

**THE NATIONAL IDENTIFICATION AND REGISTRATION ACT**

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**The National Identification and Registration  
Regulations, 2024**

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**FIRST SCHEDULE** (Regulations 2, 3, 7, 8,  
9, 10, 11, 12, 14, 15,  
16 and 17)

**FORM 1**

**THE NATIONAL IDENTIFICATION AND REGISTRATION ACT, 2021**

**THE NATIONAL IDENTIFICATION AND REGISTRATION AUTHORITY**

**MULTI-USE APPLICATION FORM**

**WHAT YOU NEED TO KNOW BEFORE YOU APPLY TO BE ENROLLED IN THE NIDS**

Before you begin this application, it is important that you take the time to read and understand the following information about what it will mean for you and your personal data if you enrol in the National Identification System (NIDS).

If you do not understand something, please contact the National Identification and Registration Authority before you proceed.

You will be asked to indicate that you have read and understood this information in order to complete the Multi-use Form.

***WHAT IS THE NIDS?***

- A. The NIDS is a system that you can join to be issued a National Identification Card that, under the law, must be accepted in proving your identity.
- B. When you enrol in the NIDS, you get a National Identification Card (NIC) and a National Identification Number (NIN).
- C. You can use the NIC and the NIN to prove who you are to anybody, whether it is a person or an organisation.
- D. Once someone asks you to prove who you are you can show them your NIC and they will have to accept that whatever is printed on the NIC is true.

E. Persons may also contact the Authority to make sure you are who you say you are by using your NIC or your NIN. The Authority will only answer those persons if you tell the Authority to do so.

F. You can also use the NIC electronically to transact business such as signing documents.

G. The NIN is identical to the registration number that Tax Administration Jamaica gives to you to pay taxes called the TRN.

H. If you don't have a number, you can apply to TAJ to get a registration number just to enrol in the NIDS. You don't have to be registered to pay taxes or have a TRN.

### ***NIDS IS VOLUNTARY***

- Only you can make the decision to enrol or to stop being enrolled in the NIDS.
- You can withdraw your application to enrol at any time before you are enrolled.
- You do not have to remain in the NIDS.
- You can cancel your enrolment at any time.
- You can re-enrol in the NIDS at any time.

### ***WHO CAN ENROL IN THE NIDS?***

- Any Jamaican citizen can enrol.
- Any person who is not a Jamaican citizen and who is legally living in Jamaica for at least six months immediately before they apply can enrol.
- Any person who is not a Jamaican citizen but is legally studying in Jamaica can enrol.
- These persons who are not Jamaican citizens are called "ordinarily resident in Jamaica" as it relates to the NIDS. This differs from those who are called "ordinarily resident" at other Government entities.
- You can enrol even if you don't have fingerprints or can't sign.
- You can enrol if you have a disability, if you cannot read or write or if you are elderly, sick or can't move around.
- Children can also be enrolled.

### ***YOUR PERSONAL INFORMATION***

- You own your personal information (personal data).
- Your personal data is anything that can be used to identify you.
- The Authority will have to use your personal data to carry out its work in the NIDS. It CAN only do so if you give it permission to do so.
- It MUST only do so in line with the Data Protection Act. The Data Protection Act sets out the rights that you have over your personal data and the rules and regulations on how your personal data must be handled by the Authority and other persons, public and private entities.

