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2.0

THE MAURITHIS CIVIL SERVICE MUTUAL AID ASSOCIATION LTD

BRN : C10000071		5, Guy Rozemont	Square, P. Louis Email: m.c.s.mu	Tel. No.	213 6060	(30 line	s) Hotline.	212	4000	Fax		11 2441	
PERSON	AL LOAN	/ CONC	URRENT	PERSO	DNAL	L LO	AN AP	PLIC	CAT	ION	FOF	RM	PLN1/ CPL1 / 26.05.23
1.0 Of	fice Use	Person	al Loan	Con	curre	nt P	erson	al Lo	oan	(I	Please t	ick as a	ppropriate)
Loan Type:	Renewal:	New:	Rate of Int	erest	%	p.a	Loan	offset	: Yes]	No	
CIF:			L	OAN NO.									
Risk Categor	y of Customer	please tick):	Low Me	dium 🔲	High	Rea	son for ris	sk categ	gory : .				
_	t : Rs				_		-	_					
Checker (Nam	ne):	.Post:	Signature:	Dat	e:								
1.1 Loan A	mount Eligible	Rs:	C	lient inform	ed by p	hone w	vhen loar	n amou	unt is	differ	ent:	Yes	No_
	od (months) : _												
	me):						-	-					
		nents prior to pro	cessing of the loa	n application.	•					ŭ	·		of the original
1.2.1 1 ne ap	plicant agrees t	пш іне етріоув	er ve anowea to	ve communi	caiea in	ie pariic	iuurs oj i	ne wai	n wnei	iever i	equire	eu.	

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

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 to	ick): Single : Married: Divorced: (evidence to be attached)
Post Held	Monthly salary Rs
Dept/Ministry	Paysite Code / Pen No.
Tel. No. (Office)Tel. No. (Home)	
Loan Amount Rs	Refund periodmonths.
	Medical purposes, Travelling abroad, (Please specify), Others :
Bank Name B	ank Branch
Bank A/c No.:	
Home Address :	
Relationship with Guarantor (s) (Please tick if applicable):(1) Spous (5) Mother (6) Others (specify)	se (2) Son (3) Daughter (4) Father
Did you derive net income exceeding Rs15m during any financial ye dependent children)? Yes \square No \square	ear or own assets above Rs50m (including assets owned by spouse and

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, the undersigned, hereby apply for a loan of Rupees (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

I also authorize the MCSMAA Ltd to submit my 'Know Your Customer' (KYC) records to the KYC Registry of the Bank of Mauritius.

and hereby, consequently authorise the deduction of the monthly loan abatement from my salary/pension.

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 hereby authorize the MCSMAA Ltd to make necessary enquiry from the Mauritius Credit Information Bureau (MCIB) regarding any loan facilities previously

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

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							
	TOTAL						

2.3 EMAILING OF STATEMENTS OF ACCOUNT (BORROWER & GUARANTORS)

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)					
	DETAILS OF ADDITIONAL INCOME	MEMBER (Rs)	SPOUSE (Rs)	TOTAL (Rs)			
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						
4	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						
Total additional income per month							

4	Income from other	job like	part-time	garde	ning/d	riving/	/sale o	f											
	garments, private tui	tion/othe	rs(to spec	ify)															
5	Old aged /Other pens	sion																	
6	Travelling allowance	s / grant	and other	r incon	ne														1
5 6 7	Interest receivable or																		1
	Total add	itional ir	come pe	r mon	th														1
Name	of Spouse:							•••••	•••••	•••••	•••••	•••••	······		••				
	o. of Spouse : ure of spouse:			<u> </u>					•••••	•••••	Da	te :	•••••			•••••			
Tel No	o./Mobile of Spouse	:	•••••	•••••	•••••	•••••	•••••		Ema	il of S	Spous	e :	• • • • • •	•••••	••••	•••••	• • • • • • • •	•••••	••
Signat	ure of Applicant :									• • • • • •			• • • • • •	••••					

