BRN: C10000071

THE MAURITIUS CIVIL SERVICE MUTUAL AID ASSOCIATION LTD

5, Guy Rozemont Square, P. Louis Tel. No. 213 6060 (30 lines) Hotline.

Email: m.c.s.mutualaid@intnet.mu Web site:www.mcsmutualaid.com

MUTUAL AID HOME LOAN APPLICATION FORM FOR TRAINEES / STUDENT NURSES / PROBATIONERS FROM CIVIL SERVICE

MAHL/TN / 15.07.24

Fax No. 211 2441

212 4000

1.0 <u>Offi</u>	ce Use					
RSS Monthly contributi	ion: Rs	Rate of In	terest	% p.a I	Loan offset : Yes	No
CIF:		LOAN	NO.			
Maker (Name):		. Post: Si	gnature:	Date:		
Checker (Name):		.Post:Si	gnature:	Date:		
1.1 Loan Amount E	ligible Rs:	Client i	nformed by phon	e when loan am	ount is different:	Yes D
Refund Period (mon	ths):	Maker (Name):	Post	: Signat	ture: I	Date:/
		Post:				
1.2 Important Note		eserves the right to contact o processing of the loan ap		nent/Accountant Ge	eneral/SICOM Ltd for v	verification of the original
1.2.1 The applicant		oloyer be allowed to be co		articulars of the l	loan whenever requ	ired.
		vice, M.C.S. Mutual Aid				
2.0 P	ART 2.0 TO 3	3.0 TO BE FILLE	D IN BY APPI	LICANT (IN E	BLOCK LETTER	(S)
Surname (Mr/Mrs/	/Miss):			Surname at	t Birth:	
First Name				Email :		
N.I.C. No.						
		. Marital Status (Please tick): Single :	Married:	Divorced:	(evidence to be attached)
Post Held			Mon	thly salary Rs		
Dept/Ministry			Paysi	ite Code / Pen	No.	
Tel. No. (Office)		Tel. No. (Home).	M	lobile No.	5	
Loan Amount Rs.			Refu	nd period		months.
Name of Spouse (i	if civilly married):		P	ost Held by Sp	ouse :	
	/					
Bank Name			Bank Branch			
Bank A/c No.:						
Home Address :	• • • • • • • • • • • • • • • • • • • •					
(5) Mother	uarantor (s) (Pleas	se tick if applicable):(1) \$ 5) Others (<i>specify</i>)	Spouse (2)			4) Father
Did you derive net in dependent children)?	rcome exceeding R Yes	s15m during any financ No	ial year or own ass	sets above Rs50n	n (including assets	owned by spouse and
		P) or Family member of				
I, the undersigned, hereby	apply for a loan of R	upees				
	e By-Laws of the Ass	pension. fro				
in Mauritius and to provide the	MCIB with relevant infor	enquiry from the Mauritius Credit mation on the present loan facilitie to the KYC Registry of the Bank of	s. I have been informed by			

I have been informed by the MCSMAA Ltd 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 MCSMAA Ltd in a database solely for the purpose of the processing of the present loan application. The purpose of the 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 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 hereby declare that I am applying for the home loan for the purchase*/construction of a first*/second house and that I have */ have not * availed of credit facilities at other financial institutions for purchase / construction of a first / second housing unit * (supporting documents attached). (*delete as appropriate)

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 hereby undertake to join the Association's Retirement Savings Scheme and to contribute Rs....... monthly.

