

DIEGO MARTIN CREDIT UNION CO-OPERATIVE SOCIETY LIMITED

MEMBERSHIP APPLICATION FORM

I, the undersigned hereby apply for membership in the Diego Martin Credit Union Co-operative Society Limited and agree to conform to the provisions of the Co-operative Societies Act (1971) and Byelaws and Amendments thereto.

I hereby agree to purchase not less than _____ shares per month.

ACCOUNT NUMBER:

SECTION A: PERSONAL INFORMATION

NAME:

SURNAME

FIRST

OTHER

RESIDENTIAL ADDRESS:

PERIOD OF RESIDENCY:

Years

Months

MAILING ADDRESS (if different from above):

PLACE OF BIRTH:

NATIONALITY:

TELEPHONE: Home ()

Work ()

Mobile ()

EMAIL CONTACT: Primary email:

Secondary email:

(If applicable)

GENDER: Male: Female:

DATE OF BIRTH:

Day

Month

Year

MARITAL STATUS: Married: Single: Divorced: Common-law Union: Widowed:

IDENTIFICATION

National ID Card:

Passport:

No.

No.

Driver's License:

Birth Certificate PIN:

No.

No.

SECTION B: EMPLOYMENT INFORMATION

EMPLOYER:

EMPLOYER'S ADDRESS:

EMPLOYERS TELEPHONE

Office ()

Fax ()

Other ()

CONTACT:

EMPLOYER'S EMAIL CONTACT: Primary email:

Secondary email:

(If applicable)

YOUR JOB TITLE:

PERIOD OF EMPLOYMENT:

(years / months)

PERIOD IN CURRENT ROLE:

(years / months)

TYPE OF EMPLOYMENT:

Permanent:

Part-time:

Temporary:

Contract:

Self-Employed:

REMUNERATION:

(Monthly Salary)

<\$,5000

\$5000 - \$10,000

\$10,001 - \$20,000

\$20,001 - \$35,000

\$35,001 - \$50,000

>\$50,000

SECTION C: FINANCIAL OBLIGATION REGULATION

ARE YOU A POLITICALLY EXPOSED PERSON (PEP)?

YES

NO

A politically exposed person (PEP) is defined by the Financial Action Task Force (FATF) as an individual who is or has been entrusted with a prominent public function. Due to their position and influence, it is recognised that many PEPs are in positions that potentially can be abused for the purpose of committing money laundering (ML) offences and related predicate offences, including corruption and bribery, as well as conducting activity related to terrorist financing (TF)

Domestic PEPs: individuals who are or have been entrusted domestically with prominent public functions, for example Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.

Foreign PEPs: individuals who are or have been entrusted with prominent public functions by a foreign country, for example Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.

Family members are individuals who are related to a PEP either directly (consanguinity) or through marriage or similar (civil) forms of partnership.

Close associates are individuals who are closely connected to a PEP, either socially or professionally.

Source: (FATF Guidance, June 2013)

POLITICALLY EXPOSED PERSON

A person who is or was entrusted with important public functions in Trinidad and Tobago or a foreign country.

Examples:

- Current or former senior officials of the Executive, Legislative, Administrative or Judicial branch of Government, i.e., Members of Parliament, Senators, Senior Councils, Ambassadors, etc.
- Senior official of a major political party
- Senior executive of government-owned commercial enterprises
- Senior military official
- Immediate family members of the above persons (spouse, parents / parents-in-law, children, siblings
- Any person publicly known to be a close personal or professional associate of the above mentioned.

RECOMMENDED BY DMCU MEMBER

NAME:

SURNAME	FIRST	OTHER
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ADDRESS:

Email address:	Office Telephone:	Home Telephone:	Mobile Telephone:
	()	()	()

REFERENCE 1

NAME:

SURNAME	FIRST	OTHER
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ADDRESS:

Email address:	Office Telephone:	Home Telephone:	Mobile Telephone:
	()	()	()

REFERENCE 2

NAME:

SURNAME	FIRST	OTHER
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ADDRESS:

Email address:	Office Telephone:	Home Telephone:	Mobile Telephone:
	()	()	()

SIGNATURE OF APPLICANT

DATE OF APPLICATION



FOR OFFICIAL USE ONLY

This application has been accepted for membership.

YES

NO

This application has been checked against the following:

UN2253

Financial Action Task Force

TRINIDAD AND TOBAGO CONSOLIDATED LIST OF COURT ORDERS

1

1

SECRETARY OF THE BOARD OF DIRECTORS

DATE:
(Day / Month / Year)

DESIGNATION OF BENEFICIARY

I, _____ pursuant to the _____

NAME OF MEMBER

Co-operatives Societies Act (1971) and any amendments thereto, hereby nominate the following person/persons as beneficiary/beneficiaries.

BENEFICIARY 1
NAME:
SURNAME
FIRST
OTHER
ADDRESS:

Email address:	Office Telephone:	Home Telephone:	Mobile Telephone:
	()	()	()

RELATIONSHIP TO MEMBER:

 Spouse:

 Child:

 Grandchild:

 Sibling:

 Other:

Please specify: _____

OCCUPATION:
BENEFICIARY 2
NAME:
SURNAME
FIRST
OTHER
ADDRESS:

Email address:	Office Telephone:	Home Telephone:	Mobile Telephone:
	()	()	()

RELATIONSHIP TO MEMBER:

 Spouse:

 Child:

 Grandchild:

 Sibling:

 Other:

Please specify: _____

OCCUPATION:

Signed this _____

day of _____

, 20_____

SIGNATURE OF MEMBER
DATE:

(Day / Month / Year)

SIGNATURE OF WITNESS
DATE:

(Day / Month / Year)

SIGNATURE OF WITNESS
DATE:

(Day / Month / Year)