

CUSTOMER INFORMATION FILE DATA

The NHT is developing a database of its contributors in order to better serve them. If you are a contributor, you can help us by completing this form

1a. Full name (Mrs/Mr/Ms.)(First name)	(Middle na	me)	(Last	t Name)	
1b. Martial Status: Married ☐ Single ☐ Divorced Separated ☐	,	·	•	ŕ	/Widower 🛭
1c. Previous /Other Name					
1d. How was your name changed? By Marriage By Deed Poll When? (Please s Proof)					
		(Day	/Month/Ye	,	
2. Date Of Birth	2a. Parish	& Cour	ntry of	birth _	
(Day/Month/Year)					
3a. NIS number _ _ _ _ _ _ _ _ _	3b. TRN		-		
3c. I.D #: Passport Drive	ers Licence _		V	oters	
4. Current Address		4a. Tel/Home#			
		Work# _		(Ext.)	
		Cell#		(Fax)	
4b. Mailing Address					
4c. E-Mail Address: Business_					
5. Income: Monthly \$ Week	dy \$	Forthnight	ly \$	Yearly \$	
5b. Do you have any other source of income, Y/N. Sta				,	
Remittance \$ Part-Tin			_ Other \$	<u> </u>	
6. Occupation/Job Title					
6a. Current Employer		. Employers	Nis# _		
6b. Employers Address					
8. Current Employee Status: Full-Time □9. Previous Employment	Part-Tin	e □ Re	tired 🗖	Un-em	ployed
Name of Company	From	Te	0		
10. Have you ever received a mortgage loan from the (any benefit from the NHT)	he NHT? Y	es □ No			
10a. Where you reside, do you: Rent? □	Lease?	□ Own	? 🗖	Rent Free ?	J
10b. No of Bedrooms Occupied One	Two [Thre	e 🗆	Four	
10b. Number of Dependents:					
Signature of Customer			Signature of Officer		
Date:		Date:			