		PLN1/ CPL1 / 26.05.23
3.0 PART 3.0	- CONTRACT: TO BE FILLED IN AND SIGNED B	BY APPLICANT AND GUARANTORS
AC	KNOWLEDGEMENT: UNDERTAKING TO RI	EFUND BY INSTALMENTS
	m the Association the sum of Rupees	
By-laws.	as loan, subject to the condition	
from my salary, fees, allowances at Mauritius Civil Service Mutual Aid represent an instalment of the prin- Association shall have the right,	equal monthly and consecutive instalments of Rs	e refund being made otherwise and on being accepted by the as per the reimbursement table of the Association and shall t shall be paid not later than the 28 th of each month. The
However, the monthly loan instaln Contribution, prior to granting of the any interest due shall become im-	In maturity date may be extended or reduced to take into accept ment will remain the same. I undertake to pay all charges in the loan. In case of any default in payment of any instalment amediately due and demandable, at the option of the Assopolicies and/or procedures at any point in time. The Asproved and granted.	at the due date, the entire balance of the loan together with ociation. The Association reserves the right to make
Scheme (VRS) or for any other rea my employer, Accountant General, to use part or whole of my retireme give an unequivocal authorization General to disclose to the Mutual A	In loan balance, as may be required, together with any interest ason and hereby authorise that the amount due be deducted from the second state of the second state of the second state of the second state of the second s	om my gratuity, lump sum or any amount payable to me by ent of pension. I understand that on retirement I undertake as to reduce the monthly deduction from my pension. I also be Association. I do hereby give consent to the Accountant
	verseas leave, I shall communicate in writing to the Associ such information would be a breach of the loan contract/ag	
	ad and the Standing Order Instruction has failed and no deduc	
	the Association of its property. I understand that the Association Investigation Department and Interpol. I understand	
	Embassies and Ministry of Home Affairs in the relevant cour	
	Key Facts in Contracts (KFiC) and other Information" (Re Contracts (KFiC) and other Information for Loanees / Guar	
	and agreed the above terms and conditions in this loan contract is true and correct and also ap	
	and in your own handwriting in the spaces provid	led: "Read and approved. Good for the sum of
<u> </u>	al to which shall be added the accrued interest".	
** Wording		
Applicant's Signature		. Date/
3.1	PART 3.1 TO 3.4 TO BE FILLED IN BY G	GUARANTOR/S
DETAILS	GUARANTOR 1 - CIF:	GUARANTOR 2 - CIF:
Surname (Mr/Mrs/Miss):		
First Name		
Place of Birth		
Surname at Birth		
Marital Status: (Please tick as appropriate)	Single / Married / Divorced / (evidence to be attached)	Single / Married / Divorced / (evidence to be attached)
NIC No.		
Dept/Ministry		
Post Held Poy Site Code		

/ Mother

Spouse / Son / Daughter

owned by spouse and dependent children)?
Yes No

/ Father

Others (specify)

Did you derive net income exceeding Rs15m during any

financial year or own assets above Rs50m (including assets

/ Father

/ Son / Daughter

Others (specify)

Did you derive net income exceeding Rs15m during any

financial year or own assets above Rs50m (including assets

Spouse

Home Address

Tel. No.: Office, Home, and Mob No.

State relationship with Applicant or other

Guarantors (to mention which Guarantor)
(Please tick if applicable)

