



# CICSA Co-operative Credit Union Ltd. **PROOF OF RESIDENCY**

(New Accounts & Support Services Dept)

DATE

THE CEO  
CICSA CO-OP CREDIT UNION LTD  
PO BOX 1450  
GRAND CAYMAN KY1-1110  
CAYMAN ISLANDS

DEAR SIR OR MADAM

RE:  (MEMBER NAME)

I HEREBY CONFIRM THAT THE ABOVE NAMED PERSON RESIDES AT:

  

MY RELATIONSHIP WITH THIS PERSON IS:

- FAMILY MEMBER  (STATE RELATIONSHIP)
- TENANT
- OTHER  (STATE RELATIONSHIP)

PHOTO IDENTIFICATION (AT LEAST ONE IS REQUIRED)  DRIVER'S LICENSE  PASSPORT  VOTER'S REGISTRATION CARD

## YOURS TRULY

NAME  TELEPHONE

ADDRESS

SIGNATURE