- If the Authority does not respect these rights and does not follow the rules you can take action against the Authority by making a report to the Information Commissioner under the Data Protection Act.
- When you apply, the Authority will collect, store and use some of your personal data to enrol and serve you, to help you establish your identity and to maximise the ways you can use the NIDS.
- The Authority must make sure the storage is secure and the information is protected from unscrupulous persons.
- The personal data that is necessary to establish your identity is called **identity information** in the NIDS.
- Identity information is made up of biographic, biometric and reference numbers that you may already have.
- **Biographic information** includes such things as your name, your date of birth and your principal place of residence. You may also choose to give information such as your mother and father's name.
- **Biometric information** is your signature if you are over 18 and can sign or make your mark, an image of your face and fingerprints.
- The Authority will not give out your fingerprints to anyone unless otherwise required by law.
- The Authority will also use **reference numbers** you may already have such as what is commonly known as the tax registration number, the entry number on your birth certificate, passport number if you are not a citizen of Jamaica.
- The Authority can only store verified information about you and must ensure that the information you submit is true and current. You will have to provide the documentation to help the Authority to carry out the verification.
- The types of documentation you will need to provide are stated in the List of Acceptable Verifying Documents.
- The verification process can be done in different ways. The enrolment officer may look at a document such as your birth certificate to check your name and date of birth but may have to contact another entity to confirm your address.
- The Authority will have to do this check anytime your identity information changes and will also check with you from time to time to ensure that the information is still correct, true and current.
- Your personal data will be deleted from the NIDS as soon as it is no longer necessary **unless** laws relating to the prevention of identity theft and other forms of identity fraud require that it be kept to protect you, in which case the Authority will need to keep a record of the registration number assigned to you under the Revenue Administration Act, your National Identification Number, your full name and all other names that have previously been used by you, your facial image and your fingerprints, even if you withdraw your application or cancel your enrolment.

### ***YOUR RIGHTS***

- You have a right to appeal any decision or anything that the Authority does or does not do concerning your enrolment, NIC, NIN or identity information before the Appeal Tribunal set up for that purpose.
- You have a right to ask the Authority for any personal data it has about you and to find out whether, why and how it is being used.
- Your information may only be disclosed or shared with others if you tell the Authority it can do so. Unless another law requires the Authority to do so without your consent, the Authority must ask you before sharing any of your information with anyone but you.
- You may ask the Authority to change any incorrect information it has about you.

### ***YOUR RESPONSIBILITIES***

- You must not knowingly give false information to the Authority.
  - Please tell the Authority when your information changes.
  - You are required to obey the National Identification and Registration Act, 2021 and the laws of Jamaica generally.
  - You must not obstruct the Authority from carrying out its work.
  - You must keep your NIC safe and secure.
  - If your NIC is stolen, report it to the nearest police station and then to the Authority as soon as possible.
  - Please inform the Authority as soon as possible if your NIC is lost, destroyed or damaged.
  - Do not allow anyone to use your NIC or your NIN.
- Yes, I have read and understood the information above, and I wish to continue completing the application form**
- No** (*You will not be able to proceed any further to complete application form*)

(The applicant is only required to complete the fields that are applicable to the applicant. An asterisk “\*” denotes fields that must be completed if applicable and available to the applicant.) Where an application is made on behalf of an individual, that individual’s information should be provided, except where the form specifies that the information required is that of the authorised representative.

<b>SECTION A – GENERAL APPLICATION INFORMATION</b>			
Type of Application (select as applicable)	<input type="checkbox"/> First application	<input type="checkbox"/> Re-enrolment	
	<input type="checkbox"/> Renewal	<input type="checkbox"/> Replacement/Alteration of Card Information	
National Identification Number: (Not required for first applications)			
Has any of your personal information changed? (Not required for first applications):			
<input type="checkbox"/> Yes – please insert the applicable information in the form below <input type="checkbox"/> No – you are not required to complete Sections C to F, please insert all other applicable information in the form below			
<b>SECTION B - NAME</b>			
Title (Mr./Mrs./Miss/Ms.):			
*Current First Name:		*First Name at Birth:	
*Current Middle Name(s):		*Middle Name(s) at Birth:	
*Current Last Name(s):		*Last Name(s) at Birth:	
*Reason for name change: (Adoption, marriage, dissolution of marriage or common law union, annulment of marriage, Deed Poll)		*Date of name change: (yyyy/mm/dd)	
*All previous or additional Name(s):		Nickname(s):	
<b>SECTION C – CITIZENSHIP AND NATIONALITY INFORMATION</b>			
*Date of Birth: (yyyy/mm/dd)			
*Place of Birth: (as appears on birth certificate)		*Sex at Birth:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Parish of Birth:		*Country of birth:	
Mother's First Name:		Father's First Name:	
Mother's Middle Name(s):		Father's Middle Name(s):	
Mother's Last Name(s):		Father's Last Name(s):	
Mother's Maiden Name:		*Birth Entry Number:	
*Adoption Certificate Number:			
*Are you a citizen of Jamaica?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Have you renounced, or been deprived of your Jamaican citizenship without it being subsequently restored?	<input type="checkbox"/> No <input type="checkbox"/> Yes (you are required to complete the section that states, Please complete if you are NOT a citizen of Jamaica).		

