

available on www.mcsmutualaid.com

THE MAURITIUS CIVIL SERVICE MUTUAL AID ASSOCIATION LTD

5, Guy Rozemont Square, P. Louis Email: m.c.s.mutualaid@intnet.mu

Tel. No. 213 6060 (30 lines) Hotline. 212 4000 Fax No. 211 2441

Web site:www.mcsmutualaid.com

MAGL 15.07.24

MUTUAL AID GREEN LOAN APPLICATION FORM

1.0		Offi	се	Use	<u> </u>																				
Loan	Type: N	ew: [Rate	e of	Inter	est.		%	p.a													
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details	given to	you i	n a d	lataba	ase. '	The p	urpo	se of	dat	a col	llection is	to p	oroce	ss and	d mor	nitor tl	he lo	an.	It is	mand	latory	y to	provi	de dat	
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mobile	to the MCs number sub event it bec	bmitted	l by m	e to tl	he MC	CSMAA	A Ltd	l is dul	ly reg	gistere	ed under m	/ nam	ne wi	th my i	mobile	servic	e prov	vider.	I und	ertake	to co	mpe	nsate I	MCSM	AA Ltd

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 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 am aware of the 'Complaints Handling Policy and Procedures'

2.1 APPLICABLE IF SECURITY IS FIXED CHARGE

	. PART 2.	1	MON	THLY	INC	OME /	DEDU	UCTIO)NS (JF A	PPLI	CAN'	ľ			
	M	onthly	Incon	ne									Total	(Rs)		
Salary + Compensation	ı + travelling +	perman	nent al	lowanc	es											
	Less Monthly	Deduc	tions	from p	ayslip	S							Total	l (Rs)		
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2.																
3.																
4.																
5.																
6.																
7.																
8.																
9.																
10.																
Total Deductions (Rs	<u>!</u>															
Net Salary (Rs)																
% deduction																
2.2 DESCRIPT	ION OF LA	ND OI	FFEI	RED A	S SI	CURI	TY ((TITI	LE D	EEL	TO	BE 1	PROI	<u>)UCF</u>	E D)	
1. Land/Property to	be mortgaged	d to Mo	CSM	AA Lt	d:	ΓV Nu	mber	: :			T	ransc	riptio	n Date	e:	
Area:																
2. Is applicant owne	r of Land/Pro	perty?	Yes		No	I1	No,	Name	e of (Owne	er					
What is the status		_						_								
		_											1 111 1	Nullio	C1	• • • • • • • • • • • • • • • • • • • •
Indicate remaining				•												
3. If Land/Property t	•		-		•	~ ~	•	•	-			•				
4. Additional Securit	y: Yes 🔲	No		If yes	s, ple	ase pro	vide	detai	ls							
5. Does another pers	on have an ir	terest	in the	e Land	/Pror	ertv?	Yes		No[If Y	es, pl	ease s	give d	etails	and
documentary evid	ence of loan	amoun	t and	institu	ition	concer	ned:									
Usufruct Owner																
2.3 Authorisation		VIICI L		24 0-	<u> </u>	Othe	15		• • • • • •	• • • • •						• • • • • • • • • • • • • • • • • • • •
Title : Mr/M	rs/Miss	•••••	• • • • • •	•••••	•••••	• • • • • • • •	•••••	•••••	•••••	• • • • •	••••	• • • • • •	•••••	•••••	• • • • • •	•••••
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Signature (or	har Party)*									D	ate		1		/	
2.4 Authorisation	n of Co-Ow	nor/I Is	enfra	ct-Ov	mer	•••••	•••••	•••	•••••	<u>D</u>	aic .	•••••	• • • • • •	•••••	•/ ••••	•••••
Title: Mr/M																
Title: WII/W	11'8/1V1188	•••••	• • • • • •	• • • • • • •	•••••	•••••	•••••	•••••	••••	• • • • •	••••	• • • • • •	• • • • • •	•••••		• • • • • • • • • • • • • • • • • • • •
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Tel. No. :	,		1	/ahila	No.				T	'	١.					
Signature (or	her Party):									D	ate .		/		./	
2.5 Authorisation																
Title: Mr/M																
Title: Nir/lv	Irs/Iviiss	•••••	•••••	•••••	•••••	•••••	•••••	•••••	•••••	• • • • •	••••	• • • • • •	• • • • • •	•••••	• • • • • •	• • • • • • • • • • • • • • • • • • • •
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Signature (or										D	ate		1		1	

