



THE MCS MUTUAL AID JUNIOR FLEXI DEPOSIT APPLICATION FORM

FLEXI No.:

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1.0 APPLICANT DETAILS

Surname

First Name: Place of birth:

NIC No.:

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Pay Site Code

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Salary received by Bank Transfer: Yes _____ No _____ (if No Please specify)

Occupation : Employer

CATEGORY: ☐ Public ☐ Private ☐ Self Employed ☐ Others

Monthly Salary Rs: Source of Funds: (Proof to be annexed if any)

Source of wealth: (applicable for high profile customer)

Applicant's Bank Name: Bank Branch:

Bank Account Number:

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Address:

Are you a Mauritian non-resident? Yes _____ No _____

Do you pay tax outside of Mauritius? Yes _____ No _____

If yes to either of these questions, please fill in the CRS form as appropriate.

Tel. No. (home): Office: Mobile :

Email : Period of Contribution: years (5,10,15,20)

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 ☐

1.1 LEGAL GUARDIAN DETAILS (OTHER THAN APPLICANT)

Surname of legal guardian (Mother / Father) (Mr / Mrs / Miss):

First Name of legal guardian: Place of birth:

Surname at birth of legal guardian (if applicable):

NIC No.:

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Pay Site Code:

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Salary received by Bank Transfer: Yes _____ No _____ (if No Please specify)

Occupation : Employer

CATEGORY: ☐ Public ☐ Private ☐ Self Employed ☐ Others

Monthly Salary Rs: Source of Funds: (Proof to be annexed if any)

Source of wealth: (applicable for high profile customer)

Address:

Legal Guardian's Bank Name:..... Bank Branch:.....

Bank Account Number:

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Are you a Mauritian non-resident (legal guardian)? Yes ____ No ____

Do you pay tax outside of Mauritius (legal guardian)? Yes ____ No ____

If yes to either of these questions, please fill in the CRS form as appropriate.

Tel. No. (home): Office: Mobile :

Email : Period of Contribution: years (5,10,15,20)

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 ☐

1.2 BENEFICIARY DETAILS

Surname of beneficiary:

First name of beneficiary:

Gender: Male ☐ Female: ☐

Place of Birth of beneficiary: Relationship of Applicant with beneficiary:.....
(copy of birth certificate to be submitted)

NIC No. of beneficiary:

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Bank Name : Branch :

Bank Account No of beneficiary *(if available)*:

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Is the child a Mauritian non-resident? Yes ____ No ____

2.0 MODE OF CONTRIBUTION OF APPLICANT/LEGAL

I wish to make :

1. A Lump sum contribution of Rs..... (Cash / Office Cheque/bank transfer).
2. A monthly contribution of Rs..... I authorize a monthly deduction of Rs from my salary / Pension/ from my bank account through standing order as from
3. Changes in my monthly contribution from Rs..... to Rs.....
 Effective date :

3.0 A. CONDITIONS

- 3.1 Scheme is open to the general public; Minimum monthly contribution of Rs 100
- 3.2 Applicant / legal guardian can contribute on behalf of the beneficiary who must be below the age of 18).
- 3.3 Rate of returns as per Table B; No processing fee.
- 3.4 Guaranteed returns at savings rate in case of early withdrawal.
- 3.5 The account will be solely operated by the beneficiary once the latter reaches 18 years.
- 3.6 The beneficiary will be the child of the contributor or other close relative. The child must be below 18 years old at the time of joining.
- 3.7 The beneficiary may seek refund as from the age of 18 and the parent /child can also continue the plan up to the maturity period.
- 3.8 In case of early withdrawal, interest rate will be adjusted as per table B.
- 3.9 Other existing conditions of Flexi deposit scheme are applicable.