Email address

Income & Wealth Status

DETAILS	GUARANTOR 3 - CIF:						GUARANTOR 4 - CIF:																					
Surname (Mr/Mrs/Miss):																												
First Name																												
Place of Birth																												
Surname at Birth																												
Marital Status: (Please tick as appropriate)	Sing	le /	Marrie	ed/D	ivorce	d /(ev	idence	e to l	be ati	tache	ed)		Sing	gle	/ M	Iarr	ied	/ D	ivor	ced	/ (e	vide	nce	to b	е а	ttach	ed)	
NIC No.																												
Dept/Ministry																												
Post Held																												
Pay Site Code																												
Home Address																												
Tel. No.: Office , Home, and Mob No.																												
State relationship with Applicant or other Guarantors (to mention which Guarantor) (Please tick if applicable)		ouse Others			/ Dai						Moth 	er	S		se hers												othe	r
Email address																												
Income & Wealth Status	finar	icial y	ear or	owi	incom n asset d deper o	s abov	e Rs5	0m					fina owr	ınci	ou do al ye by sp	ar	or o	wn nd d	asse	ets a	bov	e Rs	50r	n (i				
DETAILS	GUA	ARAN	TOR	5	- CIF	:							G	U A	RA	NT	OR	6 -	- CI	F:								
Surname (Mr/Mrs/Miss):																												
First Name																												
Place of Birth																												
Surname at Birth																												
Marital Status: (Please tick as appropriate)	Single / Married/Divorced /(evidence to be attached)			S	ing	le /	Ma	arrie	d /	Div	orce	ed /	(evi	den	ce to	o be	atta	ched	<i>l</i>)									
NIC No.																												
Dept/Ministry																												
Post Held				1	_			_					<u> </u>															
Pay Site Code													\perp L															
Home Address																												
Tel. No.: Office, Home, and Mob No.																												
State relationship with Applicant or other Guarantors (to mention which Guarantor) (Please tick if applicable)		spouse Others			n / I	-						er		•	oouse others						_					/ M o		•
Email address																												
Income & Wealth Status	finar	Did you derive net income exceeding Rs15m during a financial year or own assets above Rs50m (including assowned by spouse and dependent children)? Yes No																										
I/We hereby authorize the MCSMAA Ltd to make necessary enquiry from the Mauritius Credit Information B financial institution in Mauritius and to provide the MCIB with relevant information on the present loan facilit MCIB. I/We also authorize the MCSMAA Ltd to submit my 'Know Your Customer' (KYC) records to the KY						lities.	I/We	hav	e bee	n ir	ıforn	ned t	y th	e MO	•			_										
I/We am/are fully aware of the provisions applicable under the Data Protection Act. I/We consent that you use, The purpose of data collection is to process and monitor the loan. It is mandatory to provide data, else MCSM all data will be destroyed as per legal requirements. I/We agree to the MCSMAA Ltd sending me an SMS/Text Messages regarding my loan account on my above submitted by me to the MCSMAA Ltd is duly registered under my name with my mobile service provider. I/W any third party as a result of this number being false or otherwise inexact. I/We undertake to inform immediatel the personal data provided above. I/We agree to receive statement of loans at regular intervals from the MCS M					MAA e mol /We u tely in	Ltd woile photographic photographic transfer in the contraction of the	vill inone ake ng t	not pr numl to cor he Me	ber.	I/W nsate Mutu	e loa Ve so e MC ual A	n. C lemi CSM. id A	once nly at AA I	the a ffirm Ltd in iation	that the the	the eve	abov	s be	en pr nobile omes	num liable	sed, aber e to							
I/We am/are fully aware that providing an under section 17(C)(6) of the Financial In exceeding 5 years. I/We am/are/am not	telligen	ice and	Anti-l	Mone	y Laur	dering	Act 20	002 a	and sh	hall b	e liab	le to	a fine	not	exce	edin	ıg M	UR :	500,	000 a	and t	o imp	pris	onme	ent i	for a		
I/We am / are aware of the 'Complaints Har	ndlina l	Policy	and Pro	ocedu	ires' av	ailable	on ww	w.m	csmu	ıtuala	id.co	m																
i we am the aware of the Complaints Ha	nunnig i	oney																										

As guarantor, I bind myself, jointly and in solido with the Applicant and also renounce to my "benefice de discussion", to repay in full to the Mauritius Civil Service Mutual Aid Association Ltd, through salary deduction, any balance which may be due to the Association in respect of the loan and the interest thereon, should the Applicant resign, or be dismissed from the service, or otherwise fail to repay the said loan in terms of this agreement. I also give an unequivocal authorization to my employer to make salary deduction as requested by the Association. I have read and understood the "Key Facts in Contracts (KFiC) and other Information" for both borrower (Ref. KF1) and guarantors (Ref. KF3). 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 am aware that as guarantor, I am liable for the full amount of the debt of the borrower as if I am the borrower myself. I have been informed that I may seek independent legal or other advice before signing this guarantee. I sign this document as guarantor in full knowledge of its intent and purpose and of my liabilities. I understand I cannot opt out of this loan contract once the application has been processed unless the loan has been fully settled.