3.0	APPLICABLE IF SECURITY IS PLEDGE OF FIXED DEPOSIT(FD) OR LIFE ASSURANCE POLICY (LAP)
	OR RETIREMENT SAVINGS SCHEME (RSS)

- 3.1 TERMS AND CONDITIONS FOR LOAN AGAINST FD OR LAP OR RSS FOR APPLICANTS AGED OVER 65 AT THE TIME OF APPLICATION
 - 1. No Mutual Solidarity Contribution will be charged on the loan amount.
 - In case of death for those who have taken loan at 3.0 above, loan outstanding balance shall be written off against FD or LAP or RSS.
 - In case of default in payment on the part of the loanee for those who have taken loan at 3.0 above, for reasons other

.2	LOAN SECURED BY FIXED DEPOSIT	Y(S) (FD) OF THE ASSOC	CIATION		
	NAME OF DEPOSITOR :				
	FD NO.:		AMOUNT : Rs	s	
	INVESTMENT DATE:		. FD MATURIT	Y DATE :	
	REMARKS:				
	SN NAME OF CUSTOMER	/ FD HOLDER	SIGNA	ΓURE	DATE
	1				
	2				
	3				
	FD SECURED ON SYSTEM:				
	MAKER:	SIGNATURE		DATE :	
	CHECKER:	. SIGNATURE		DATE :	
3	LOAN SECURED BY LIFE ASSURANCE P NAME OF INSURED: NAME OF INSURANCE COMPANY:				
3	NAME OF INSURED: NAME OF INSURANCE COMPANY: POLICY NO.:				
3	NAME OF INSURED: NAME OF INSURANCE COMPANY:				
B	NAME OF INSURED: NAME OF INSURANCE COMPANY: POLICY NO.:	STARTING DATE : .	MAT	URITY DATE:	
3	NAME OF INSURED: NAME OF INSURANCE COMPANY: POLICY NO.: SUM ASSURED: Rs	STARTING DATE : .		URITY DATE:er certificate from insuran	
3	NAME OF INSURED: NAME OF INSURANCE COMPANY: POLICY NO.: SUM ASSURED: Rs SURRENDER VALUE: Rs NAME OF CUSTOMER/ INSURANCE	STARTING DATE :		URITY DATE:er certificate from insuran	nce co.)
3	NAME OF INSURED: NAME OF INSURANCE COMPANY: POLICY NO.: SUM ASSURED: Rs. SURRENDER VALUE: Rs. NAME OF CUSTOMER/ INSURANCE SIGNATURE:	STARTING DATE :		URITY DATE:er certificate from insuran	nce co.)
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	NAME OF INSURED: NAME OF INSURANCE COMPANY: POLICY NO.: SUM ASSURED: Rs. SURRENDER VALUE: Rs. NAME OF CUSTOMER/ INSURANCE SIGNATURE:	STARTING DATE :		URITY DATE:er certificate from insuran	nce co.)
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	NAME OF INSURED: NAME OF INSURANCE COMPANY: POLICY NO.: SUM ASSURED: Rs SURRENDER VALUE: Rs NAME OF CUSTOMER/ INSURANCE SIGNATURE: REMARKS: LOAN SECURED BY RETIREMENT S	HOLDER:		URITY DATE:er certificate from insuran	nce co.)

4.0 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 written revocation by me.

5.0 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.

6.0 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			
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			

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

Name of Spouse:

NIC No. of Spouse:

Signature of spouse:

Tel No./Mobile of Spouse:

Email of Spouse:

Signature of Applicant:

7.0 CONTRACT: TO BE FILLED IN AND SIGNED BY APPLICANT AND GUARANTOR(S) (IF APPLICABLE) ACKNOWLEDGEMENT: UNDERTAKING TO REFUND BY INSTALMENTS

I acknowledge having received from the Association the sum of R	lupees							
	as loan,	subject to	the condition	s of my	membership	of the	Association	and its
rules and By-laws.								

Good for the sum of

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. I undertake to pay all charges in connection with the loan including the Mutual Solidarity Contribution, prior to granting of the loan. 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. 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 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 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 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:

Wording

** Please write in WORDS and in your own handwriting in the spaces provided: "Read and approved.

Rupees..... in principal to which shall be added the accrued interest".

