

2.7 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.

2.8 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.

2.9 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 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				

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

NIC No. of Spouse :

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

Name of Spouse:

Signature of spouse: **Date :**

Signature of Applicant :

2.10 CLIMATE RELATED AND ENVIRONMENTAL ASSESSMENTS

1. Are these climate-related events known to occur in the area of the property offered as security? Yes No

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		

2. Is the property offered as security located near any water bodies? Yes No

If yes, please specify: Sea coastal Near river Near canal Near wetland

3. Have climate-related events affected this property or neighboring properties in the past 5 years? Yes No

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

I acknowledge having received from the Mauritius Civil Service Mutual Aid Association Ltd (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 Association; each such instalment shall be calculated as per the reimbursement 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 28th 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 and I understand that the loan facilities will be at my disposal only after the Association has received a copy of the legal document witnessing that a first rank charge/mortgage has been duly registered and inscribed in the Association’s favour on the property offered as security.

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 and will be set off against my accrued RSS benefits or pledged fixed deposit(s) and/or enforced against the property given as security.

I also undertake to refund any such loan balance, as may be required, together with any interest due in case of early retirement via a Voluntary Retirement Scheme (VRS) or for any other reason and hereby authorise that the amount due be deducted from my gratuity, lump sum or any amount payable to me by my employer, Accountant General, SICOM Ltd or such other institutions responsible for payment of pension. I understand that on retirement I undertake to use part or whole of my retirement gratuity to make a part-payment on my loan balance so as to reduce the monthly deduction from my pension. 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, 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 have read and understood the “Key Facts in Contracts (KFIC) and other Information” (Ref. KF1). 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 FOR OFFICE USE CHECK LIST OF DOCUMENTS

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	Applicant’s recent payslip / pension slip (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. <i>Please note that the letter is valid for 4 weeks. E-certificate is acceptable.</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). <i>E-bills are acceptable.</i>		
6	Original and photocopy of Title Deed and/or Notarial Deed certifying that land/property belongs to applicant. (PIN number should be included).		
7	Site Plan.		
8	Location Plan.		
9	Valuation Report.		
10	Original and photocopy of Marriage Certificate (as applicable).		
11	Original & Photocopy of spouse’s National Identity Card and Birth Certificate (KYC record) (as applicable). Online Birth Certificate is acceptable.		
12	Spouse’s recent payslip (not more than 1 month) (as applicable). <i>E-payslip is acceptable.</i>		
13	Original and photocopy of National Identity Card of co-owner or usufruct holder(s).		
14	Letter for check-off to SICOM Ltd (applicable 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)		

5.0 FOR OFFICE USE LOAN APPLICATION PROCESSING

<p>5.1 ACKNOWLEDGEMENT / 'PEP'/'HNWI' / UNSC VERIFICATION</p> <p>1. Is customer a (i) 'PEP' (ii) 'HNWI' Applicant 'PEP': YES: <input type="checkbox"/> NO <input type="checkbox"/> Applicant 'HNWI': YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>2. UNSC check for Applicant (please tick) <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> FALSE POSITIVE</p> <p>Name : Post:..... Signature: Date:/...../.....</p> <p>3. Risk Category of Customer (please tick): <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High</p> <p>Reason for risk category :</p> <p>'PEP'/'HNWI'/HIGH RISK Transaction authorized by Senior Management (Please delete as appropriate)</p> <p>Signature:Date:...../...../.....</p>	<p>5.4 MAXIMUM LOAN GRANTABLE</p> <p>(i) Loan amount applied for (LA) Rs.....</p> <p>(ii) Valuation of Property (VP) Land : Rs Building: Rs..... Construction : Rs Finishing work: Rs.....</p> <p>Total : Rs.....(VP)</p> <p>% of loan (LA/VP) :</p> <p>Prepared by :..... Post:.....Signature:</p> <p>Date:/...../.....</p> <p>Checked by: Post:.....Signature:.....</p> <p>Date :/...../.....</p>	<p>5.7 LOAN PAY OFF / INPUT / AUTHORISATION</p> <p>MSC not charged on previous loan Rs.....</p> <p>TOD Balance: (HACCBAL) Rs.....</p> <p>HPAYOFF : Loan TypeRs..... Loan TypeRs..... Loan TypeRs.....</p> <p>Other deductions :Rs.....</p> <p>Loan input by: Loan No. (HOAACLA):</p> <p>Name: Post:..... Signature: Date:/...../.....</p> <p>Loan authorized by :</p> <p>Name: Post:..... Signature: Date:/...../.....</p>
<p>5.2 MCIB VERIFICATION</p> <p>Ref No:.....</p> <p>Maker (Name):Post:..... Signature: Date:/...../.....</p>	<p>5.5 QUALITY ASSURANCE (QA) CHECK / ELIGIBILITY TEST</p> <p>Passed <input type="checkbox"/> Failed <input type="checkbox"/></p> <p>Payment mode: Cheque : <input type="checkbox"/> EFT : <input type="checkbox"/></p> <p>Performed by: Post:..... Signature:..... Date :/...../.....</p>	
<p>5.3 EDITING OF DATA:</p> <p>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"/></p> <p>Maker (Name):Post :</p> <p>Signature:.....Date:/...../.....</p> <p>Checker (Name):Post :</p> <p>Signature:.....Date:/...../.....</p>	<p>5.6 LOAN APPLICATION REVIEWED BY LOAN COMMITTEE MEMBERS</p> <p>(1) Name:.....Post:..... Signature:..... Date :/...../.....</p> <p>(2) Name:..... Post:..... Signature:..... Date :/...../.....</p>	<p>5.8 LOAN REVIEWED BY:</p> <p>1. Senior Operations Officer (SOO) Name :</p> <p>Signature: Date:/...../.....</p> <p>2. Manager (Loans & Deposits) Name :</p> <p>Signature: Date:/...../.....</p>

5.9 CLIMATE RELATED AND ENVIRONMENTAL ASSESSMENTS

Climate Risk Score : 1 2 3 4

Climate Risk Rating: Low Medium High Very High

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

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

Name (SOO):..... Signature:..... Date:/...../.....

Approval of Senior Management in case of very high risk : Name..... Post :

Signature:..... Date:...../...../.....