*Type of citizenship: (If Jamaican by virtue of grant of citizenship)		*Jamaican Certificate of Citizenship Number:	
<b>Please complete if you are NOT a citizen of Jamaica:</b>			
*Nationality (where not a citizen of Jamaica):		*Country(ies) of citizenship:	
*Date of grant of leave to enter and remain in Jamaica: (yyyy/mm/dd)		*Duration of period of residence in Jamaica: (from last grant to enter and remain in Jamaica):	
*Are you in Jamaica solely for the purpose of study?	<input type="checkbox"/> Yes, please state the name of educational institution <input type="checkbox"/> No		
<b>SECTION D – OTHER PERSONAL INFORMATION AND INSTRUCTIONS</b>			
*Marital Status	(Select all that currently apply) <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> In a common law union <input type="checkbox"/> Divorced <input type="checkbox"/> Marriage was annulled <input type="checkbox"/> Widowed <input type="checkbox"/> Common law union was terminated	Last change in marital status Date (yyyy/mm/dd): Reason: <input type="checkbox"/> Marriage <input type="checkbox"/> Entry into common law union <input type="checkbox"/> Divorce <input type="checkbox"/> Annulment <input type="checkbox"/> Death <input type="checkbox"/> Termination of common law union	
		Current Spouse's first name:	
		Current Spouse's last name:	
		Current Spouse's maiden name:	
		Current Spouse's middle name:	
Are you a person with a disability?	<input type="checkbox"/> Yes, please place International Symbol of Access on my National Identification Card <input type="checkbox"/> Yes, do not place the International Symbol of Access on my National Identification Card <input type="checkbox"/> No <input type="checkbox"/> I do not wish to answer	Do you have a card or certificate issued by the National Council for Persons with Disabilities? <input type="checkbox"/> Yes Reference Number _____ <input type="checkbox"/> No	
Occupation:			
Driver's Licence Information (under Road Traffic Act)	Class of Licence _____		
Are you a Justice of the Peace?	<input type="checkbox"/> Yes, JP Seal Number _____ <input type="checkbox"/> No		

<b>SECTION E – RESIDENTIAL AND CONTACT INFORMATION</b>			
<p>1. The Address Declaration should be completed where an applicant is unable to provide proof of the principal place of residence in the form required.</p> <p>2. If the applicant is unable to provide a specific address such as a street name, street number and district, the applicant must provide a general description of the area in which he or she resides or habitually dwells. The geographic location may also be identified by using an Open Location Code (Plus Code).</p>			
<b>*Principal Place of Residence</b>		<input type="checkbox"/> Also mailing address	
*Street Number:		*Street Name:	
*Apt/Townhouse/property number:		*Apt/Townhouse/property name:	
*Lot Number:		*P.O. Box Number:	
*Community/Scheme		*District/Town:	
*Postal Agency/Post Office:		*Postal Code/ Zip Code:	
*Address Marker/Landmark:	(insert brief description)	* Open Location Code:	
*Parish /Province/State (subnational level)		*Country:	
<b>Other Place(s) of Residence</b>		<input type="checkbox"/> Also mailing address	
*Street Number:		*Street Name:	
*Apt/Townhouse/property number:		*Apt/Townhouse/property name:	
*Lot Number:		*P.O. Box Number:	
*Community/Scheme:		*District/Town:	
*Postal Agency/Post Office:		*Postal Code/ Zip Code:	
*Address Marker/Landmark:	(insert brief description)	*Open Location Code:	
*Parish/Province/State (subnational level):		*Country:	
<b>*Mailing Address (where different from principal and other place(s) of residence)</b>			
Street Number:		Street Name:	
Apt/Townhouse/property number:		Apt/Townhouse/ property name:	
Lot Number:		P.O. Box Number:	
Community/Scheme:		District/Town:	
Postal Agency/Post Office:		Postal Code/ Zip Code:	
Parish /Province/State (subnational level):		Country:	
<b>Email and Telephone contact information</b>			
*Email address:		*Cell phone number:	
Home phone number:		Office phone number:	