	••••						••••								••••											• • • •	• • • • •	
Applicant's Signature																		••••	Da	ate		/.			 /			••
7.1 LOAN SECURED B	Y PI	ERS	SONA	A L	GU.	AR	AN'	ТО	R(S) -	то	BE	FIL	LE	D II	N B	Y G	UA	RA	NT	OR	(S)	(IF	API	PLIC	CAB	LE)	
DETAILS	GUA	RA	NTOR	1	- C	IF:								(GUA	RAl	OTN	R	2 -	CIF	`:							
Surname (Mr/Mrs/Miss):																												
First Name																												
Place of Birth																												
Surname at Birth																												
Marital Status: (Please tick as appropriate)	Sing	le /	Marri	ed /	Divo	orced	/ (e	vide	nce to	o be	atta	ched)	Ş	Single	e /	Mar	ried	/ I	Divo	rced	/ (e	vide	nce i	to 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)	•	ouse Other	s (spea		/ I	_			Fath			Mot	her		Spot Ot		(spe			Da	_			athe		, -	Moth	
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Income & Wealth Status	finan	cial	derive year o spouse	r ov	vn a	ssets	abov	ve R	s50m					f		ial	year	or	own	asse epeng	ets a	above	e Rs	50m			ing a	
DETAILS	GUA	RA	NTOF	3	- C	IF:								G	UAF	RAN	TOF	R	4 -	CIF	:							
Surname (Mr/Mrs/Miss):	001		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,															<u>- </u>	-	<u> </u>	•							
First Name																												
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Surname at Birth																												
Marital Status: (Please tick as appropriate)	Sing	le /	Marri	ed/E	Divor	ced	/(evi	denc	e to l	be a	ttach	ed)		S	ingle	/]	Marr	ied	/ D	ivor	ced	/ (eı	vider	ice to	o be	attac	hed)	
NIC No.																												

Dept/Ministry													
Post Held													
Pay Site Code													
Home Address													
Tel. No.: Office , Home, and Mob State relationship with Applicant or	0												
Guarantors (to mention which Guar		1											
(Please tick if applicable) Email address	(4)	(43))											
Income & Wealth Status	Did you derive net income exceeding Rs15m during financial year or own assets above Rs50m (including a owned by spouse and dependent children)? Yes No												
financial institution in Mauritius and		on Bureau (MCIB) regarding any loan facilities previously granted to me by any icilities. I/We have been informed by the MCSMAA Ltd of the functions of the KYC Registry of the Bank of Mauritius.											
The purpose of data collection is to	process and monitor the loan. It is mandatory to provide data, else MC	use, update and process the data and keep the details given to you in a database. CSMAA Ltd will not process the loan. Once the application has been processed,											
all data will be destroyed as per legal requirements. We agree to the MCSMAA Ltd sending me an SMS/Text Messages regarding my loan account on my above mobile phone number. I/We 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/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.													
under section 17(C)(6) of the Finar exceeding 5 years. I/We am / are / a	We am/are fully aware that providing any false or misleading information to MCSMAA Ltd in connection with my customer due diligence requirements, I/We shall commit an offence inder 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).												
•	inis Handling Policy and Procedures available on www.mcsmutualaid.	com											
TWe am / are aware of the 'Complaints Handling Policy and Procedures' available on www.mcsmutualaid.com 7.2 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 "Kev 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 Loances / 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													
informed that I may seek knowledge of its intent ar	independent legal or other advice before signing t	his guarantee. I sign this document as guarantor in full											
informed that I may seek knowledge of its intent ar been processed unless the	independent legal or other advice before signing t nd purpose and of my liabilities. I understand I can	this guarantee. I sign this document as guarantor in full not opt out of this loan contract once the application has											
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GUARANTOR 2	** Wording:			Signature:
Name :				
				Date:
				//
GUARANTOR 3	** Wording:			Signature:
Name :				
				Date:
				Date.
GUARANTOR 4	** Wording:			Signature:
Name:				Signature.
ivame :				
•••••				Date:
		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • •	//
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	8.0 LOAN APP	PLICATION PROCESSING FOR	OFFICE USE	
8.1 ACKNOWLEDG UNSC VERIFIC	GEMENT / 'PEP'/'HNWI' / ATION	8.3 EDITING OF DATA:		ICATION REVIEWED OMMITTEE MEMBERS
1. For Applicant		Name: Department:		Post
Is customer a (i) 'PEI	?' (ii) 'HNWI'	Bank details : Status :		Date:/
Applicant 'PEP': YE	S: NO	Telephone No.: Email: Address: Others:		Post
Applicant 'HNWI': YES	S NO	Address: Others:		Date://
2 For Guarantors		Maker (Name):Post	_	
Is guarantor a (i) 'PE		Signature: Date:/	8.7 LOAN PAY AUTHORIS	
	(ii) 'HNWI': YES NO	Checker (Name): Post. Post.		d on previous loan
	(ii) 'HNWI': YES NO	Signature:Date:/	Rs	
G3: (i) 'PEP': YES: NO	(ii) 'HNWI': YES NO	8.4 MAXIMUM LOAN GRANTABLE	TOD Balance: (I	
G4: (i) 'PEP': YES: NO	(ii) 'HNWI': YES NO	(i) Loan amount applied for (LA)	HPAYOFF:	
3. UNSC check for App	plicant (please tick)	(1) Loan amount applied for (LA)		Rs
	EGATIVE FALSE POSITIVE	Rs	Loan Type	Rs
4. UNSC check for Gu	arantors (please tick)			
	IEGATIVE FALSE POSITIVE	(ii) Valuation of Property (VP)		Rs
	EGATIVE FALSE POSITIVE	Rs	Other deductions	:Rs
	EGATIVE FALSE POSITIVE FALSE POSITIVE	% of loan (LA/VP) :	Loan input by:	
	<u>—</u>	Name:	Loan No. (HOA	ACLA):
5. Risk Category of Low	Medium High	Signature:	Name:	Post
	ð	Soo(Home Loan) / Manager (Loans &	Signature:	
	ory:	Deposits)	Loan authorized	
Name:	Post	Date:/		 Post
_	Date:/	9.5 OHALIPY ASSIDANCE (OA) CHECK /	İ	Date: //
	IIGH RISK Transaction Management (Please delete as	8.5 QUALITY ASSURANCE (QA) CHECK / ELIGIBILITY TEST	8.8 LOAN REV	
	propriate)	Passed Failed		ations Officer (SOO)
Signature:	Date:/	Payment mode:	Name :	
8.2 MCIB VERIF	ICATION		Signature:	Date://
Ref No:		Cheque : EFT :	2. Manager (Lo	
		Performed by: Post	Name :	-
Maker (Name):	Post	Signature: Date:/		Date:/
			Signaturo	
Signature:I	Date:/			

