



# INSTRUCTIONS FOR COMPLETING A 'JOINT CARD REQUEST FORM'

## General Information

A person must have a Tax Identification Number and an FNPF Number before completing this form. Complete the form in black or blue pen.

PRINT clearly with **BLOCK** letters and provide relevant information in the boxes provided. If an item is not applicable write "N/A" in the box.

1. Write the valid Tax Identification Number (TIN) issued by FRCA.
2. Write the valid FNPF membership number issued by FNPF.
3. Write the Birth Registration Number given in the box on the upper right hand corner of the Birth Certificate. (Do not complete this Box if you have a foreign birth certificate).
4. Write the name(s) as shown on your Birth Certificate:
  - 4(a). First name.
  - 4(b) Other names.
  - 4(c). Last Name/Surname.
  - 4(d). If you are a married woman and opt to use your marriage name, write the marriage name as on the Marriage Certificate.
5. Write your Father's Name as shown on the Birth Certificate. If the Father's name is not given, write your Mother's name as per Birth Certificate.
6. Write your date of birth from the Birth Certificate in the format (dd/mm/yyyy).
7. Tick either (M) for male or (F) for female.
8. Tick either (M ) for married or (S) for single.
9. Write your Marriage Certificate Registration Number (applicable to married women only if you choose to use your marriage name).
10. Write your usual and current occupation.
11. Write your current home address.
12. Write your current postal address which you use to collect your mails.
13. Write your Home and Work Phone Contacts together with your mobile contact and email address in the spaces provided.
14. Tick in one of the boxes the type of card that you are requesting. Indicate your reason if you are requesting for a replacement card.

**A fee will be charged if you are applying for a replacement card.**

15. Place your Left Thumbprint with your Signature in the space provided.  
**These should be witnessed either by your Employer, FRCA/FNPF Customer Service Counter Officers, Justice of Peace, District Officers or Commissioner for Oaths.**
16. The witnessing officer to the applicant's left thumbprint and signature should put his/her Signature, Title and Date in the spaces provided.
17. If you **DO NOT** have any other form of photo Identification or cannot come to any FRCA/FNPF Customer Services Office in person, a **certified passport size photo with WHITE BACKGROUND** is necessary. All passport sized photos must meet the specification set by FNPF & FRCA and be certified by one of the following persons: FRCA/FNPF Customer Service Counter Officers, Justice of Peace, District Officers or Commissioner for Oaths.
18. **Any changes made to the name, father's/mother's name, DOB and/or signature must be signed off by the applicant.**

## What to do with the completed form?

Take the completed form with the required documents to any FRCA/FNPF Customer Services Centre near you. The counter officers will be there to assist if you need help in completing this form.

### FOR OFFICIAL USE ONLY

This section of the form is to be completed by officers authorised to perform the functions clearly outlined in the Joint ID Card Procedure Manual. All details checked must be verified against information extracted from the FRCA/FNPF System Records.

- Signature Verified
- Photo Validated/Captured
- Fee Paid
- Documents Filed
- Card Printed
- Card Issued
- JID Form filed
- Receipt No.:
- Docs submitted for 1st Issue

|                   | Name | Signature | Date |
|-------------------|------|-----------|------|
| Vetting Officer   |      |           |      |
| Approving Officer |      |           |      |
| Issuing Officer   |      |           |      |

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