I am aware of the 'Complaints Handling Policy and Procedures' available on www.mcsmutualaid.com

PART 2.1	MONTHLY IN	ICOME / I	DEDUCTIO	NS OF	APPLI	[CAN]	Γ	
	thly Income					Total ((Rs)	
Salary + Compensation Less Monthly Deducti	one & Other lean de	ductions				Total ((D g)	
1.	ons & Other roan de	ductions				Total (<u>(K5)</u>	
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
Total Deductions (Rs)								
Net Salary (Rs)								
% Debt / income (≤ 50%)								
PART 2.2 DESCRIPT	ON OF LAND	FFERED	AS SECUR	ITY (Tit	tle Dec	ed to b	e Produc	ed)
Land to be mortgaged to MCSN								
Area:								
2. Is applicant owner of property?								
What is the status of the land?								
Indicate remaining period of Le								
3. Is land to be given as security a	•	_				give de	tails:	
4. Construction Site Address: Same	e as (1) Above	\Box (2) Ne	ew Address .					
5. Other Security: Yes No		ise provide	details					
6. In case of purchase (land/proj		C 1: 10	,,					
(i) has a 'bordereau'/Deed of	•							
(ii) indicate (a) Proposed Purcl								
(iii) Name of Vendor	• • • • • • • • • • • • • • • • • • • •							
Address of Vendor								
7. Does another person have an int		<u> </u>			_	-		
Usufruct Owner			rs					
8. Will property be used as your po			•		•			
Please give details:								
application is considered by MCSMAA					tne ian	a/prope	rty) before	unis
2.3 Authorisation of Co-Own			<u> </u>					
Title : Mr/Mrs/Miss		• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	•••••		
Name :							•••••	
NID No. (other Party):								
Address (if different):								
Tel. No. :								
Signature (other Party): 2.4 Authorisation of Co-Owner			••••••	. Dai	<u></u>	• • • • • • •	•••••	•••••
Title: Mr/Mrs/Miss			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • •		• • • • • • •	• • • • • • • •	
Name :	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •				•••••	• • • • • • • • • • • • • • • • • • • •	
NID No. (other Party):								
Addroga (if different)			<u> </u>				l	<u> </u>
Address (if different) : Tel. No. :								
Signature (also Pare)				+0				•••••

2.5 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.

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

I / We have / have not availed of credit facilities at other financial institutions (including those not regulated by the Bank of Mauritius) for the purchase/construction of a first housing unit or additional units (delete as appropriate). I/We 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						

Reasons for arrears:

2.7 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 <u>all</u> 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 <u>written</u> 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 a	above i	inform	nation	is true	and co	orrect.												
Name of Spouse:											• • • • • • • • • • • • • • • • • • • •	•••••	•••••	•••••	•••			
NIC No. of Spouse :																		
Signature of spouse:	•••••	••••			•••••			•••••		• • • • • • •	Da	ıte :				••••		
Tel No./Mobile of Spouse	:	••••		•••••		•••••		•••••	. Ema	il of S	Spous	se :	•••••	•••••			•••••	 •••
Signature of Applicant :.	•••••		•••••		•••••		•••••					•••••		•••••				

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	Associat	ion) the	sum	of
ı	Rupees	. 8	as loan,	subject	to	the
	conditions of my membership of the Association and its rules and By-laws.			-		

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 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 guarantor's salary, the matter will be treated <u>as a case of defrauding the Association</u> of its property. I understand that the Association will proceed with legal actions against me and my guarantor(s) 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 <u>Embassies</u> 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:

Delow.	
	ls and in your own handwriting in the spaces provided: "Read and approved. Good for the sum in principal to which shall be added the accrued interest."
* Wording	
Applicant's Signature	

