



BRN : C10000071

**THE MAURITIUS CIVIL SERVICE MUTUAL AID ASSOCIATION LTD**

5, Guy Rozemont Square, P. Louis

Tel. No. 213 6060 (30 lines) Hotline.

212 4000

Fax No. 211 2441

Email : m.c.s.mutualaid@intnet.mu

Web site: www.mcsmutualaid.com

**RSS LOAN APPLICATION FORM**

CLN4 / 06.05.25

**1.0 Office Use**Loan Type: ☐ Renewal ☐ New Rate of Interest: .....% p.a. Loan offset: ☐ Yes ☐ NoCIF:         LOAN NO.        

Loan Amount : Rs. .... previous loan in case of renewal Maker (Name): ..... Post: ..... Signature: ..... Date: .....

Checker (Name): ..... Post: ..... Signature: ..... Date: .....

**1.1** I certify that the abovenamed customer is a member of the Retirement Savings Scheme. RSS Ref No. .... His/her total contribution as at to date amounts to Rupees ..... (Rs. ....) with accrued interest thereon of Rupees ..... (Rs. ....)

Loan Amount Eligible Rs: ..... Client informed by phone when loan amount is different: ☐ Yes ☐ No

Refund Period (months) : \_\_\_\_ Maker (Name): ..... Post: ..... Signature: ..... Date: ...../...../.....

Checker (Name): ..... Post: ..... Signature: ..... Date: ...../...../.....

**1.2 Important Note:** The Association reserves the right to contact the Ministry/Department/Accountant General/SICOM Ltd for verification of the original documents prior to processing of the loan application.

**1.2.1** The applicant agrees that the employer be allowed to be communicated the particulars of the loan whenever required.

**1.3** In order to improve Customer Service, M.C.S. Mutual Aid Association Ltd will send statements via email, unless otherwise instructed.

**2.0 PART 2.0 TO 3.0 TO BE FILLED IN BY APPLICANT (IN BLOCK LETTERS)**

Surname (Mr/Mrs/Miss): ..... Surname at Birth: .....

First Name: ..... Email : .....

N.I.C. No.            Place of Birth : ..... Marital Status (Please tick): ☐ Single ☐ Married ☐ Divorced (evidence to be attached)

Post Held: ..... Monthly salary Rs ..... ,.....

Dept/Ministry: ..... Paysite Code / Pen No.      Tel. No. (Office): ..... Tel. No. (Home): ..... Mobile No. **5**      

Loan Amount Rs. .... Refund period: ..... months.

Purpose of Loan: ☐ Wedding ☐ House renovation ☐ Medical purposes ☐ Travelling abroad☐ Exam fees ☐ Purchase of asset (Please specify) ..... ☐ Others (Please specify) .....

Bank Name: ..... Bank Branch: .....

Bank A/c No.:            

Home Address : .....

Did you derive net income exceeding Rs15m during any financial year or own assets above Rs50m (including assets owned by spouse and dependent children)? ☐ Yes ☐ NoAre you a Politically Exposed Person (PEP) or Family member of a PEP or close associate of PEP? ☐ Yes ☐ No

I, the undersigned, hereby apply for a loan of Rupees ..... (Rs. ....) from the Mauritius Civil Service Mutual Aid Association (MCSMAA) Ltd in accordance with Articles 1 to 6 of the By-Laws of the Association and Article 7.1.1 of the Constitution of the MCSMAA Ltd and hereby authorise the deduction of the monthly loan abatement from my salary/pension.

I hereby authorize the MCSMAA Ltd to make necessary enquiry from the Mauritius Credit Information Bureau (MCIB) regarding any loan facilities previously granted to me by any financial institution in Mauritius and to provide the MCIB with relevant information on the present loan facilities. I have been informed by the MCSMAA Ltd of the functions of the MCIB. I also authorize the MCSMAA Ltd to submit my 'Know Your Customer' (KYC) records to the KYC Registry of the Bank of Mauritius. I am fully aware of the provisions applicable under the Data Protection Act. I consent that you use, update and process the data and keep the details given to you in a database. The purpose of data collection is to process and monitor the loan. It is mandatory to provide data, else MCSMAA Ltd will not process the loan. Once the application has been processed, all data will be destroyed as per legal requirements.

