NATIONAL COMMERCIAL BANK JAMAICA LIMITED

BRANCH _____

REFERENCE FOR OPENING AN ACCOUNT

Name of Applicant SURNAME _____ FIRST NAME _____

Address _____

_____

Name of Referee SURNAME _____ FIRST NAME _____

Home Address _____

Occupation _____

Telephone No. - (Home) _____

(Office) _____

QUESTIONS		ANSWERS (Please place a tick in the appropriate box)
1.	Is the applicant known to you personally?	YES ☐ NO ☐
2.	How many years have you known the applicant?	_____ YEARS
3.	Do you consider him/her suitable to be an account holder?	YES ☐ NO ☐
4.	Do you consider him/her to be trustworthy?	YES ☐ NO ☐

Any other comments: _____

_____

_____

Signature of Referee
(Affix stamp where applicable)

_____

Date

FOR OFFICE USE ONLY

Account Number: _____

We confirm that reference has been checked in accordance with laid down procedures.

Authenticated By: _____ **Date:** _____