MINIELIG SACCOS	P O Box 2232, Jwaneng, Botswana Tel: (+267) 5880931 Fax: (+267) 5883203 E-mail: jwanengsaccos@gmail.com Website: www.jwanengsaccos.co.bw
SAVINGS AND CREDIT COOPERATIVE SOCIETY	I COPERATIVE BUSINESS IN THE SADC REGION
KNOW YOUR CUSTOMER: MEMBERS	
APPLICANT PERSONAL DETAILS	
Date of Application:	Place of Birth:
Names:	Gender:
Identity Number:	Title:
Nationality:	
ADDRESS AND CONTACT DETAILS	
Physical Address:	Mobile No:
Village/Town/City:	Telephone No:
Postal Address:	Fax No:
Country:	Occupation:
Email Address:	
	Employer:
BANKING DETAILS	
Bank Name:	Account Number:
Branch Name:	Account Type:
Source of Funds:	
DECLARATION	
I hereby declare that the details furnished above undertake to inform you of any changes therein, or misrespresenting, I am aware that I may be hel	
Full Names:	
Signature of Applicant:	Date:
For official use only	
	rom customer: (Please tick($$) appropriate box)

a) Certified copied of Identification

• Valid National Identity Card for citizens

• Valid Passport (for foreign nationals)

b) Copy of proof of residence

Written confirmation from customer's employer, educational establishment or prior bank clearly indicating residential address.

Written confirmation from Company Secretary (or equivalent) indicating residential address Signatories/Shareholders/Director(s)

Police Affidavit

Current copy of utility bill in account applicant's names e.g electricity/water bill/council rates

Current tenancy/lease agreement in the name of account applicant

Current rent receipt in the name of account application

A verifiable letter from the Tribal Administration

c) Copy of Proof of source of income

• Pay slip or contact letter from employer/confirmation letter

° Financial returns/receipts or audited accounts

• Pension letter or certificate

^o Bank Statements