PART 3.1 TO 3.4 TO BE FILLED IN BY GUARANTOR/S

DETAILS	GUA	ARA	NT	OR	1 -	· CII	F:								GU.	ARA	NT	OR	2	<u>- CI</u>	F :							
Surname (Mr/Mrs/Miss):																												
First Name																												
Place of Birth																												
Surname at Birth																												
Marital Status: (Please tick as appropriate)	Sing	le /	/ Ma	arriec	d / D	ivor	ced /	(ev	iden	се 1	to be	attac	hed)	Sing	gle /	Ma	arrie	d /	Div	orce	d /	(evia	lenc	ce to	be a	ttaci	hed)
NIC No.																												
Dept/Ministry																												
Post Held					1																							
Pay Site Code	$oxed{oxed}$																						丄	ᆚ				
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 Othe					aught 						Mot	her		ouse Others	s (sp				_							Iother
Email address																												
Income & Wealth Status	finan	icial	yea	ar or	own	ass epen	ome e sets al ident o	bove	e Rs	50n					finai	ncial	yea	r or	ow	n as:	sets	abo		Rs50				ng any g assets
DETAILS	GUA	ARA	NT	OR	3 -	CIF	7:								GU	JAR	AN'	ГОБ	R 4	- C	IF:			_				
Surname (Mr/Mrs/Miss):																												
First Name																												
Place of Birth																												
Surname at Birth																												
Marital Status: (Please tick as appropriate)	Sing	le /	/ M	larrie	d/Di	vorc	ed /(evid	lence	e to	be a	ttach	ed)		Sir	igle	/ N	1arri	ed /	/ Di	vorc	ed	/ (ev	idei	nce t	o be	atta	ched)
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)		Spou Othe					Daug					/ I		ner		Spou Othe				n / 		U	er		athe		/ M o	
Email address																												
Income & Wealth Status	finan	ncial	l ye	ar or	owi	1 ass		lbov	e R	s50	m (i			g any assets	s fin	ancia	ıl ye	ar o	r ow se ar	n as	sets	abo		Rs5(Om (ng any g assets
I/We hereby authorize the MCSN facilities previously granted to m loan facilities. I/We have been in my/our 'Know Your Customer' (ne/us b nform KYC)	by a led b rec	ny by t	fina the N ls to	ncial MCS the	l ins MA KY0	stitut A Lt C Re	ion td o gist	in I of th	Mai e fi of tl	uriti unct he B	us ar ions ank	of to	o pro he M ⁄Iauri	vide t CIB. tius.	he M I/W	ICI Ve a	B w llso	ith autl	rele hori	evan ze t	it in he l	nforn MCS	nat SM	ion AA	on t	he p	present submit
I/We am/are fully aware of the p keep the details given to you in a MCSMAA Ltd will not process the	datab	ase.	. T	he p	urpo	se c	of dat	ta c	olle	ctic	on is	to p	roce	ess ar	nd mo	nitor	the	loa	ın.	It is	ma	nda	itory	to to	pro	vide		
I/We agree to the MCSMAA Ltd I/We solemnly affirm that the above the solemnly affirm that the solemnl		_				ubn		l by	me	e/us	s to	he N	1ČS	-						-					_			

mobile service provider. I/We 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/We undertake to inform immediately in writing the MCS Mutual Aid Association Ltd in case of any changes in the personal data provided above. I/We agree to receive statement of loans at regular intervals from the MCS Mutual Aid Assn. Ltd by the email

given above.

I/We am/are fully aware that providing any false or misleading information to MCSMAA Ltd in connection with my/our customer due diligence requirements, I/We 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/We am / are / 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/We am / are aware of the 'Complaints Handling Policy and Procedures' available on www.mcsmutualaid.com

3.2

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.

3.3 GUARANTOR/S PART – (not applicable for Mutual Aid Quick)

As sole guarantor */ guarantors * of Mr/Mrs/Miss, I / we * undertake to repay jointly and in solido to the M.C.S. Mutual Aid Association Ltd full / half / third / quarter of outstanding balance which may be due in case the *loanee fails to repay the said loan*. In that respect, I authorize 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 subsequently claimed by the M.C.S. Mutual Aid Association Ltd.

As guarantor/s I/We acknowledge having read and agreed the above terms and conditions in this loan

I/We undertake not to revoke this instruction without the written consent of the M.C.S. Mutual Aid Association Ltd.

