of the event, details of the event and any controls that were implemented following the event (including updates to existing controls). | | | |
| 14 | Do you have a permanent place of residence in New Zealand (even if you also have a permanent place of residence elsewhere)? | Individual | All services | For individuals |
| Yes  No  Where yes, are you a:  New Zealand citizen  Holder of a residence class visa granted under the Immigration Act 2009  Holder of a visa granted under the Immigration Act 2009 allowing work or study in New Zealand | | | |
| 15 | What arrangements do you have for checking and assessing whether the people involved, or proposed to be involved, in the governance, management, design or delivery of the service have been convicted of a criminal offence in New Zealand or overseas? | All | All services | Yes |
|  | | | |
| 16 | Has the applicant ever been convicted of a criminal offence, whether in New Zealand or overseas?  Applicant has the meaning in section 25(2) of the Act “applicant and (as relevant) their officers and those involved in the management of, employed by, or contracted by, the applicant”. | All | All services | Yes |
| Yes  No | | | |
| 17 | What arrangements do you have for checking and assessing whether the people involved, or proposed to be involved, in the governance, management, design or delivery of the service have been or currently are the subject of a formal investigation or proceeding undertaken by the Privacy Commissioner? | All | All services | Yes |
|  | | | |
| 18 | Has the organisation currently or previously been the subject of any formal investigation or proceeding by or taken by the Privacy Commissioner? | All | All services | Yes |
| Yes  No  If yes, provide details of what took place, when, and the status or outcome of the investigation(s). | | | |
| 19 | What complaints information for the service will you publish on your website once accredited? | All | All services | Yes |
|  | | | |
| 20 | Have you received any complaints in the last 12 months which relate to your organisational capability to deliver the service for which you are seeking accreditation? | All | All services | Yes |
| Yes  No  If yes, provide details about any complaints in the last 12 months which relate to your capability to deliver the service, including:   * The date the complaint was received. * The reason for the complaint. * The response provided to the complainant. * Any actions taken in response to the complaint. | | | |
| 21 | Have you received any complaints in the last 12 months which relate to protecting personal and organisational information? | All | All services | Yes |
|  | | | |
| **Products and services** | | | | |
| 22 | What types of digital identity service(s) are you applying for in this application? | All | All services | Yes |
| Select one or more options:  Credential service  Facilitation service  Authentication service  Information service  Binding service  *At least one digital identity service must be selected*  *More than one option may be selected* | | | |
| 23 | What is the name of the service(s)? | All | All services | No |
|  |  |  |  |
| 24 | What is the internet site address of the service(s) (if any)? | All | All services | No |
|  | | | |
| 25 | Provide a description of the service(s) | All | All services | Yes |
|  | | | |
| 26 | What credential(s) are you seeking accreditation for (if any)? | All | Credential | Yes |
|  | | | |
| 27 | What attributes are you seeking accreditation for (if any) and what is the level of assurance for each? | All | Credential | Yes |
| |  |  | | --- | --- | | Name | Level of assurance from the New Zealand Identification Standards conformance  Level of Information Assurance (LoIA)  Level of Binding Assurance (LoBA)  Level of Authentication Assurance (LoAA) | |  |  | |  |  | |  |  | |  |  | | | | |
| 28 | If you use derived values, how are they calculated? | All | Credential  Facilitation | Yes |
| |  |  | | --- | --- | | Derived value | Method of calculation | |  |  | |  |  | |  |  | |  |  | | | | |

# Individuals involved in the application

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Provide details of individuals involved in the application in the table on the following page. This will include:

| No | Question | Applicant type  (All, Organisation, Individual, NZ government agency) | Relevant services | Required |
| --- | --- | --- | --- | --- |
| 1 | Provide details of the **key contact** for the application in the **Table of Individuals involved in the application** including their:   * Name * Position * Email address * Phone number | All | All services | Yes |
| 2 | Provide details of the designated individual responsible for **privacy** in the **Table of Individuals involved in the application** including their:   * Name * Position * Email address * Phone number | All | All services | Yes |
| 3 | Provide details of the designated individual responsible for **security** in the **Table of Individuals involved in the application** including their:   * Name * Position * Email address * Phone number | All | All services | Yes |
| 4 | Provide details of individuals involved in the **governance of the service**(s) for which accreditation is sought or with material control over the applicant, for example board members and the Chief Executive, in the **Table of Individuals involved in the application**, including their:   * Name * Position * Email address | All | All services | Yes |
| 5 | Provide details of individuals involved with responsibility and accountability for the management, design, or delivery of the service(s), in the **Table of Individuals involved in the application**, including their:   * Name * Position * Email address | Organisation  Government Agency | All services | Yes |