**ADDRESS DECLARATION**

**Instructions:**

This form is to be used to verify an address where an applicant is unable to provide proof of the principal place of residence in the form required.

**Declaration of Applicant:**

I declare that the address information given in this application is correct and true:

Name of Applicant: .....

Signature of Applicant: .....

Date (yyyy/mm/dd): .....

**Certification by Official**

I \_\_\_\_\_  
*Insert First Name Middle Name(s) Surname(s) of certifying official*

Designation/Occupation \_\_\_\_\_

hereby certify that \_\_\_\_\_ who has been known to me for at least

*Name of individual seeking enrolment*

\_\_\_\_\_ years, has been living at the address stated above for \_\_\_\_\_

*insert number of years*

*insert time that the individual has been living at the address*

years/months/weeks.

I am aware that making a false statement in this regard is a crime and may result in charges being brought against me.

Signed by Certifying Official: .....

Seal/Stamp of Certifying Official (where applicable)
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Date: .....

This section must be completed by one of the following certifying officials who is a citizen of Jamaica, is not a family member of the individual seeking to be enrolled and who has been personally acquainted with the individual seeking to be enrolled for a period of at least 6 months:

- Member of Parliament Justice of the Peace Parish Court Judge High Court Judge Public Officer (SEG 1 and above) Minister of Religion Commissioner of Oaths Notary Public Attorney-at-law  
 Consular Officer Bank Manager Credit Union Manager Medical Practitioner Clerk of Courts Marriage Officer Dental Surgeon Army Officer (Major and above) Police Officer (Gazetted Ranks) Veterinarian Principal (Primary, Secondary & Tertiary Educational Institutions) Parish Councillor

**SECTION F – REFERENCE NUMBERS**

<p>*Registration number assigned by Tax Administration Jamaica:</p>	<p>_____ - _____ - _____</p> <p><input type="checkbox"/> I do not have a registration number and wish to make an application to the Tax Administration Jamaica (TAJ) to be assigned a registration number for the sole purpose of</p>	<p>The electoral number assigned under the Representation of the People Act:</p>	
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	enrolling in the NIDS, and request the Authority to transmit the application for assignment to the TAJ on my behalf		
*Passport number:		Driver's licence number:	
Programme for Advancement Through Health and Education (PATH) Number:		National Insurance (NIS) number:	
<b>SECTION G – AUTHORISED REPRESENTATIVE'S INFORMATION</b>			
<i>To be completed by a person (not being an enrolment officer or person otherwise affiliated with the National Identification and Registration Authority) acting on behalf of the individual seeking to be enrolled on account of a special condition (e.g. disability, age, infirmity, illiteracy, agency relationship or other condition which renders the individual unable to act on his or her own behalf).</i>			
Nature of relationship between the authorised representative and individual seeking to be enrolled:			
<input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Court-appointed <input type="checkbox"/> Caregiver <input type="checkbox"/> Officer in charge of government or state entity/charged with custody and care of the applicant <input type="checkbox"/> Other (Provide details of relationship) _____			
Reason for representation:			
<input type="checkbox"/> Minor <input type="checkbox"/> Advanced age <input type="checkbox"/> Disability <input type="checkbox"/> Infirmity <input type="checkbox"/> Care and custody/detention in state institution <input type="checkbox"/> Agency relationship <input type="checkbox"/> Other (Please state) _____			
<i>Please indicate official work information where authorised representation is by reason of official duties.</i>			
*ID Type:		*ID Number:	
*Date of issue:		*Date of expiration:	
*Email address:		*Cell phone number:	
Home phone number:		*Office phone number:	
<b>Address</b>			
*Street number:		*Street name:	
*Apt/Townhouse/property number:		*Apt/Townhouse/property name:	
*Lot Number:		*P.O. Box Number:	
*Community/Scheme		*District/Town:	
*Postal Agency/Post Office:		*Postal Code/Zip Code:	
*Parish/Province/State (subnational level)		*Country:	

