

To be completed for ALL associated individuals including: signatories, members, trustees, founders and beneficiaries of a trust, chief executive officers, partners, office bearers, proxies, 25% (or greater) shareholders, or any other person authorised to act on behalf of the client.

Documents received	
KYC Cover sheet for Related Parties (form 14177)	
Type of request	
BP name	
BP ID	
Identity/Passport number	
Proof of address	
Number of pages	
Related party information - secondary/related signatories on accounts	
Related party	
Full name	
Relation to principle account holder	
Residential address	
Telephone number	
Cell phone number	
residential address verification - To be completed when the utility bill is not in the account holders name	
Co - Habitant	
I (full name and surname)	date of birth
Identity number	
Here by confirm that i own/occupy /rent the property located at (residential address)	
I further confirm that (prospective customer's name) resides at the abovementioned property due to, (state the relationship/reason for the prospective customer residing at your residential address e.g. family member, lease agreement etc.)	
Please find attached the original/certified copy of my residential address verification document which reflects my name and residential address.	
Signature _____	
Date (YYYY-MM-DD) _____	