# Table of individuals involved in the application

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Position | Email address | Work phone number | Involvement\*  (Key contact, privacy, security, governance, management) |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

\* Involvement

* Key contract – Key contact for the application.
* Privacy - Designated individual responsible for privacy.
* Security - Designated individual responsible for security.
* Governance - Individual involved in the governance of the service(s) for which accreditation is sought or with material control over the applicant, for example board members and the Chief Executive.
* Management - Iindividual with responsibility and accountability for the management, design, or delivery of the service(s).

# Declarations

In the declarations “I” refers to the person making the application on behalf of the provider, and “we” refers to the provider applying for accreditation.

I declare that:

|  |  |
| --- | --- |
|  | All information is accurate and complete at the time of submitting this application. |
|  | We will advise the Trust Framework Authority if any of the information contained in this application changes within 5 working days of the change, as required by section 33 of the Act. |
|  | We have checked that our NZBN information (if applicable) is up to date and correct. |
|  | We have the organisational capability, including the people, policies, processes, procedures and systems required, to deliver Trust Framework accredited service(s) and protect personal and organisational information. This includes but is not limited to staff recruitment, service providers, and communication of changes to staff and service providers. |
|  | We ensure staff and service providers can and will meet all relevant accreditation requirements. |
|  | Where we currently or have previously been the subject of an investigation or proceeding before the Privacy Commissioner we have provided details on the status or outcome. |
|  | We are not in receivership, liquidation, bankrupt or subject to a No Asset Procedure under subpart 4 of Part 5 of the Insolvency Act 2006 (or a similar procedure under a law of an overseas jurisdiction). |
|  | We will meet the service standards and processes prescribed in the Digital Identity Trust Framework Rules made pursuant to the Digital Identity Services Trust Framework Act 2023. |
|  | We will meet the requirements for periodic reporting and notifications as set out in the Trust Framework legislation. |
| Name |  |
| Signature |  |
| Role |  |
| Date |  |

# Appendix A: Documents to be uploaded

#### Identification management

| No | Document/evidence |
| --- | --- |
| 1 | Identification Standards conformance certificate statement provided by the independent evaluator |
| 2 | Any documents you have provided to the independent evaluator for the identification standards evaluation. |

#### Provider documentation

| No | Document/evidence |
| --- | --- |
| 1 | Delegations form |
| 2 | The provider’s complaints and disputes resolution processes |
| 3 | Diagram showing all ownership including ultimate beneficial ownership interests including jurisdictions. |

#### Privacy documentation

| No | Document/evidence |
| --- | --- |
| 1 | Privacy evaluation from the independent evaluator |
| 2 | Any documents you have provided to the independent evaluator for the privacy evaluation. |

#### Security documentation

| No | Document/evidence |
| --- | --- |
| 1 | Security independent evaluation scope |
| 2 | Security independent evaluation |
| 3 | Any documents you have provided to the independent evaluator for the security evaluation. |

***Product and service documentation***

| No | Document/evidence | Where to find guidance (if relevant) |
| --- | --- | --- |
| 1 | Information data management plan | See Part B section 6 on the provider and service assessment |
| 2 | Detailed service description | See Part B section 6 on the provider and service assessment |
| 3 | Credential services credential format questionnaire | See Part B on completing the credential format questionnaire |
| 4 | Facilitation services credential format questionnaire | See Part B on completing the credential format questionnaire |

#### New Zealand public agencies document upload

For New Zealand public agencies, upload documents with a security classification up to and including SENSITIVE. For documents with a higher security classification, contact the Trust Framework Authority who will discuss access to these documents.