<b>SECTION H – ATTESTATION OF AUTHORISED REPRESENTATIVE</b>			
In my capacity as the authorised representative of the applicant, I have			
<input type="checkbox"/> assisted the applicant to apply for enrolment <input type="checkbox"/> applied for enrolment of the applicant on the applicant’s behalf <input type="checkbox"/> completed this application form on the applicant’s behalf <input type="checkbox"/> provided assistance to the applicant in the completion of this application form			
<b>SECTION I – EMERGENCY CONTACT/NEXT OF KIN INFORMATION</b>			
Name:		Cell/mobile number:	
Home number:		Work number:	
Email address:			
Physical Address:			
Street number:		Street name:	
Apt/Townhouse/property number:		Apt/Townhouse/ property name:	
Lot Number:		P.O. Box Number:	
Community/Scheme		District/Town:	
Postal Agency/Post Office:		Postal Code/ Zip Code:	
Parish/Province/State (subnational level)		Country:	
<b>SECTION J – CONSENT AND AGREEMENT OF THE APPLICANT</b>			
<p>I UNDERSTAND that in applying to be enrolled in, or on behalf of another individual for that individual to be enrolled in, the National Identification System (“NIDS”), and/or upon enrolment, I am entering into an AGREEMENT with the National Identification and Registration Authority and in doing so, I HAVE BEEN INFORMED OF, UNDERSTAND, AND CONSENT to the following:</p> <ul style="list-style-type: none"> <li>- That where I am making this application on another individual’s behalf, the words “I”, “me” and “my” refer to that individual and only refer to me when I must carry out an action on behalf of that individual.</li> </ul> <p><i>Voluntary Nature of the NIDS</i></p> <ul style="list-style-type: none"> <li>- Enrolment in the NIDS is voluntary and I may cancel my application to enrol and that I may cancel my enrolment in the NIDS at any time</li> </ul> <p><i>Processing of Identity Information</i></p> <ul style="list-style-type: none"> <li>- The Authority shall process my personal data including identity information such as my biometric information for the purposes of my enrolment in the NIDS and for giving effect to the provisions of the National Identification and Registration Act, 2021 including the services offered by the National Identification and Registration Authority (the Authority) and that such processing may be by electronic and automated means</li> <li>- My personal data will be processed in accordance with the Data Protection Act prior to, during and after my enrolment with the NIDS</li> <li>- That upon enrolment my identity information will be stored in the National Identification Databases and that the Authority will be required to retain a minimal amount of my personal data (namely, my registration number assigned under the Revenue Administration Act, National Identification Number, full name and any previous names used by me, facial image and fingerprints) even if I decide to withdraw my application or cancel my enrolment.</li> <li>- That the Authority is required to verify the truthfulness and accuracy of my identity information and shall</li> </ul>			