PLN1/CPL1 / 26.05.23
3.3 GUARANTOR/S PART – (not applicable for Mutual Aid Quick Loan)
As sole guarantor */ guarantors * of Mr/Mrs/Miss
I/We undertake not to revoke this instruction without the written consent of the M.C.S. Mutual Aid Association Ltd.
3.4
As guarantor/s I/We acknowledge having read and agreed the above terms and conditions in this loan contract and hereby declare that the information I/we have given on this loan contract is true and correct and also approve the loan amount as below:
TO ACT AS SOLE GUARANTOR - Note: This is not applicable for a loan above Rs1 million.
I Mr/Miss/Mrs agree to stand as sole guarantor.
Signature of sole guarantor:
** Please write in WOPDS and in your own handwriting in the spaces provided: "Pead and approved

** Please write in WORDS and in your own handwriting in the spaces provided: "Read and approved." Good for the sum of Rupees..... in principal to which shall be added the accrued interest". **GUARANTOR 1** ** Wording: Signature: Name: Date: **GUARANTOR 2** Signature: ** Wording: Name: Date:/..../.... **GUARANTOR 3** Signature: ** Wording: Name:/..../.... **GUARANTOR 4** ** Wording: Signature: Name:/...../.... **GUARANTOR 5** Signature: ** Wording: Name: Date:/...../.... **GUARANTOR 6** Signature: ** Wording: Name: Date: . / /

4.0 LOAN APPLICATION PROCESSING

FOR	OFFIC	C PSA DEC 1

4.0 Eom millermon Rock	FOR OFFICE CSE	
4.1 ACKNOWLEDGEMENT / 'PEP'/'HNWI' / UNSC VERIFICATION	4.2 MCIB VERIFICATION Pof No.	4.6 LOAN PAY OFF / INPUT / AUTHORISATION
1. For Applicant Is customer a (i) 'PEP' (ii) 'HNWI'	Maker (Name): Post	MSC not charged on previous loan Rs
UNSC VERIFICATION	Ref No:	AUTHORISATION MSC not charged on previous loan Rs
Signature:Date:/ 'PEP'/'HNWI' Transaction authorized by Senior Management (Please delete as appropriate)	Signature: Date:/	2. Manager (Loans & Deposits) Name:
Signature:Date:/ 5.0 CHECKLIST OF DOCUMENTS	Signature	Date:/

SN	The following documents should be submitted:	CS (✓ /X)	QC (✔/X)
1	Original & Photocopy of applicant's National Identity Card and Birth Certificate (KYC record). Online Birth Certificate is acceptable.		
2	Original & Photocopy of applicant's recent payslip (not more than 1 month). Downloaded payslip will only be accepted with official seal, name, signature, date and post of signing officer.		
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. <i>Please note that the letter is valid for 4 weeks</i> .		
4	Original & Photocopy of bank document showing bank account number and name of applicant (if changed).		
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 applicant (If utility bill is not in name of applicant , a written confirmation and copy of NIC should be secured from the utility bill account holder) or any other document showing relation (KYC record).		
6	Original & Photocopy of guarantor/s' National Identity Cards and Birth Certificates (KYC record). Online Birth Certificate is acceptable.		
7	Original & Photocopy of guarantor/s' recent payslips (not more than 1 month). Downloaded payslip will only be accepted with official seal, name, signature, date and post of signing officer.		
8	Original & Photocopy of bank statement showing name and address / Utility Bill (CEB or CWA or Mauritius Telecom) - not more than 3 months old of guarantor /s (If utility bill is not in name of guarantor /s, a written confirmation and copy of NIC should be secured from the utility bill account holder) or any other document showing relation (KYC record).		
9	Letter of undertaking (where applicable).		
10	Letter stating purpose of loan for any loan as from Rs1.5m.		
11	Documentary evidence for (i) home loan purpose; or (ii) application of any loan as from Rs3m.		
12	Letter for check-off to SICOM Ltd (applicable for parastatal bodies).		
	SIGNATURE		

6.0 ADDITIONAL UNDERTAKING FOR THE FOLLOWING DEPARTMENTS

SN.	NAMES OF DEPARTMENT	SN.	NAMES OF DEPARTMENT
514.		514.	
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)		TD/SB/21.03.23