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

HOUSEHOLD FIXED CHARGE LOAN APPLICATION FORM

HOUSEHOLD FIXED CHARGE LOAN APPLICATION FORM HAREF 13.07,24							
1.0 Office Use RSS Monthly contribution: Rs							
CIF: LOAN NO. LOAN NO.							
Maker (Name):							
Checker (Name): Date: Date:							
1.1 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 Ioan 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)							
First Name Email:							
N.I.C. No.							
Place of BirthMarital Status (Please tick): Single: Married: Divorced: (evidence to be attached)							
Dept/Ministry							
Tel. No. (Office)							
Post Held Monthly salary Rs							
Loan Amount Rs							
Name of Spouse (if civilly married):							
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 No							
Are you a Politically Exposed Person (PEP) or Family member of a PEP or close associate of PEP? Yes No							
2.1 TO BE FILLED BY SPOUSE							
Surname (Mr/Mrs):							
First Name: Place of Birth:							
N.I.C. No. Date of Marriage:							
- Control of the Cont							
Matrimonial Regime : Email :							
Post Held: Monthly salary Rs							
Organisation operational since:							
Tel. No. (Office)							
Bank NameBank Branch							
Bank A/c No.:							
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 No Are you a Politically Exposed Person (PEP) or Family member of a PEP or close associate of PEP? Yes No Home Address:							

HFACL / 15.07.24		
I/We, the undersigned, hereby apply for a loan of Rupees		
Association (MCSMAA Ltd) in accordance with Articles 1 to 6 of MCSMAA Ltd and hereby, consequently authorize the deduction of	f the By-Laws of the Association a	nd Article 7.1.1 of the Constitution of the
I/We hereby authorize the MCSMAA Ltd to make necessary enqui facilities previously granted to me/us by any financial institution in loan facilities. I/We have been informed by the MCSMAA Ltd of th I/We also authorize the MCSMAA Ltd to submit my/our 'Know You	Mauritius and to provide the MCII e functions of the MCIB.	3 with relevant information on the present
I/We am/are fully aware of the provisions applicable under the Dat keep the details given to you in a database. The purpose of data coll MCSMAA Ltd will not process the loan. Once the application has be	ection is to process and monitor the	loan. It is mandatory to provide data, else
I/We agree to the MCSMAA Ltd sending me/us an SMS/Text Mess I/We solemnly affirm that the above mobile number submitted by m mobile service provider. I/We undertake to compensate MCSMAA being false or otherwise inexact. I/We undertake to inform immediate the personal data provided above. I/We agree to receive statement of the compensation of the personal data provided above.	ne/us to the MCSMAA Ltd is duly r Ltd in the event it becomes liable to tely in writing the MCS Mutual Aid	egistered under my/our name with my/our o any third party as a result of this number Association Ltd in case of any changes in
given above. I/We am/are fully aware that providing any false or misleading information requirements, I/We shall commit an offence under section 17I(6) of liable to a fine not exceeding MUR 500,000 and to imprisonment finvolved in a police case / under prosecution before a court of aware of the 'Complaints Handling Policy and Procedures' available	the Financial Intelligence and Anti- for a term not exceeding 5 years. In law / subject to any freezing order.	Money Laundering Act 2002 and shall be We am/are/ am/are not / under report/
	DEDUCTIONS OF APPLICANT A	AND SPOUSE
Monthly Income	Applicant (Member) Total Rs)	Spouse (Non-member) Total (Rs)
Salary + Compensation + travelling + permanent allowances		
Less Monthly Deductions from payslips	Applicant (member) Total (Rs)	Spouse (Non member) Total (Rs)
1.		
2. 3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
Total Deductions (Rs)		
Net Salary (Rs)		
% deduction		
	OFFERED AS SECURITY	(Title Deed to be Produced)
1. Land/Property to be mortgaged to MCSMAA Ltd:		
Area:		
2. Is applicant owner of Land/Property? Yes No	If No. Name of Owner	
What is the status of the Land/Property? Freehold [
Indicate remaining period of Lease or Prescription da 3. Is Land/Property to be given as security already mor	rtgaged? Yes 🔲 No 🔲	If yes, please give documentary
evidence:		
	<u> </u>	
5. Does another person have an interest in the Land/Prop documentary evidence of loan amount and institution Usufruct Owner Co-Owner Heir	concerned:	
6. Will property be used as your personal residence and Please give details:	* *	
Note: The applicant is strongly advised not to sign any thin MCSMAA and a loan offer is made to him/her by MCSM.		application is considered by

