



THIS DECLARATION IS TO BE COMPLETED BY THE PERSON SHARING/OWNING/LEASING THE PROPERTY AT THE RESIDENTIAL ADDRESS OF THE APPLICANT/CLIENT. THIS PERSON IS KNOWN AS THE COHABITANT/OWNER/LESSEE.

I, the undersigned
(name of cohabitant/owner/lessee)

do hereby declare that my particulars are as follows:

1. Surname

2. First name(s)

3. Date of birth *(ddmmyyyy)*

4. Identitynumber/passport number*

5. Cohabitant's residential address:

OR

Owner's/lessee's residential address of the property owned/leased:

6. The property situated at the residential address described in 5 above is shared with/inhabited by/leased to:
.....
(full names of applicant/client)

who is *(tick appropriate box)*:

- | | | | |
|------------------------------------|---|---|--|
| <input type="checkbox"/> my spouse | <input type="checkbox"/> my boyfriend | <input type="checkbox"/> my girlfriend | <input type="checkbox"/> my life partner |
| <input type="checkbox"/> my son | <input type="checkbox"/> my daughter | <input type="checkbox"/> my brother | <input type="checkbox"/> my sister |
| <input type="checkbox"/> my father | <input type="checkbox"/> my mother | <input type="checkbox"/> my grandfather | <input type="checkbox"/> my grandmother |
| <input type="checkbox"/> my friend | <input type="checkbox"/> a person who bears no relationship to me | | |

7. Applicant's/Client's date of birth is *(ddmmyyyy)*

8. Applicant's/Client's identity number is

I attach an appropriate address verification document that proves verification of the residential address described in 5 above.

Signed at on
(place) *(ddmmyyyy)*

.....
(Signature of cohabitant/owner/lessee)

.....
(Signature of applicant/client)

**only applicable to foreign nationals*