



# Universal Retirement Fund

## Employer Registration Form

### 1. Company Information

COMPANY CODE \_\_\_\_\_

NAME OF COMPANY \_\_\_\_\_

COMPANY ADDRESS \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

EMPLOYERS BIR FILE # \_\_\_\_\_ NO. OF EMPLOYEES REGISTERING \_\_\_\_\_

DATE OF ENTRY \_\_\_\_\_ dd/mm/yy

**UTC Financial Centre**  
82 Independence Square,  
Port of Spain, Trinidad, W.I.  
tel: 624-UNIT (8648)  
fax: 623-0092  
[www.ttutc.com](http://www.ttutc.com)

### 2. Frequency of Statements SEMI ANNUALLY ANNUALLY

COMPANY AUTHORISING SIGNATURE _____	POSITION _____
COMPANY AUTHORISING SIGNATURE _____	POSITION _____
COMPANY AUTHORISING SIGNATURE _____	POSITION _____
COMPANY AUTHORISING SIGNATURE _____	POSITION _____

CONTACT PERSONS	POSITION	TELEPHONE #
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

COMPANY BANKERS \_\_\_\_\_

BANKERS ADDRESS \_\_\_\_\_  
\_\_\_\_\_

COMPANY BANKERS \_\_\_\_\_

BANKERS ADDRESS \_\_\_\_\_  
\_\_\_\_\_

COMPANY BANKERS \_\_\_\_\_

BANKERS ADDRESS \_\_\_\_\_  
\_\_\_\_\_

### OFFICE USE ONLY

Company Name \_\_\_\_\_

Company Code \_\_\_\_\_