	1 2 1 1 10 0	777 0								111027 1010712
2.3	Authorisation of Co-Owner/Usufruct-Owner:									
	Title: Mr/Mrs/Miss	Title: Mr/Mrs/Miss						••••••		
	Name :	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	•••••		
	NID No. (other Party):								\neg	
	•			I		I	1 1			
	Address (if different) Tel. No.:									
	Signature (other Party):			• • • • • • •	•••••	•••••••	Da	te	//	•••••
2.4	Authorisation of Co-O									
	Title: Mr/Mrs/Miss									
	Name :	······ <u>·····</u>	• • • • • • • • • • • • • • • • • • • •	• • • • • • •	•••••	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	<u> </u>	
	NID No. (other Party):									
	Address (if different)				•					
	Tel. No.:									
	Signature (other Party): Authorisation of Co-O			• • • • • • •	•••••	•••••••	Da	te	/ /	•••••
2.5										
	Title: Mr/Mrs/Miss									
	Name :								<u></u>	
	NID No. (other Party):									
	Address (if different)	:	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	•••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • •		
	Tel. No.:	• • • • • • • • • • • • • • • • • • • •	. Mobile N	No.:	• • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	Email	:		
	Signature (other Party):	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •				Da	te	/ /	,
2.6	Signature (other Party):									
	Title: Mr/Mrs/Miss	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		•••••	• • • • • • •	• • • • • • • • • •		•••••	
	Name :									
	NID No. (other Party):									
	Address (if different)									
	Tel. No.:									
	Signature (other Party):									
							Da	ie	• • • • • • • • • • • • • • • • • • • •	•••••
2.7	REQUEST FOR OFF orise the M.C.S. Mutual Aid						ma rrrith M	utual A	id and athon inst	itutions (os non
	y) from the loan applied with			t my e	xistilig loa	iis/airea	us with M	utuai A	iu anu omei msi	itutions (as per
2.8	DECLARATION FRO			NIC W	тти оти	IED IN	CTTTITI	ONG (I	E ADDI ICADI	E)
	e commitments or loans with					IEK IIV	5111011	.0115 (1	r Afflicabi	1E)
SN.	Lending Institution	Purpose of Loan	Original L Amount (Term (Months)	Arre	ars as at (Rs)	I	oan Balance as at (Rs)	To Offset (Rs) (Yes/No)
1										
2										
3										
	TOTAL	1								

Reasons for arrears: ..

2.9 EMAILING OF STATEMENTS OF ACCOUNT

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.

2.10 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.

2.11 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)								
511	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								

6	Travelling allow	vances / grant and other incom	ie			
7	Interest receivab	ole on fixed deposits/Savings/	Bonds			
	Total a	additional income per mo	nth			
I/We h	nereby declare th	at the above information is	true and correct.			
Name	of Spouse:		Sig	nature of spouse:	Date	:
Signat	ture of Applica	nt :		Da	te :	•••
Ci an gi <u>Co</u> mo I a be er	ivil Service Mutual A d the interest thereof we an unequivocal a ontracts (KFiC) an entioned in the "Key am aware that as een informed tha mprunteur' in full	bind myself, jointly and in solide Aid Association Ltd, through salan, should the Applicant resign, or uthorization to my employer to not other Information. For both Facts in Contracts (KFiC) and other I may seek independent knowledge of its intent and thange of matrimonial regime.	be dismissed from the s nake salary deduction as borrower (Ref. KF1) as ther Information for Loa for the full amount legal or other advi	g order, any balance which mervice, or otherwise fail to repose requested by the Association and guarantors (Ref. KF3). nees / Guarantors / Depositor of the debt of the borrouse before signing this gliabilities. I agree to refur	pay be due to the Associance the said loan in term on. I have read and und I am aware of my rights (Ref. KF2). Wer as if I am the boundary of the loan balance (but he was in the loan balanc	ation in respect of the loan as of this agreement. I also lerstood the "Key Facts in this and responsibilities as corrower myself. I have this document as 'Co- toased on joint income) in
	0	ng read and agreed the a iven on this loan contract				•
		WORDS and in your ownin principal to				oved. Good for the
SPOU	SE Name :	** Wording:				Signature:

