

# Antigua & Barbuda Port Authority

P.O.Box 1052  
Deepwater Harbour  
St. John's, Antigua, West Indies.



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## PENSION LIFE CERTIFICATE

FULL NAME  
OF  
PENSIONER

\_\_\_\_\_ SURNAME

\_\_\_\_\_ FIRST NAME

ADDRESS: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

SIGNATURE OF PENSIONER: \_\_\_\_\_

+++++

NEXT OF KIN: \_\_\_\_\_ RELATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

+++++

(To be **certified** by a Notary Public, Lawyer, Medical Practitioner, Minister of Religion or a Member of Parliament)

I, THE UNDERSIGNED, HEREBY CERTIFY THAT \_\_\_\_\_

WHOSE SIGNATURE IS AFFIXED ABOVE WAS ALIVE ON

THE \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Profession \_\_\_\_\_

Affix  
stamp  
here