



CICSA Co-operative PROOF OF RESIDENCY Credit Union Ltd.

DATE D D / M M / Y Y Y Y

THE CEO
CICSA CO-OP CREDIT UNION LTD
PO BOX 1450
GRAND CAYMAN KY1-1110
CAYMAN ISLANDS

DEAR SIR OR MADAM

RE: (MEMBER NAME)

I HEREBY CONFIRM THAT THE ABOVE NAMED PERSON RESIDES AT:

MY RELATIONSHIP WITH THIS PERSON IS:

- ☐ FAMILY MEMBER (STATE RELATIONSHIP)
- ☐ TENANT
- ☐ OTHER (STATE RELATIONSHIP)

MY PROPERTY IS ☐ MORTGAGED ☐ LEASED ☐ OWNED

THIS PERSON HAS RESIDED HERE SINCE - HE/SHE
DOES/DOES NOT PAY RENT, THEIR NAME IS/IS NOT ON THE LEASE OR A CO-APPLICANT ON THE MORTGAGE BUT HE/SHE
CONTRIBUTES TOWARDS THE MONTHLY EXPENSES.

PHOTO IDENTIFICATION (AT LEAST ONE IS REQUIRED) ☐ DRIVER'S LICENSE ☐ PASSPORT ☐ VOTER'S REGISTRATION CARD

YOURS TRULY

NAME TELEPHONE
ADDRESS
SIGNATURE



CICSA Co-operative Credit Union Ltd. PROOF OF RESIDENCY

(Loans Dept)

INTERNAL USE ONLY

Is the member a Politically Exposed Person:

☐

Yes

☐

No

Approved
by Business
Unit:

NAME & SIGNATURE

ROLE

DATE

Approved by
Compliance:

Officer
Processing the
Application: