## **Co-Habitant's Declaration**



This declaration is to be completed by the person owning/leasing the property where the Bank customer resides.																														
I, the undersigned																														
	(name	of th	ie pe	erson	who	o is t	he c	wnei	ror	lesse	ee of	the	pro	pert	y)															
hereby declare that my particulars are as follows:																														
First Name(s)																														
Surname																														
ID Number																														
Residential Address																														
																								P	'osta	al Cod	de			
I further declare that, (com	plete fu	ıll na	mes	of B	idve	st B	ank d	usto	mer	)																				
First Name(s)																														
Surname																														
ID Number												re	eside	es at	the a	abov	e ac	ddre	SS.											
I confirm that I have provided my:																														
1. Identity Document:																														
Original or																														
Original certified copy	y																													
2. Proof of Residential Add	lress:																													
Original or																														
Original certified copy	y																													
I confirm that																														
First Name(s)																														
Surname																														
is my																														
	(state	relati	onsh	nip e.	g. m	othe	er/fa	ther/	son/	dau!	ghte	er/sp	ouse	e/life	part	ner/	tena	nt/c	dom	estic	woı	rker	/frie	end,	etc.	)				
Signed at																														
on		/			/																									
Deponent Signature																														
Deponent eignature																														
For Office Use Only																														
Branch Name																														
Bank Official Name																														
D. J. Off. 1 18																														
Bank Official Signature																														