



BARBADOS PUBLIC WORKERS'
CO-OPERATIVE CREDIT UNION LIMITED

PROOF OF ADDRESS

ACCOUNT No.:

I in the
(Full name of Individual who is verifying the address)

island of BARBADOS do hereby certify that
(Full Name of Individual of address to be verified)

with **national registration number or valid ID**
(Individual to be verified)

and date of birth of is known by me for (year/s) to be the individual as aforementioned.

I certify that to my knowledge and information resides at
(Full Name of the individual to be verified)

.....
(Insert Full Address of Individual)

I also certify that the aforementioned resides with or at rental property
(Name of individual on Proof of Address)

at
(Insert Full Address)

Signature of verifier: Signature Of Individual:

FOR OFFICIAL USE ONLY

Signature Of Member Services Representative Date

NB:
A copy of the utility bill or bank statement and valid photo identification belonging to the individual residing with the applicant should accompany the form to further support proof of address.