



# KNOW YOUR MEMBER (KYC) FORM

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Form #: GCU-2a RDD 2018    Reactivation     Update     **ALL DATES TO BE WRITTEN IN THE FORMAT DD/MM/YY**    Member # .....

### PERSONAL INFORMATION

Name:		Gender:	Place of Birth:
Date of birth:	Nationality:	Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/>	Country(ies) of Citizenship:
Phone: (H) (C)	Email:	No. of Dependents:	
Marital Status: (Please tick one)	Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Common-Law <input type="checkbox"/>		
Current address:			Proof of address submitted: Yes <input type="checkbox"/> No <input type="checkbox"/>
Mailing Address: (if different from above)			<b>DATE OF INITIAL TRANSACTION:</b>
<b>REVIEW OF IDENTIFICATION - TWO REQUIRED</b>			
National Identification No: <b>Copies attached?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	Driver's Permit No: <b>Copies attached?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	Passport No: <b>Copies attached?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	Birth Certificate Pin No: <b>Copies attached?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you a member of any other Credit Union? Yes <input type="checkbox"/> No <input type="checkbox"/>	Name of Credit Union:	Member No:	
Are you serving on a Credit Union Board of Directors? Yes <input type="checkbox"/> No <input type="checkbox"/>	Name of Board:		
How did you hear about this Credit Union? Media: <input type="checkbox"/> Credit Union Open House: <input type="checkbox"/> Social Media: <input type="checkbox"/>			
Recommender: (Name)	Address:	Phone:	

### UNDER 16 YEARS

Age:	School Name & Address:
Parent/Guardian Name & Address:	Contact Info:

### EMPLOYMENT INFORMATION & SOURCE OF FUNDS

Current employer:	
Employer address:	Date of employment:
Phone: Position:	Earnings per month: \$ <b>SOURCE OF FUNDS/FUNDING:</b>
<b>PURPOSE AND INTENDED NATURE OF ACCOUNT:</b>	Employment evidence submitted: Yes <input type="checkbox"/> No <input type="checkbox"/>

### (PLEASE TICK ACCORDINGLY): SPOUSE /REFERENCE INFORMATION

Name:	Phone:	
<b>NOMINEE OF BENEFICIARY CERTIFICATE</b>		<b>BENEFICIAL OWNER(S)</b>
Name (1):	Name (2):	Who will ultimately own/control this a/c?
Address:	Address:	Self <input type="checkbox"/> Other <input type="checkbox"/>
ID/DP/PP/: DOB:	ID/DP/PP/: DOB:	If OTHER please provide <b>name(s)</b> and <b>relationship</b> below – Separate KYC needed
Relation: Contact:	Relation: Contact:	

### POLITICALLY EXPOSED PERSONS (FINANCIAL OBLIGATION REGULATION)

Have you been or ever was entrusted with a local/foreign public function? Yes  No  Are you an immediate relative or close associate of a PEP? Yes  No

**Examples of Public Functions Include:** Head of State/Government, Senior Government Official, Senior Politician, Senior Executive of State-owned corporations, Military Official, Judicial Official, Senior Political Party Officials, Senior Members of the Legislature, Senior Official of an International Organization)

If Yes, state: Position: Political Party/Public Office: Source of Wealth:

### DECLARATION - PLEASE TURN OVER

I hereby update my information at Guaymay Energy Alliance Credit Union Co-operative Society Limited. I agree to continue to conform to the Bye-Laws and/or amendments thereof of this Society. Also, I certify that the above information given is true and correct.

Signature of applicant: \_\_\_\_\_ Date of Update: \_\_\_\_\_

### COMPLIANCE VERIFICATION (FOR OFFICIAL USE ONLY)

Applicant enlisted on UN 2253:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Applicant enlisted on UN Cons. Sanction List:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Applicant enlisted on NCCT list:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Applicant enlisted on T&T List of Consolidated Court Orders	Yes <input type="checkbox"/> No <input type="checkbox"/>

Comments:

### APPROVAL (FOR OFFICIAL USE ONLY)

Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>	Date:
President:	Secretary: