



**Credit Union Co-operative Society Limited**  
**Head Office: 68-72 Maraval Road, Port Of Spain, Trinidad: Tel- 868-628-8129**

## KNOW YOUR MEMBER (KYM) DUE DILIGENCE FORM

Member #:

Date(dd/mm/yy) :

### A. MEMBER'S IDENTITY DETAILS

Title: Mr.  Ms.  Mrs.  Status: Single  Married  Divorced  Common-Law  Widowed

Full Name:

Date of Birth (dd/mm/yy): ____ / ____ / ____		Place of Birth:	
Nationality:		Other (please specify):	
Resident: Yes <input type="checkbox"/> No <input type="checkbox"/>		If "No", state Country of Residence:	
Permanent Address:			
Mailing Address:			
Telephone Numbers:	Home: ( ) _____	Mobile: ( ) _____	
Email Address:			

### B. VERIFICATION OF IDENTITY AND ADDRESS (Certified True Copies of the Originals must be submitted)

ID Type (2 forms)	Number	Country of Issue	Expiry Date (dd/mm/yr)
National ID			
Driver's Permit			
Passport			
B.I.R. File No.			
N.I.S. No.			
Address Verification: Utility Bill (Electricity / Water / Telephone / Cable) <input type="checkbox"/> Current Bank Statement <input type="checkbox"/> Certified Driver's Permit <input type="checkbox"/>			
Other <input type="checkbox"/>		Documents Attached: Yes <input type="checkbox"/> No <input type="checkbox"/>	

### C. OCCUPATION DETAILS

Classification: Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Homemaker <input type="checkbox"/> Student <input type="checkbox"/>	
Occupation:	If Self-Employed or with side job please complete:
Employer:	Occupation:
	Name of Business:
Work Address:	Business Address:
	Business Telephone Number: ( ) _____
	VAT Registration Number (if applicable):
Work Telephone Number: ( ) _____	Certificate of Incorporation (if applicable): Copy Attached: Yes <input type="checkbox"/> No <input type="checkbox"/>
Gross Annual Income Details: < \$100,000 <input type="checkbox"/> \$100,000 - \$200,000 <input type="checkbox"/> \$200,000 - \$300,000 <input type="checkbox"/> \$300,000 - \$400,000 <input type="checkbox"/> >\$400,000 <input type="checkbox"/>	

### D. POLITICALLY EXPOSED PERSONS (PEP) - See page 2 for meaning of PEP

Please tick if you fall into any of these categories: Are you an <b>INDIVIDUAL</b> , or the <b>IMMEDIATE FAMILY</b> of, or a <b>CLOSE PERSONAL/PROFESSIONAL ASSOCIATE</b> of;	
Head of State or Government <input type="checkbox"/>	Senior politician <input type="checkbox"/>
Senior government, Judicial or Military Officials <input type="checkbox"/>	Board of Directors of State-owned corporations <input type="checkbox"/>
Important political party officials <input type="checkbox"/>	Regional Corporations <input type="checkbox"/>
If Yes, Please provide details:	

**E. APPLICABLE TO NON-RESIDENTS ONLY (Please attach certified copies of documents / references as required)**

Name and Address of Foreign Financial Institution: \_\_\_\_\_  
 Telephone No. of Foreign Financial Institution: ( ) \_\_\_\_\_  
 Notarised Passport:  Driver's Permit:  Identification:  Other:

**AS REQUIRED BY FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)**

US Indicia	Documentation Required	Documents Attached
US Citizens or lawful permanent resident <input type="checkbox"/>	• W-9 or W-8BEN	Yes <input type="checkbox"/> No <input type="checkbox"/>
US Birthplace <input type="checkbox"/>	• W-9 or W-8BEN • Non-US passport or similar documentation establishing foreign citizenship • Written explanation regarding US citizenship	Yes <input type="checkbox"/> No <input type="checkbox"/>
US Address (residence and mailing) <input type="checkbox"/>	• W-9 or W-8BEN • Non-US passport or similar documentation establishing foreign citizenship	Yes <input type="checkbox"/> No <input type="checkbox"/>
Instruction to transfer funds to US accounts or directions regularly received from a US address <input type="checkbox"/>	• W-9 or W-8BEN • Documentary evidence establishing non-US status	Yes <input type="checkbox"/> No <input type="checkbox"/>
Only address on file is "in care of" or "hold mail" or US PO Box (Notice of 2001-34 excludes foreign PO Box as US Indicia) <input type="checkbox"/>	• W-9 or W-8BEN • Documentary evidence establishing non-US status	Yes <input type="checkbox"/> No <input type="checkbox"/>
Power of Attorney or signatory authority granted to person with US address <input type="checkbox"/>	• W-9 or W-8BEN • Documentary evidence establishing non-US status	Yes <input type="checkbox"/> No <input type="checkbox"/>

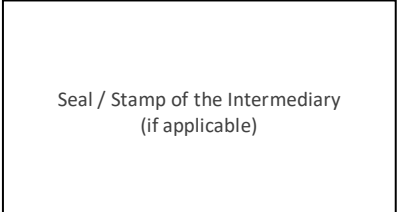
**F. DECLARATION**

I hereby declare that all of the information above is true, accurate and complete and the Credit Union is entitled to rely fully on such information and representation as may be required by law, unless the Credit Union receives notice in writing of any change thereafter.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_ 20\_\_\_\_\_  
 Signature of Member

\_\_\_\_\_  
 Name of Intermediary (if applicable) Signature of Intermediary



**FOR OFFICE USE ONLY**

Originals Verified Yes  No  Certified Document copies received Yes  No  Copies of documents received Yes  No   
 List Checking: UN 1267 Yes  No  T & T Consolidated Court Orders Yes  No  OFAC Yes  No   
 Other Yes  No

Reviewed by:

Member Services	Date	Supervisor / Manager	Date	Compliance Officer	Date

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**POLITICALLY EXPOSED PERSON**

Meaning of Politically Exposed Persons (PEPs)

- a) Individuals such as the Head of State or Government, senior politician, senior government, judicial or military officials, senior executives of State-owned corporations and important political party officials who are or have been entrusted with prominent functions –
  - i. By a foreign country; or
  - ii. Domestically for Trinidad and Tobago;
- b) persons who are or have been entrusted with a prominent function by an international organisation which refers to members of senior management such as directors and members of the board or equivalent functions; (UN, OAS, IADB, ILO, CFATF)
- c) an immediate family member of a person referred to in (a) such as spouse, parent, siblings, children and children of the spouse of that person, and
- d) any individual publicly known or actually known to the relevant financial institution to be a close personal or professional associate of the persons referred to in (a) or (b) above.