

**The Chief Executive Officer,**  
M.C.S. Mutual Aid Association Ltd.,  
5, Guy Rozemont Square, Port Louis.

Dear Sir,

**RE : DECLARATION FROM BORROWER/S**

I/We declare that I am / We are applying for the loan to purchase / construct a first / second residential property.

I / We declare that for the purpose of this loan application 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)*

**A. LOANS WITH OTHER INSTITUTIONS**

Do you have any other loan/s with any institution/(s).

Yes  No

If yes, please give details:-

SN.	Lending Institution	Type of Loan (e.g Home Personal, Car, etc)	Original Loan Amount (Rs)	Term (Months)	* Arrears as at date of application (Rs) <i>(put NIL, if no arrears)</i>	Outstanding amount as at (date of application) (Rs)	Monthly repayment Instalment (Rs)	Rate of Interest (% p.a)
1								
2								
3								
4								
<b>TOTAL</b>								

\* Reasons for arrears : .....

**B. EMAILING OF STATEMENTS OF ACCOUNT**

I shall be grateful if you will send all my statements pertaining to all my existing and any future accounts to the e-mail address specified below:

E-mail :

**Declaration:**

I hereby declare that I am perfectly aware of the risks inherent to the implementation of the instruction for the e-mailing of the statements of accounts, including but not limited to, documents being sent to impersonated e-mail addresses and / or wrong recipients and thereby becoming known to third parties and I agree to bear all the consequences thereof.

I shall be responsible for updating the email address details with the Mutual Aid as and when necessary.

I shall inform the Mutual Aid promptly in case of any error.

I undertake to hold the Mutual Aid and / or any of its agents harmless in the execution of the above instructions and not to enter any action against the aforesaid parties and hereby waive any rights I might have accordingly.

The present authorization shall remain valid until **written** revocation by me.

Name of Customer : _____	Signature of Customer : _____
NID. No. : <input type="text"/>	Date : _____

**C. ADDITIONAL UNDERTAKING FOR THE FOLLOWING DEPARTMENTS**

SN.	NAMES OF DEPARTMENT	SN.	NAMES OF DEPARTMENT
1	Private Secondary School Authority (PSSA)	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)		

OFFICE USE			
<b>Maker</b>	Name :	Signature:	Date
<b>Checker</b>	Name :	Signature:	Date

**D. LOAN DEDUCTION AUTHORITY FORM (LDAF) BY LOANEE - PENSION PAYABLE BY ACCOUNTANT GENERAL / SICOM LTD**

**Applicant Part**

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

The Accountant  
 .....  
 .....  
 .....

Dear Sir,

**RE : DEDUCTION FROM RETIRING GRATUITY, CASH IN LIEU OF SICK LEAVE / PASSAGE BENEFITS, REFUND OF PENSION CONTRIBUTION AND OTHER RETIREMENT BENEFITS**

This is to inform you that **I, Mr /Mrs /Miss \*** ..... having contracted loan of **Rs** ..... (Loan No.....) from the MCS Mutual Aid Association Ltd 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 MCS Mutual Aid Association Ltd.

I undertake not to revoke this instruction without the written consent of the MCS Mutual Aid Association Ltd.

Yours faithfully,

**Signature:** ..... **Name:**.....

**NID:**

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OFFICE USE			
<b>Received by</b>	<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
<b>Letter sent to Accountant General /SICOM Ltd *</b>	<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>

\* To delete where not applicable.