



GENERAL INFORMATION

CIF # :

Title: _____ Mr. Mrs. Ms. Miss

FULL NAME (First, Middle, Last) _____

Street No. & Street Name: _____

District: _____

Town / City: _____

Parish / State: _____ Postal / Zip Code: _____

Country: _____

Email Address: _____

Home Phone#: _____

Mobile # 1: _____ Mobile # 2: _____

Gender: _____ (M/F) Nationality: _____

Occupation: _____

Proof of Address: _____

Date of Birth: DD/MM/YYYY Country of Birth: _____

IDENTIFICATION TYPE

- | | | |
|----------------------------|----------|-------------------------|
| Driver's Licence | Passport | Voter's ID |
| Citizenship/Residency Card | | Certificate of Identity |
| State ID | | |

ID NUMBER: _____

ISSUE DATE: (dd/mm/yyyy): EXPIRY DATE: (dd/mm/yyyy):

TAX PAYER ID TYPE: TRN SSN SIN TIN

TAX PAYER ID #:

NAME OF REFEREE (1) _____

CONTACT NUMBER _____

NAME OF REFEREE (2) _____

CONTACT NUMBER _____

*If employed, the first reference should be the name and contact number of your Employer to facilitate the required verification.

I, the undersigned, having read and accepted the conditions overleaf, hereby apply to The Victoria Mutual Building Society for a VM Money Card.

I confirm that the information recorded above is correct and current.

For transactions, my daily limits should be set to

\$ _____ for withdrawals and \$ _____ for Point of Sale.

Signature.....

Date (dd/mm/yyyy):

FOR INTERNAL USE ONLY

Product Code: _____ Branch: _____

Primary Officer _____

CARD NUMBER:

PIN OFFSET: _____

PREPARED BY: _____ Date: (dd/mm/yyyy)

REFERENCE CONFIRMED BY: _____ Date: (dd/mm/yyyy)

APPROVED BY: _____ Date: (dd/mm/yyyy)

ENTERED BY _____ Date: (dd/mm/yyyy)

CHECKED BY: _____ Date: (dd/mm/yyyy)