



Joint Card Application Form

- For first issue, provide an original or certified copy of Birth Certificate (issued post 2000) or Marriage Certificate if you are using or wish to use your married name.
- Provide a valid photo identification if you DO NOT have an FNPf Member ID card (eg. Passport/Driving License/EVR card).
- Please pay fee only if you are applying for a replacement joint ID card at any FNPf or FRCS office and attach receipt.
- Please refer overleaf for instructions on filling the form.
- Use **BLOCK LETTERS**.

1. Card Details:

1st Issue Replacement card Reason for replacement: _____

2. Taxpayer Identification Number

3. FNPf Number

4. Birth Registration Number

5. Personal Details: (as per birth certificate)

(a) First Name:

(b) Other Names:

(c) Surname:

(d) Married Name:

(Optional and for married woman)

6. Date of Birth: (dd/mm/yyyy)

7. Gender: M F

8. Marital Status:

9. Marriage Certificate Number (if applicable):

10.

Left thumbprint of Applicant

11. Applicant's Signature: _____

Witness' Signature: _____ Date _____

Name of Witness: _____

Title of Witness: _____

The following are authorised to witness the applicant's signature:

Employer, FRCS/FNPf Customer Service Counter Officers, JP/DO/

Commissioner for Oaths.

12.
1x passport sized photo
duly certified by a JP,
Commissioner for Oaths,
Solicitor or FRCS/FNPf
Customer Service
Counter Officer

13. Declaration

I declare that the information in this application is true and correct in every detail.

WARNING: It is an offence, if any person, for any purpose connected with the FNPf Act and Tax Administration Act :

- (i) Knowingly makes any false statements or
- (ii) Produces or furnishes or causes or knowingly provide any document which he or she knows to be false.