

VOLUNTARY CONTRIBUTOR APPLICATION

*This form is to be completed by individuals who are **NOT** mandated by Jamaican Law to contribute to the NHT and who do **NOT** earn an income in Jamaica, but wish to make contribution payments to the Trust.*

GENERAL INFORMATION OF APPLICANT

1. Name: _____
Last Name First Name Middle Name

2. Date of Birth: _____ DD/MM/YYYY 3. Parish of Birth: _____
If applicable

4. NIS #:

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 5. TRN:

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6. Home Address: _____
 Parish/ State/ Province: _____ Zip Code (if applicable): _____

7. Mailing Address (if different from above): _____

8. Tel#: (H) _____ (Cel) _____ (W) _____

9. Email Address: _____

10. Proposed Income (in relevant currency): _____

INSTRUCTIONS: The following documents and information are required for us to serve you. Please ensure that you read these requirements carefully and comply fully so as not to delay the processing of your application.

- NATIONAL INSURANCE CARD (NIS)
- TAXPAYER REGISTRATION NUMBER (TRN)
- VALID IDENTIFICATION – (Passport, National Identification or Driver’s Licence)
- INITIAL MONTHLY PAYMENT – (3% of proposed monthly income)
- PROOF OF OVERSEAS RESIDENCE – (Permanent Resident Card, Indefinite Card, Passport for Country of Residence)
- PROOF OF AGE – (Birth Certificate, Passport or Driver’s Licence)
- SOURCE OF FUNDS _____

Client’s signature: _____ Date: _____
DD/MM/YYYY

PLEASE NOTE:

- A. The NHT reserves the right **NOT** to process this application where these requirements are not met.
- B. Representatives (persons acting on someone’s behalf) must present a valid identification and a letter of authorization signed by a Notary Public.

FOR APPOINTMENTS OR QUERIES PLEASE CONTACT THE NHT:

Website: www.nht.gov.jm
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