I agree to the MCSMAA Ltd sending me an SMS/Text Messages regarding my loan account on my above mobile phone number. I solemnly affirm that the above mobile number submitted by me to the MCSMAA Ltd is duly registered under my name with my mobile service provider. I undertake to compensate MCSMAA Ltd in the event it becomes liable to any third party as a result of this number being false or otherwise inexact. I undertake to inform immediately in writing the MCS Mutual Aid Association Ltd in case of any changes in the personal data provided above. I agree to receive statement of loans at regular intervals from the MCS Mutual Aid Assn. Ltd by the email given above. I am fully aware that providing any false or misleading information to MCSMAA Ltd in connection with my customer due diligence requirements, I shall commit an offence under section 17(C)(6) of the Financial Intelligence and Anti-Money Laundering Act 2002 and shall be liable to a fine not exceeding MUR 500,000 and to imprisonment for a term not exceeding 5 years.

I am / am not / under report/ involved in a police case / under prosecution before a court of law / subject to any freezing order.(delete as appropriate).

I am aware of the 'Complaints Handling Policy and Procedures' available on [www.mcsmutualaid.com](http://www.mcsmutualaid.com)

**2.1 REQUEST FOR OFFSET OF EXISTING LOANS / ARREARS**

I authorise the M.C.S. Mutual Aid Association Ltd to offset my existing loans/arrears with Mutual Aid and other institutions (as per below) from the loan applied with the Association.

**2.2 DECLARATION FROM BORROWER : LOANS WITH OTHER INSTITUTIONS (IF APPLICABLE)**

I have commitments or loans with other institution/(s) as follows:

SN.	Lending Institution	Purpose of Loan	Original Loan Amount (Rs)	Term (Months)	Arrears as at ..... (Rs)	Loan Balance as at ..... (Rs)	To Offset (Rs) (Yes/No)
1							
2							
3							
<b>TOTAL</b>							

ARREARS		CIF	AMOUNT RS
As applicant			
As guarantor of Mr/Mrs/Miss:			
		<b>TOTAL</b>	

**2.3 EMAILING OF STATEMENTS OF ACCOUNT (BORROWER)****Declaration:**

I hereby declare that I am perfectly aware of the risks inherent to sending and receiving of statements of accounts by e-mail. These include, but are not limited to, documents being sent to impersonated e-mail addresses and / or wrong recipients, email accounts being hacked, or attacked by computer viruses and thus exposing my statements to third parties and I agree to bear all the consequences thereof. I shall be responsible for updating my e-mail address details with the M.C.S. Mutual Aid Association Ltd as and when necessary. The M.C.S. Mutual Aid Association Ltd shall not be responsible for any of the consequences in the event I fail or delay in updating my e-mail address when so requested.

I shall inform the M.C.S. Mutual Aid Association Ltd promptly in case of any error or if I become aware that my e-mail account has been compromised in any way. The M.C.S. Mutual Aid Association Ltd shall in no way be responsible for any of the consequences if I fail to notify it of such events. I undertake to hold the M.C.S. Mutual Aid Association Ltd and / or any of its agents harmless in the execution of the above instructions and not to enter any action whatsoever against the aforesaid parties. I hereby waive any such rights I might have accordingly. The present authorization shall remain valid until written revocation by me.

**2.4 LOAN DEDUCTION AUTHORITY FROM PENSION PAYABLE BY ACCOUNTANT GENERAL / SICOM LTD**

Following application of loan from the M.C.S. Mutual Aid Association Ltd, I do hereby authorise **the Accountant General/SICOM Ltd** to deduct from **my retiring gratuity, cash in lieu of sick leave / passage benefits / refund of pension contribution and other retirement benefits**, any amount which is subsequently claimed by the M.C.S. Mutual Aid Association Ltd.

I also agree that gratuity / cash in lieu of sick leave / passage benefits and other retirement benefits shall be paid to me after deducting loan balances from the M.C.S. Mutual Aid Association Ltd. I undertake not to revoke this instruction without the written consent of the M.C.S. Mutual Aid Association Ltd.