B. TABLE OF BENEFITS BASED ON NUMBER OF YEARS OF CONTRIBUTION

SN.	PLAN OPTED	BENEFITS ON MATURITY	BENEFITS ON EARLY WITHDRAWAL
1	5 years contribution	100% capital contribution + accrued interest at 1.25% p.a above average savings rate of prior financial year.	1. Withdrawal before Maturity: 100% capital contribution + accrued interest at average savings rate of prior financial year.
2	10 years contribution	100% capital contribution + accrued interest at 1.75% p.a above average savings rate of prior financial year.	1. Withdrawal < 5 years: 100% capital contribution + accrued interest at average savings rate of prior financial year. 2. 5 years <= Withdrawal < 10 years: 100% capital + accrued interest at 1.25% p.a above average savings rate of prior financial year.
3	15 years contribution	100% capital contribution + accrued interest at 2.25% p.a above average savings rate of prior financial year.	1. Withdrawal < 5 years: 100% capital contribution + accrued interest at average savings rate of prior financial year. 2. 5 years <= Withdrawal < 10 years: 100% capital + accrued interest at 1.25% p.a above average savings rate of prior financial year. 3. 10 years <= Withdrawal < 15 years: 100% capital + accrued interest at 1.75% p.a above average savings rate of prior financial year.
4	20 years contribution	100% capital contribution + accrued interest at 2.75% p.a above average savings rate of prior financial year.	1. Withdrawal < 5 years: 100% capital contribution + accrued interest at average savings rate of prior financial year. 2. 5 years <= Withdrawal < 10 years: 100% capital + accrued interest at 1.25% p.a above average savings rate of prior financial year. 3. 10 years <= Withdrawal < 15 years: 100% capital + accrued interest at 1.75% p.a above average savings rate of prior financial year. 4. 15 years <= Withdrawal < 20 years: 100% capital + accrued interest at 2.25% p.a above average savings rate of prior financial year.

4.0 DATA PROTECTION ACT – APPLICABLE TO THE APPLICANT/ LEGAL GUARDIAN UNTIL THE BENEFICIARY REACHES 18 YEARS

In accordance with Data Protection Act, the Mauritius Civil Service Mutual Aid Association Ltd (MCSMAA Ltd) will collect, process and file the personal data supplied by you in this form or any other personal data which you will subsequently provide to the MCSMAA Ltd in any manner, for any or all of the following purposes:

- a) The performance of a contract to which you are a party or the implementation of pre-contractual measures you request or require;
- b) The obtaining of authorisation from officers or other employees of the MCSMAA Ltd, when such authorisation is required in order to carry out obligations out of (a) for the purpose of informing such officers or employees of the developments within the MCSMAA Ltd whether such officers or employees are in Mauritius or outside Mauritius;
- c) For the establishing, exercising or defending of any legal claims arising;
- d) To send you information about products and /or services provided by the MCSMAA Ltd. Such information may be sent by mail, text messages, telephone, automated calling machine, facsimile machine, electronic mail or any other electronic means;
- e) For the prevention and detection of any criminal activity which the company is bound to report;

It is mandatory to provide the data, else we will not be able to process the application. Recipient of the data collected is the Mauritius Civil Service Mutual Aid Association Ltd whose registered office is at 5, Guy Rozemont Square Port Louis.

You have the right to require access to your personal data which is being processed and demand correction. In appropriate circumstances, you may request the erasure of any inaccurate, incomplete or immaterial personal data. Please inform the MCSMAA Ltd immediately of any variations relating to your personal data which is being processed by the latter. The MCSMAA Ltd undertakes to implement appropriate measures and safeguards for the purpose of protecting the confidentiality, integrity and availability of all data processed. Once the application has been processed, all data will be destroyed as per legal requirements.

5.0 DECLARATION- APPLICABLE TO THE APPLICANT/LEGAL GUARDIAN UNTIL THE BENEFICIARY REACHES 18

I consent that you may process the data and keep the details given to you in a database. This includes the following:

- Details I give you on application forms
- Details I give during financial reviews and interviews
- Your analysis of my transactions
- What you know from my account

I further consent to the company using, updating and processing this information to:

- Provide me with services
- Identify products and services which might be suitable for me
- Prevent and detect fraud, and
- Update their own records about me

I am fully aware of Section 52A of the Bank of Mauritius Act and I authorize that my 'Know Your Customer' (KYC) records and my account information, other than the balance and amount held therein, be submitted to the Registry of the Bank of Mauritius.