require proof of my personal data including my identity information

- In verifying my identity information, the Authority will perform several activities to find out whether my personal data is true and accurate. The verification of my identity information will take place by various methods which may include contacting third parties such as the relevant/issuing authority concerned with the verifying document applicable to my identity information. These methods may include interacting with third parties including government entities to validate my personal data and to authenticate the supporting documents that I have submitted, making physical visits to the residences indicated, automated processing of my personal data, and requesting that I submit additional personal data including additional identity information or verifying documents before I may be enrolled in the NIDS
- The disclosure of my identity information and other personal data to third parties external to the National Identification Authority for the purposes of verification of the identity information prior to enrolment in the NIDS, upon renewal and alteration of identity information as the case may be
- The disclosure of my identity information and other personal data to third parties upon proof of my express consent to that third party, including requests to authenticate my National Identification Number and my National Identification Card and to verify my identity information
- The disclosure of my identity information in accordance with the National Identification and Registration Act, 2021, the Data Protection Act and any other law of Jamaica requiring the National Identification and Registration Authority to disclose such information, and that that disclosure may be without my consent and knowledge
- I have a right of access to my personal data and am entitled to find out whether the Authority holds my personal data, to ascertain my personal data being held by the Authority, and to find out the manner in which my personal data is being processed by making a request to the Authority
- I am required to inform the Authority of any change to my identity information as soon as possible after that change and of changes to my principal place of residence within thirty days of that change
- I am entitled to request the alteration of any incomplete, incorrect or misleading identity information stored in the National Identification Databases pertaining to me by making a request to the Authority and the Authority shall comply with my request or tell me why my identity information may not be altered
- Identity verification and authentication services will be provided by the Authority and, unless otherwise stated, the Authority will disclose such identity information to third parties for that purpose upon satisfaction that I have given my consent to the third party for such verification or authentication to be requested from the Authority

*National identification Number (NIN)*

- The Authority will assign a National Identification Number (NIN) to me upon enrolment which is identical to the registration number assigned by the Tax Administration of Jamaica (which is now commonly known as the Taxpayer Registration Number (TRN))
- If I do not have a registration number referred to above, and I am not liable to pay taxes under the Revenue Administration Act, I am entitled under that Act, to apply to Tax Administration Jamaica to be assigned a registration number for the sole purposes of enrolling in the NIDS, and that the application process will be facilitated by the Authority who shall collect and disseminate such personal data as is required for assignment of a registration number by Tax Administration Jamaica
- In applying to be assigned a registration number, I am applying to Tax Administration Jamaica and will be subject to the requirements of that entity and that in being assigned a registration number, I will be registered with the Tax Administration Jamaica under the Revenue Administration Act and may be liable to be treated as a taxpayer in the future if I become liable to pay taxes
- If I choose to withdraw my application to enrol in the NIDS after a registration number has been assigned, I will have already been registered with the Tax Administration Jamaica under the Revenue Administration Act and may be liable to be treated as a taxpayer in the future if I become liable to pay taxes
- If I choose to withdraw my application to enrol in the NIDS after the NIN has been assigned, that number will be assigned to me for life and after death but may not be used by me or the Authority as it relates to any NIDS activity unless I enrol in the NIDS at a later date
- My NIN will be assigned only to me for the duration of my lifetime and after death and will never be

transferred to another individual even after my death and that I may not do anything to transfer or try to transfer my NIN to anyone else whether or not the individual intends to use my NIN for fraudulent purposes or other than in accordance with the law.

- I am responsible for the safe and secure custody and use of my NIN
- I am the only person permitted to use the NIN and may not use my NIN to establish the identity of another person, and I may not allow and must take care to prevent any other person from using my NIN to establish another person's identity

*National Identification Card (NIC)*

- Upon enrolment I will be issued a National Identification Card (NIC/Card) and if I am over the age of 13, I will be issued an electronic Card (including a physical card with electronic features) which contains and/or uses information in an electronic manner for purposes including verification, authentication, credentialing by way of digital certificates or otherwise
- My use of the Card is subject to the provisions of the Electronic Transactions Act and any other applicable law which may exist from time to time and that where I use the Card to facilitate the use of my electronic signature, it will be as if I had signed by hand
- I am consenting to the use of digital certificates and other electronic apparatus, modalities, media, logic and other types of electronic measures necessary for the functional operation of my Card and the terms and conditions of using the same and that the Authority shall upon request provide me with a copy of such terms and conditions or where such terms and conditions may be accessed
- The Authority may from time to time modify my Card including the electronic features on the Card that are necessary for the Card to remain functional, to maintain the secure nature of the Card, or to facilitate and insert additional ways in which I may utilize and access the functional, value-added or personalized features of my Card, and that I will be informed of such planned modification except in the case of routine maintenance at least seven (7) days prior to the modification
- The Card will remain the property of the National Identification and Registration Authority and that I am responsible for the Card and must treat the Card in a responsible and secure manner, report any damage, mutilation, loss or theft of the Card to the Authority and return the Card upon the request of the Authority
- I am responsible for the safe and secure custody of my Card
- I am the only person permitted to use the Card and may not use my Card to establish the identity of another person, and I and my authorised representative may not allow and must take care to prevent any other person from using my Card to establish another individual's identity
- I may not do anything to transfer or try to transfer my Card to anyone else whether or not that individual intends to use my Card for fraudulent purposes or other than in accordance with the law