**2.5 DECLARATION FOR ADDITIONAL INCOME (IF APPLICABLE)**

I/We hereby inform you that I/We have sufficient income to repay the loan that I/We intend to take from the Mutual Aid Association. Details of my/our additional income **per month** are as follows:

SN	Post:.....(Non Member)	MEMBER (Rs)	SPOUSE (Rs)	TOTAL (Rs)
	<b>DETAILS OF ADDITIONAL INCOME</b>			
1	Rental Income			
2	Income from sale of vegetables			
3	Income from sale of snacks/others(to specify)			
4	Income from other job like part-time gardening/driving/sale of garments, private tuition/others(to specify)			
5	Old aged /Other pension			
6	Travelling allowances / grant and other income			
7	Interest receivable on fixed deposits/Savings/Bonds			
<b>Total additional income per month</b>				

I/We hereby declare that the above information is true and correct.

**Name of Spouse:** .....

**NIC No. of Spouse :**

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**Signature of spouse:** ..... **Date :** .....

**Tel No./Mobile of Spouse :** ..... **Email of Spouse :** .....

**Signature of Applicant :** ..... **Datte:** .....

**2.6 CLIMATE RELATED AND ENVIRONMENTAL ASSESSMENTS**

1. Is your income source dependent on climate-sensitive sector(s)? ☐ Yes ☐ No

If yes, please select the relevant sector(s):

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Energy	<input type="checkbox"/> Water Supply	<input type="checkbox"/> Forestry
<input type="checkbox"/> Transportation	<input type="checkbox"/> Tourism	others (please specify).....	

2. Is the asset to be purchased vulnerable to physical climate risks based on its usage? ☐ Yes ☐ No

3. Has your property been affected by any of the following climate-related events in the **past 5 years**? ☐ Yes ☐ No (Please tick all that apply)

If yes, please specify:

1 <input type="checkbox"/> Flooding during heavy rains	5 <input type="checkbox"/> Strong cyclone impacts	9 <input type="checkbox"/> Soil erosion
2 <input type="checkbox"/> Flash floods	6 <input type="checkbox"/> Rise in sea level (for coastal areas)	10 <input type="checkbox"/> Other (please specify): .....
3 <input type="checkbox"/> Coastal flooding/high waves	7 <input type="checkbox"/> River overflow	
4 <input type="checkbox"/> Landslides	8 <input type="checkbox"/> Water accumulation due to poor drainage	

**3.0****PART 3.0 – CONTRACT : TO BE FILLED AND SIGNED BY APPLICANT  
ACKNOWLEDGEMENT: UNDERTAKING TO REFUND BY INSTALMENTS**

I acknowledge having received from the Association the sum of Rupees.....  
..... as loan, subject to the conditions of my membership of the Association and its rules and By-laws.

I undertake to refund this loan by equal monthly and consecutive instalments of Rs..... in ..... months by deduction from my salary, fees, allowances and retirement benefits accruing to me without prejudice to the refund being made otherwise and on being accepted by the Mauritius Civil Service Mutual Aid Association Ltd.; each such instalment shall be calculated as per the table of the Association and shall represent an instalment of the principal amount and of interest rate applicable. Such instalment shall be paid not later than the 28<sup>th</sup> of each month. **The Association shall have the right, in its sole discretion and without prior notice, to change the rate of interest each time the Association's base lending rate (MBR) is altered or the margin over the MBR is altered.**

Consequently, I agree that the loan maturity date may be extended or reduced to take into account fluctuations in interest rate during the loan period. However, the monthly loan instalment will remain the same. **The Association reserves the right to make amendments to any of its loan policies and/or procedures at any point in time. The Association furthermore reserves the right to apply such amendments to loans already approved and granted.**

I undertake to pay all charges in connection with the loan including the Mutual Solidarity Contribution, prior to granting of the loan. In case of any default in payment of any instalment at the due date, the entire balance of the loan together with any interest due shall become immediately due and demandable, at the option of the Association.

I agree that any loan balance together with any interest due will be deducted from my Retirement Savings Scheme lump sum or any amount payable to me by my employer, Accountant General, SICOM Ltd or such other institutions responsible for payment of pension in case of resignation, retirement, dismissal or withdrawal from the Fund. I also give an unequivocal authorization to my employer to make salary deduction as requested by the Association. I do hereby give consent to the Accountant General to disclose to the Mutual Aid Association information regarding my retirement. I also empower the Accountant General to deduct from my retiring lump sum and benefits any sum accruing to the Mutual Aid Association.