3	4
J	_

contract and her	beby declare that the information I/we have given on this loan con	tract is true and
correct and also a	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 st	and as sole guarantor.
Signature of sole guar	antor:Date:/	./
	n WORDS and in your own handwriting in the spaces provided: "Re of Rupees in principal to which shall be added the accru	
GUARANTOR 1	** Wording:	Signature:
Name:		Signature.
•••••		
		Date:
		//
GUARANTOR 2	** Wording:	Signature:
Name:		
• • • • • • • • • • • • • • • • • • • •		
•••••		Date:/
		//
GUARANTOR 3	** Wording:	Signature:
Name :		
		• • • • • • • • • • • • • • • • • • • •
•••••		Date:
		//
GUARANTOR 4	** Wording:	Signature:
Name:		
		Date:
		//

FOR OFFICE USE

4.0 LOAN APPLICATION PROCESSING

MAHL/TN / 15.07.24

4.1 ACKNOWLEDGEMENT / 'PEP'/'HNWI' / UNSC VERIFICATION	A.3 EDITING OF DATA: Name: Department:	4.7 LOAN PAY OFF / INPUT / AUTHORISATION
1. For Applicant	Bank details : Status :	MSC not charged on previous loan
Is customer a (i) 'PEP' (ii) 'HNWI'	Telephone No.:	Rs
Applicant 'PEP': YES: NO	Address: Others:	TOD Balance: (HACCBAL) Rs
Applicant 'HNWI': YES NO		HPAYOFF:
2 For Guarantors	Maker (Name): Post.	Loan TypeRs
Is guarantor a (i) 'PEP' (ii) 'HNWI'	Signature: Date:/	Lagar Tyma
G1: (i) 'PEP': YES: NO (ii) 'HNWI': YES NO	Checker (Name): Post	Loan TypeRs
G2: (i) 'PEP': YES: NO (ii) 'HNWI': YES NO		Loan TypeRs
G3: (i) 'PEP': YES: NO (ii) 'HNWI': YES NO	4.4 MAXIMUM LOAN GRANTABLE	Other deductions :Rs
G4: (i) 'PEP': YES: NO (ii) 'HNWI': YES NO ((i) Loan amount applied for (LA) Rs	Loan input by:
3. UNSC check for Applicant (please tick)	(ii) Valuation of Property (VP)	Loan No. (HOAACLA):
POSITIVE NEGATIVE FALSE POSITIVE	Land: Rs	Name: Post
4. UNSC check for Guarantors (please tick)	Construction: Rs	Signature:Date://
G1: POSITIVE NEGATIVE FALSE POSITIVE	<u>Total</u> : Rs(VP)	Loan authorized by:
G2: POSITIVE NEGATIVE FALSE POSITIVE	% of loan (LA/VP) :	Name: Post
G3: POSITIVE NEGATIVE FALSE POSITIVE	Signature :Manager (Corporate)	Signature:Date://
G4: POSITIVE NEGATIVE FALSE POSITIVE	Date :/	
5. Risk Category of Customer (please tick):		4.8 LOAN REVIEWED BY:
Low Medium High	4.5 QUALITY ASSURANCE (QA) CHECK / ELIGIBILITY TEST	1. Senior Operations Officer (SOO)
Reason for risk category:	Passed Failed	Name:
	Payment mode:	Signature: Date:/
Name: Post	Cheque : EFT :	
Signature:Date:/	Performed by: Post	2. Manager (Loans & Deposits)
'PEP'/'HNWI'/HIGH RISK Transaction	Signature:	Name:
authorized by Senior Management (Please delete as appropriate)		Signature:
	Date:/	
Signature:Date:/	4.6 LOAN APPLICATION REVIEWED BY	Date:/
4.2 MCIB VERIFICATION	LOAN COMMITTEE MEMBERS	
Ref No:	(1) Name:	
Maker (Name): Post	Signature: Date://	
Signature:		
Date:/	(2) Name:	
	Signature:Date:/	
40 COMPLITATION OF FOLIATED MONT	THI V INSTALMENT (EMI)	1
4.9 COMPUTATION OF EQUATED MONT		
Loan Amount: Rs	Refund period:	(months)
Rate of Interest:	% EMI: Rs	
Name:M	anager (Finance) Signature :	