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 agree to join the MCS Mutual Aid Junior Flexi Deposit Scheme subject to the rules and regulations of the Association.

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.mu

I am aware that this account shall be operated solely by the beneficiary once the latter reaches 18 years and he/she shall be able to claim ownership over funds and benefits accrued. Contributions to this account shall/shall not (cross where applicable) continue from my account henceforth, unless the beneficiary decides otherwise.

Signature of Applicant (other than legal guardian)..... Date:

Signature of Legal guardian : Date:

6.0 MODE OF PAYMENT :

- (i) **Cash - (limited to Rs100,000)**
 - (ii) **Office Cheque drawn in the name of : " M. C. S. Mutual Aid Association Ltd."**
 - (iii) **Bank standing order for public**
 - (iv) **Deduction from salary/Pension from approved institution**
 - (v) **Bank Transfer (Please insert, "MCS Mutual Aid Junior Flexi Deposit and name of beneficiary" as details)**
- Bank A/c - SBI - 156 003 558 101 - SBM - 610 301 0000 2233 - MCB- 010 704 647

7.0**OFFICE USE****ORIGINAL AND PHOTOCOPY OF DOCUMENTS REQUIRED TO JOIN THE MCS MUTUAL AID JUNIOR FLEXI DEPOSIT:***Please tick as appropriate*

1. National Identity Card and **Birth Certificate** of applicant/ legal guardian and beneficiary ☐
(Online Birth Certificate is acceptable)
2. Bank document showing bank name, bank account number and name of applicant/legal guardian and beneficiary ☐
3. Bank statement / Utility Bill (CEB or CWA or Mauritius Telecom) - not more than 3 months, showing name and address of applicant /legal guardian. (If utility bill is not in name of applicant/legal guardian, a written confirmation and NIC should be secured from the utility bill account holder and the original and copy of NIC of signatory will be required). ☐
4. Latest payslip (where applicable). ☐

Risk Category of Customer : Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> (please tick)				
	NAME	POST	SIGNATURE	DATE
MAKER				
CHECKER				
High Risk Customer/s authorized by (Senior Management)				

EDITING OF DATA	Name: <input type="checkbox"/>	Address: <input type="checkbox"/>	Bank details: <input type="checkbox"/>	Email: <input type="checkbox"/> Tel. / Mobile No.: <input type="checkbox"/>	Status: <input type="checkbox"/>
MAKER	Name :		Post :	Signature:	Date:
CHECKER	Name :		Post :	Signature:	Date:

IS CUSTOMER A PEP?	Applicant		Legal Guardian		Beneficiary		NAME	POST	SIGNATURE	DATE
	YES	NO	YES	NO	YES	NO				
MAKER										
CHECKER										
PEP Transaction authorized by (Senior Management)										

IS CUSTOMER A 'HNWI'?	Applicant		Legal Guardian		Beneficiary		NAME	POST	SIGNATURE	DATE
	YES	NO	YES	NO	YES	NO				
MAKER										
CHECKER										
PEP Transaction authorized by (Senior Management)										

UNSC check for Applicant (please tick) <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> FALSE POSITIVE	NAME	POST	SIGNATURE	DATE
UNSC check for Legal Guardian (please tick) <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> FALSE POSITIVE				
UNSC check for Beneficiary (please tick) <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> FALSE POSITIVE				

		Maker	Date	Checker	Date	Examiner	Date
RECEIVED BY	Name			Signature		Signature	
	Post			Signature			
	Signature			Signature			
FD INPUT	Name			Signature		Signature	
	Post			Signature			
	Signature			Signature			
Reviewed by: SOO			Signature:.....			Date:...../...../.....	

APPROVED BY MANAGER (LOANS & DEPOSITS)	NAME	SIGNATURE	DATE