In case I am proceeding on any overseas leave, I shall communicate in writing to the Association my overseas address, prior to leaving the country. I understand that non submission of such information would be **a breach of the loan contract/agreement.**

I understand that in case I am abroad and the Standing Order Instruction has failed and no deduction can be effected from salary and my Retirement Savings Scheme (RSS), the matter will be treated as a case of defrauding the Association of its property. I understand that the Association will proceed with legal actions against me via the **Central Criminal Investigation Department and Interpol**. I understand that the Association will also inform my employer of the above matter with the assistance of Embassies and Ministry of Home Affairs in the relevant countries. I am aware of my rights and responsibilities as mentioned in the "Key Facts in Contracts (KFIC) and other Information for Loanees / Guarantors / Depositors" (Ref. KF2).

**I acknowledge having read and agreed the above terms and conditions in this loan contract and hereby declare that the information I have given on this loan contract is true and correct and also approve the loan amount as below:**

*\*Please write in words and in your own handwriting in the spaces provided: "Read and approved. Good for the sum of Rs..... in principal to which shall be added the accrued interest."*

\* **Wording** .....

**Applicant's Signature** ..... **Date**...../...../.....

**4.0****TERMS AND CONDITIONS FOR LOANS SECURED AGAINST RETIREMENT SAVINGS SCHEME (RSS).**

Applicants for loans will be required to pay a one off processing fee of **1 %** on the loan amount together with Mutual Solidarity Contribution (MSC) of **4.50 % - 6.00 %** to write off the loan in case of death. The effective date of the MSC is when the loan has been disbursed. Applicants will be charged Rs50 as Bank of Mauritius (MCIB) fee. Loan amount can be up to 100% of accrued RSS (capital + interest) (Refer to notes below). The MSC to be applied depends on age as follows:

SN.	AGE	MSC RATE - %	SN.	AGE	MSC RATE - %
1	Up to 45	4.50	3	More than 50 and up to 55	5.50
2	More than 45 and up to 50	5.00	4	More than 55	6.00

**Notes :**

- (i) Maximum repayment period is up to 240 months.
- (ii) **Loans against RSS for applicants aged 65 and above at the time of application:**
  - (a) No Mutual Solidarity Contribution is charged for those who are above 65 years age.
  - (b) In case of death for those who have taken loan at 4 (ii) above, loan outstanding balance shall be written off against the pledged RSS.
  - (c) In case of default in payment on the part of the loanee for those who have taken loan at 4 (ii) above for reasons other than death, outstanding loan balance will be immediately net off against the pledged RSS subject to rules of the Mutual Aid Association.
  - (d) The minimum loan application amount should not be less than Rs15,000. The disbursement amount should not be less than Rs5,000.

## 5.0 OFFICE USE CHECKLIST OF DOCUMENTS

SN	The following documents should be submitted:	CS (✓/X)	QC (✓/X)
1	Original & Photocopy of <b>applicant's National Identity Card and Birth Certificate (KYC record)</b> . Online Birth Certificate is acceptable.		
2	<b>Applicant's recent payslip</b> (not more than 1 month). <i>E-payslip is acceptable.</i>		
3	Letter from Ministry/Department certifying that applicant is: not under report, not on leave without pay, not involved in a police case, not on prolonged sick leave and also was not on prolonged sick leave recently. <b>Please note that the letter is valid for 4 weeks. E-certificate is acceptable.</b>		
4	Original & Photocopy of bank document showing bank account number and name of <b>applicant (if changed)</b> .		
5	Original & Photocopy of bank statement showing name and address / Utility Bill (CEB or CWA or Mauritius Telecom) - not more than 3 months old of <b>applicant</b> (If utility bill is not in name of <b>applicant</b> , a written confirmation and copy of NIC should be secured from the utility bill account holder) or any other document showing relation ( <b>KYC record</b> ). <i>E-bills are acceptable.</i>		
6	Letter of undertaking (where applicable).		
7	Retirement Savings Scheme (RSS) statement from the Association.		
8	Letter stating purpose of loan for any loan as from Rs1.5m.		
9	Documentary evidence for (i) home loan purpose; or (ii) application of any loan as from Rs3m.		
10	Letter for check-off to SICOM Ltd (applied for parastatal bodies).		
SIGNATURE			