4.0 CHECKLIST OF DOCUMENTS MAHL/TN / 15.07.24

ar.			Extension of		Purcha	r
SN	The following documents should be submitted:	Construction	existing house / renovation	Flat	House	Residential land
1	Original & Photocopy of applicant's National Identity Card and Birth Certificate (KYC record) . Online Birth Certificate is acceptable.	√	√	٧	√	√
2	Applicant's recent payslip / pension slip (not more than 1 month). E-payslip is acceptable	√	√	√	√	√
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> . <i>E-certificate is acceptable</i> .	1	√	1	٧	1
4	Original & Photocopy of bank document showing bank account number and name of applicant (if changed).	√	√	√	1	√
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> .	٧	1	1	1	√
6	A written declaration from the borrower, together with supporting documents, on: a. all outstanding amounts of credit facilities availed of by the borrower including details such as the types, outstanding amounts, monthly repayment instalments, applicable interest rates and tenures of the credit facilities; and b. all fixed/variable income earned by the borrower over a minimum period of 12 months preceding the application for the credit facility. (e.g Bank Statement for last 12 months).	1	1	1	٧	1
7	A written declaration from the borrower on:- a. whether the borrower is applying for the grant of the credit facilities for the purchase/construction of a first housing unit or additional units; and b. whether the borrower has availed of credit facilities at other financial institutions including those not regulated by the Bank of Mauritius for the purchase/construction of a first housing unit or additional units, together with the supporting documents.	٧	٧	1	٧	1
8	Original & Photocopy of guarantor/s' National Identity Cards and Birth Certificates (KYC record). Online Birth Certificate is acceptable.	√	√	1	√	√
9	Guarantor/s' recent payslips (not more than 1 month). E-payslip is acceptable.	√	√	√	√ √	√
10	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). <i>E-bills are acceptable</i> .	V	√	4	4	√
11	Original and photocopy of Marriage Certificate (as applicable).	√ √	V	√ √	√ √	√
12	Original & Photocopy of spouse's National Identity Card and Birth Certificate (KYC record) (as applicable). Online Birth Certificate is acceptable.	√	√	√	√	√
13	Spouse's recent payslip (not more than 1 month) (as applicable). <i>E-payslip is acceptable</i> .	√	√	√	√	√
14	Site Plan.	√.	√.	1	√.	√.
15 16	Location Plan. Evidence of the remaining % contribution for the 90% or less financing. (Not applicable for 100% financing)	1	√ √	1	√	√ √
17	Title Deed and/or Notarial Deed certifying that land/property belongs to the applicant. (PIN number should be included)	1	1	٧	1	٧
18	Letter for check-off to SICOM Ltd (applicable for parastatal bodies).	√	√	1	√	√
19	Quotation / Invoice (where applicable) for full home loan project.	1	٧	N/A	N/A	N/A
20	Two complete sets of House Plan.	1	1	N/A	N/A	N/A
21	Development permits/Building permits.	√	1	N/A	N/A	N/A
22	Original and photocopy of National Identity Card of co-owner or usufruct holder(s).	1	1	N/A	N/A	N/A
23	Photo of the existing house to be renovated.	N/A	√	N/A	N/A	N/A
24	Original and photocopy of National Identity Card of seller of property (<i>where applicable</i>).	N/A	N/A	√,	√,	√,
25 26	Deed of Sale / Intention of Purchase All statutory clearances must have been received from the relevant authorities like approval of the morcellement Board and Ministry of Housing for the morcellement prior to granting of loans (Applicable For Purchase Of Land Under 'Projet De Lotissement' (Residential Lots).	N/A N/A	N/A N/A	1	1	1

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