



**AUTHORISED PERSONS:**

Name:

Specimen Signature/thumb print

<b>CHAIRPERSON:</b>  ID NO: _____ TEL NO: _____	
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Name:

Specimen Signature/thumb print

<b>SECRETARY:</b>  ID NO: _____ TEL NO: _____	
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Name:

Specimen Signature/thumb print

<b>TREASURER:</b>  ID NO: _____ TEL NO: _____	
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**For Office Use only:**

KNOW YOUR CUSTOMER CERTIFICATION:

I have met the account opener/s{group name} \_\_\_\_\_  
In person and hereby confirm that KYC Norms are fully complied with.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**CUSTOMERCARE:**

I have verified the documents submitted and confirm that KYC Norms are fully complied with

Name: \_\_\_\_\_ Signature: \_\_\_\_\_