### ADDITIONAL UNDERTAKING FOR THE FOLLOWING DEPARTMENTS

SN.	NAMES OF DEPARTMENT	SN.	NAMES OF DEPARTMENT
1	Private Secondary Education Authority (PSEA)	7	Small and Medium Enterprises Development Authority (SMEDA)
2	Mauritius Telecom (MT)	8	Pensioners Sicom
3	Mauritius Ports Authority (MPA)	9	Pensioners (Loans Based On More Than One Pension)
4	State Informatics Ltd (SIL)	10	Cotton Bay
5	National Transport Corporation - NTC (NRB)	11	Mauritius Network Services (MNS)
6	National Empowerment Foundation (NEF)		

## 6.0 LOAN APPLICATION PROCESSING

<b>6.1 ACKNOWLEDGEMENT / 'PEP'/'HNWI' / UNSC VERIFICATION</b> <b>1. Is customer a (i) 'PEP' (ii) 'HNWI'</b> Applicant 'PEP': YES: <input type="checkbox"/> NO: <input type="checkbox"/> Applicant 'HNWI': YES: <input type="checkbox"/> NO: <input type="checkbox"/> <b>2. UNSC check for Applicant (please tick)</b> <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> FALSE POSITIVE <b>3. Risk Category of Customer (please tick):</b> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High Reason for risk category : ..... Name : ..... Post:..... Signature: ..... Date:...../...../..... <b>'PEP'/'HNWI' / HIGH RISK Transaction authorized by Senior Management (Please delete as appropriate)</b> Signature: ..... Date:...../...../.....	<b>6.3 EDITING OF DATA:</b> Name : <input type="checkbox"/> Department: <input type="checkbox"/> Bank details : <input type="checkbox"/> Status : <input type="checkbox"/> Telephone No. <input type="checkbox"/> Email : <input type="checkbox"/> Address: <input type="checkbox"/> Others: <input type="checkbox"/> Maker (Name): ..... Post:..... Signature: ..... Date:...../...../..... Checker (Name):..... Post:..... Signature: ..... Date:...../...../..... <b>6.4 QUALITY ASSURANCE (QA) CHECK / ELIGIBILITY TEST</b> Passed <input type="checkbox"/> Failed <input type="checkbox"/> <b>Payment mode:</b> Cheque : <input type="checkbox"/> EFT : <input type="checkbox"/> Performed by: ..... Post: ..... Signature:..... Date: ...../...../..... <b>6.5 LOAN APPLICATION REVIEWED BY LOAN COMMITTEE MEMBERS</b> 1. Name : .....Post:..... Signature: .....Date:...../...../..... 2. Name : .....Post:..... Signature: .....Date:...../...../.....	<b>6.6 LOAN PAY OFF / INPUT / AUTHORISATION</b> <b>MSC not charged on previous loan</b> Rs..... <b>TOD Balance: (HACCBAL) Rs.....</b> <b>HPAYOFF :</b> Loan Type .....Rs..... Loan Type .....Rs..... Loan Type .....Rs..... Other deductions :Rs..... <b>Loan input by:</b> Loan No. (HOAACLA): ..... Name : .....Post:..... Signature: .....Date:...../...../..... <b>Loan authorized by :</b> Name: ..... Name : .....Post:..... Signature: .....Date:...../...../..... <b>6.7 LOAN REVIEWED BY:</b> <b>1. Senior Operations Officer (SOO)</b> Name : ..... Signature: .....Date:...../...../..... <b>2. Manager (Loans &amp; Deposits)</b> Name : ..... Signature: .....Date:...../...../.....
<b>6.8 CLIMATE RELATED AND ENVIRONMENTAL ASSESSMENTS</b> <b>Climate Risk Score :</b> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <b>Climate Risk Rating:</b> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Very High <b>Maker (Name):</b> .....Signature:..... Post.....Date: ...../...../..... <b>Checker (Name):</b> .....Signature:..... Post.....Date: ...../...../..... <b>Name (SOO):</b> .....Signature:..... Date: ...../...../..... <b>Approval of Senior Management in case of very high risk : Name</b> ..... <b>Post :</b> ..... <b>Signature:</b> ..... <b>Date:</b> ...../...../.....		