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

Date:/..../

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 RSF 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 agree to refund the loan balance (based on joint income) in case of divorce or change of matrimonial regime. 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).

*Please write in words and in your own handwriting in the spaces provided: "Read and approved. Good for the sum of

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:

Rs in princip	al to which shall be added the accrued intere	st."
* Wording		
Applicant's Signature		Date//
4.0 LOAN APPLICATION PROCES	SING FOR OFFICE	USE
4.1 ACKNOWLEDGEMENT / 'PEP'/'HNWI' / UNSC VERIFICATION 1. For Applicant Is customer a (i) 'PEP' (ii) 'HNWI' Applicant 'PEP': YES: NO Applicant 'HNWI': YES NO Applicant (please tick)	4.3 EDITING OF DATA: Name: Department: Bank details: Status: Telephone No.: Email: Address: Others: Maker (Name): Post: Signature: Post: Checker (Name): Post: Signature: /. 4.4 MAXIMUM LOAN GRANTABLE (i) Loan amount applied for (LA) Rs. (ii) Valuation of Property (VP) Land: Rs. (VP) % of loan (LA/VP): Signature: Manager (Corporate) Date:	4.5 QUALITY ASSURANCE (QA) CHECK

MSC r Rs TOD H Rs	OAN PAY OFF / INPUT / UTHORISATION not charged on previous :		Loan input by: Loan No. (HOAACLA): Name: Post: Signature: Date:	N REVIEWED r Operations (Officer (SO	•••••
	Г ОГГ . Гуре	Rs	Name: 2. Manag	ger (Loans &	Deposits)	
Loan T	Гуре	Rs				· • •
	Гуреdeductions :Rs		Signature: Date:// Signature	::)ate:/.	/
Loan A Name	:B. SPOUSE	N		Da		/
			eriod: months Rate of Interest:%		••••••	
	<u>:</u>		Manager (Finance) Signature :	Da	<u>te:/</u>	/
5.0	CHECK LIST OF DO					
SN	The following doc			1 1.0.	CS (□/X)	QC (✔/X
1	0	1.	cant's National Identity Card and Birth C ificate is acceptable.	ertificate		
2	Applicant's recen acceptable	t payslip / p	ension slip (not more than 1 month). E_{-1}	payslip is		
		• •	certifying that applicant is: not under report, no ice case, not on prolonged sick leave and also we	1		

prolonged sick leave recently. Please note that the letter is valid for 4 weeks. E-certificate is acceptable. Original & Photocopy of bank document showing bank account number and name of applicant (if 4 changed). 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 5 confirmation and copy of NIC should be secured from the utility bill account holder) or any other document showing relation (KYC record). E-bills are acceptable. Original and photocopy of Title Deed and/or Notarial Deed certifying that land/property belongs to 6 applicant. (PIN number should be included). 7 Site Plan. 8 Location Plan. 9 Valuation Report. 10 Letter of status of employment of spouse. Original & Photocopy of spouse's National Identity Card, Marriage Certificate and Birth 11 Certificate (KYC record) (as applicable). Online Birth Certificate is acceptable. Payslip of spouse for 6 months (as applicable). E-payslips are acceptable. 12 13 Original & Photocopy of bank document showing bank account number and name of spouse. 14 Original and photocopy of Bank Statement of **spouse** for last 6 months. Completed check off form or standing order of applicant's **spouse**. 15 Original and photocopy of National Identity Card of co-owner or usufruct holder(s). 16 Letter for check-off to SICOM Ltd (applicable for parastatal bodies). 17

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)		

TD/NR/SB/11.07.24