*Right of Appeal*

- That I have a right to appeal any decision, act or omission of the Authority concerning my enrolment, my National Identification Card, my National Identification Number or my identity information stored in the National Identity Databases, by filing a Notice of Appeal with the Appeal Tribunal established under the National Identification and Registration Act, 2021

*Duty to act in accordance with the law*

- I am required to act in accordance with the National Identification and Registration Act, 2021 the regulations under that Act, the policies, instructions and guidelines of the Authority as may be in existence from time to time, the Data Protection Act, the Electronic Transactions Act and any other law of Jamaica.

**SECTION K – DECLARATION OF TRUTH**

I hereby declare that all the information provided by me is true and that no false or inaccurate information was provided by me. I understand that it is a criminal offence to knowingly provide untrue, misleading or inaccurate information to the Authority and that such offence is punishable under the National Identification and Registration Act, 2021.

I also declare (*check as appropriate*):

I do not hold nor have ever held a National Identification Card.

I have surrendered all National Identification Cards that were issued to me except Card bearing Control No \_\_\_\_\_, which is now being surrendered upon this application.

My National Identification Card has been lost, destroyed, mutilated, or stolen, and I have reported the loss or theft to the police and have made, or intend to make within twenty-four hours, a Voluntary Declaration as required under the National Identification and Registration Act, 2021.

**\*SECTION L - SIGNATURE**

Name of applicant: \_\_\_\_\_

Are you the authorised representative:  Yes  No

Applicant's signature: _____	Date: _____ (yyyy/mm/dd)
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**Marksman Clause**

*(to be used when the applicant is unable to sign the application form due to illiteracy, disability or infirmity and is able to and desirous of making his/her mark)*

Name of applicant: \_\_\_\_\_

Mark of applicant: \_\_\_\_\_

I \_\_\_\_\_ have witnessed \_\_\_\_\_ sign the application form in  
*insert name of enrolment supervisor* *insert name of the applicant*  
 my presence after I have read it to him/her and explained its full effect. I am satisfied he/she fully understands the same and the implications and he/she has expressed themselves as fully understanding the nature and effect of the contents.

Name of enrolment supervisor: \_\_\_\_\_

Signature of enrolment supervisor: \_\_\_\_\_

**SECTION M – CIRCUMSTANCES OF COMPLETION OF FORM**

**Where Assistance is Given to Complete Form**

Due to the disability, infirmity or other condition \_\_\_\_\_ of the individual seeking  
*briefly state the nature of the condition*  
 to be enrolled and/or his authorised representative, \_\_\_\_\_,  
*briefly state the name and official designation of the person*  
 other than the enrolment officer, such as sign language interpreter, who provided assistance in the completion of the application form.

**Attestation of Enrolment Officer Who Assisted in Completing This Form**

Due to the disability, infirmity or other condition \_\_\_\_\_ of the individual  
*briefly state the nature of the condition*  
 and/or his authorised representative seeking to be enrolled, I, \_\_\_\_\_, the  
*insert name of enrolment officer*  
 enrolment officer provided assistance in the completion of the application form.

Date (yyyy/mm/dd): \_\_\_\_\_

Signature of enrolment officer: \_\_\_\_\_

\_\_\_\_\_

<b>SECTION N – OFFICIAL USE ONLY</b>			
Place of enrolment:		Enrolment application number:	
Date of enrolment: (yyyy/mm/dd)		Name of enrolment officer:	
<b>DETAILS OF VERIFYING DOCUMENTATION</b>			
Document Submitted	Document Number	Issue Date (yyyy/mm/dd)	Expiration Date (yyyy/mm/dd)
<b>Comments:</b>			