

## GUARANTEE REQUEST

DATE D D / M M / Y Y Y Y	
MEMBER NAME	MEMBER NO.
BOND GUARANTEE UTILITY GUARANTEE	
ADDRESSED TO	
C.I. GOVERNMENT CUC WATER AUTHORITY	CAYMAN WATER FLOW OTHER
REQUEST	
Kindy place a hold on my: SAVING SUB / SHARE In the amount of	
STARTING DD/MM/YYYY	
AGREEMENT	
By signing this guarantee request, I understand that a hold will be placed on my account for the amount specified above and funds will only be released at the request of the company whom the guarantee is issued to.	
A fee in accordance with current published fee schedule may apply.	
MEMBER SIGNATURE	
INTERNAL USE ONLY	
PREPARED BY	APPROVED BY
HOLD PLACE BY	