



# TATECO (SAN FERNANDO) CREDIT UNION CO-OPERATIVE SOCIETY LIMITED

Head Office: Mendez Court, P.O. Box 183, #3 Freeling Street, San Fernando Trinidad, W.I.

## MEMBERSHIP APPLICATION FORM

**PASSPORT  
SIZE  
PHOTO**

FOR OFFICIAL USE ONLY	D	D	M	M	Y	Y	Y	Y
Date:								
Package Collected on:								
Package Collected by:								
Account No.								

1. PERSONAL INFORMATION		(Block Letters)
NAME	Surname:	Mr. <input type="checkbox"/>
	First Name:	Miss <input type="checkbox"/>
	Middle Name:	Mrs. <input type="checkbox"/>
NATIONALITY	Trinidad & Tobago <input type="checkbox"/> CARICOM <input type="checkbox"/> Other <input type="checkbox"/>	
RESIDENTIAL ADDRESS	LOCAL: _____ FOREIGN: _____ Original Verification _____	
POSTAL ADDRESS (If different from above) (Foreign residents <b>must</b> provide a <b>LOCAL</b> postal address)	Foreign Bank Name: _____ Bank Address: _____ Notorized Document: _____ Bank Phone# _____ A/C#: _____	
DATE OF BIRTH	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
IDENTIFICATION (2 forms of ID required)	ID: _____ Expiry Date: ___/___/___ DP: _____ Expiry Date: ___/___/___ PP: _____ Expiry Date: ___/___/___ Original Documents Verification <input type="checkbox"/>	
MARITAL STATUS	Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Common Law <input type="checkbox"/>	
CONTACT INFORMATION	Home: _____ Office: _____ Cell _____ E-mail _____ Facebook _____	

2. APPLICANTS UNDER THE AGE OF 18	
PARENT/GUARDIAN	NAME: _____ Tel. No. _____
SCHOOL ATTENDED BY CHILD	_____

3. EMPLOYMENT INFORMATION	
EMPLOYMENT STATUS	Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-Employed <input type="checkbox"/>
	IF EMPLOYED/SELF-EMPLOYED, COMPLETE THE FOLLOWING:-
	EMPLOYER: _____
	ADDRESS: _____
	JOB TITLE: _____ WORK# _____ PAYROLL# _____
PERMANENT <input type="checkbox"/> CONTRACT <input type="checkbox"/> DATE OF EMPLOYMENT: _____	
EVIDENCE OF EMPLOYMENT:- LETTER <input type="checkbox"/> PAYSIP <input type="checkbox"/> CONTRACT <input type="checkbox"/> OTHER _____	

4. FINANCIAL OBLIGATION REGULATION	
FINANCIAL INFORMATION	ARE YOU A BUSINESS OWNER? YES <input type="checkbox"/> NO <input type="checkbox"/>
	BENEFICIAL <input type="checkbox"/> FIDUCIARY <input type="checkbox"/> OTHER LEGAL ARRANGEMENT <input type="checkbox"/>
	REGISTERED NAME: _____ BUSINESS NAME: _____
	REGISTRATION#: _____ BUSINESS PHONE#: _____

5. GENERAL INFORMATION	
ARE YOU A MEMBER OF ANY OTHER CREDIT UNION	YES <input type="checkbox"/> NO <input type="checkbox"/> If 'Yes', please specify: _____
ARE YOU SERVING ON A CREDIT UNION/STATE BOARD OF DIRECTORS/COMMITTEE?	YES <input type="checkbox"/> NO <input type="checkbox"/> If 'Yes', please state name of Board: _____
SPECIAL SKILLS	I am available to serve my Credit Union: Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes' list expertise/skills that you can provide:- (a) _____ (b) _____ (c) _____ (d) _____

6. RECOMMENDATION	
RECOMMENDED BY:	Name: _____ Account No.: _____
	Address: _____
	_____
	SIGNATURE: _____

7. COMPLIANCE	
ACQUISCEANCE/SUBMISSION	Has any Financial institution(s) ever refused you membership or the opening of an account? Yes <input type="checkbox"/> No <input type="checkbox"/>
A 'POLITICALLY EXPOSED PERSON' IS A PERSON WHO IS OR WAS ENTRUSTED WITH IMPORTANT PUBLIC FUNCTIONS.	Are you politically exposed person? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes kindly indicate from category/relative/associate from this list: <input type="checkbox"/> Head of State or Government <input type="checkbox"/> Senior Politician <input type="checkbox"/> Senior Government, Judicial or Military Official <input type="checkbox"/> Senior Executive of State-Owned Corporations <input type="checkbox"/> Important Political Party Official <input type="checkbox"/> Senior Executive of a Foreign Government-Owned Commercial Enterprise

8. DECLARATION	
I am willing to make <b>SHARE CONTRIBUTIONS</b> OF \$ _____ Weekly/Fortnightly/Monthly.	
<b>(Write Name in Block Letters)</b> I, _____, hereby apply for membership in TATECO (SAN FERNANDO) Credit Union Co-operative Society Limited and if admitted, I agree to conform to the Bye-Laws or amendments thereof of the said Society and Pledge to offer my skills towards further growth of the Credit Union.	
APPLICANT	SIGNATURE: _____ DATE: _____

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CHAIRMAN:
SECRETARY:
ACCOUNT NUMBER:
The Account number noted on this FORM IS THE NUMERICAL REFERENCE throughout the Company Records and would be used for any Transaction thereafter. The applicant's name has been reference against ISIL (Da'esh) and Al-Qaida Sanction List and FATF Recommendations of NCCT's and the Consolidated List of Court Orders issued by the High Court Justice of the Republic of Trinidad & Tobago.

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Entrance Fee:	\$ _____
Membership Fee:	\$ _____
Miscellaneous Fee:	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

FOR OFFICIAL USE ONLY	D	D	M	M	Y	Y	Y	Y
Attended Orientation Meeting On:								
Approved by Board of Directors On:								
Approved By:	_____							
Folio.:	_____							

COMPLIANCE SECTION			
Reference Against UN2253 List:	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Reference Against TT Consolidated List of Court Orders:	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Reference Against Other List (CFATF/FATF):	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Background Checks:	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Compliance Officer's Signature:	_____		

<b>The following documents must be provided upon submission of application:-</b>
✓ Passport Size Photo
✓ Copy of ID/DP/PP (2)
✓ Birth Certificate (For Children)
✓ Copy of Utility Bill (Proof of Address)
✓ Payslip/Job Letter
✓ Application Fee of One Hundred Dollars (\$100.00)
✓ Beneficiary must be 18 years and over