

ADDRESS VERIFICATION FORM

(in the absence of other evidence)

Date:	
Dear Sirs,	
I declare that Mr/Mrs/Miss/Ms/Dr	
Permanently resides at	
(Applicant's Address)	
and to the best of my knowledge, he/she has resided at the stated address for the past year(s).	
I therefore, being (select the appropriate title as per below):	
a Justice of the Peace	
a Notary Public	
an Attorney-at-Law	
an Inspector/Superintendent of Police (must be from community in which member resides)	
now declare and confirm the above address to the best of my knowledge to be true and correct.	
Yours truly	
(Verifier's Signature)	
Name of Verifier:	Stamp or Seal
Address:	
Telephone #:	

The Proceeds of Crime Act (POCA) 2007 requires that the foregoing information be collected as part of the Know Your Customer (KYC) due diligence. Failure to provide information accurately and promptly will affect your ability to transact business with the Insurance Employees Co-operative Credit Union.