SN		ORIGINAL & PHOTOCOPIES OF DOCUMENTS REQUIRED BY APPLICANT		CS (√ /X)	QC (√ /X)
1	Original & Photoco acceptable.	py of applicant's National Identity Card and Birth Certificate (KYC record). Online	e Birth Certificate is		
2	Applicant's recent	payslip / pension slip (not more than 1 month). E-payslip is acceptable.			
3	involved in a pol	istry/Department certifying that applicant is: not under report, not on leave ice case, not on prolonged sick leave and also was not on prolonged sick leave <i>r</i> is valid for 4 weeks. E-certificate is acceptable.			
4	Original & Photoco	py of bank document showing bank account number and name of applicant (if changed).			
5	old of applicant (If ut	of bank statement showing name and address / Utility Bill (CEB or CWA or Mauritius Telecom) - n ility bill is not in name of applicant , a written confirmation and copy of NIC should be secured from cument showing relation (KYC record). <i>E-bills are acceptable</i> .			
6	Letter of undertakin	g (where applicable).			
7	Letter for check-off	to SICOM Ltd (applicable for parastatal bodies).			
8	Documentary evider	nce for green project (e.g. quotation / invoice / official receipt from the seller) as below:			
9	Evidence of remain	ing fund (where applicable).			
		SIGNATUI	RE		
	1	2		3	
	or a new Car / SUV / Iotorcycle/ 4x4 / 2x4	For a reconditioned Car (imported) / SUV / 4x4 / 2x4 / Motorcycle (not more than 60 months as from date of 1 st registration of vehicle)		and vehicles (local ore than 3 years))
(i) One	otation from seller	(i) Local supplier's invoice (ii) Bill of Lading	(i) Free from lien (Gage sa	ans déplacement);	
(1) Quo	ration from seller	(iii) Certificate of Inspection and Certificate of Registration from exporting country.	(ii) Should <u>not</u> be for con	mmercial purpose;	and
		(iv) Bank's advice for Payment (v) Copy of Custom's Bill of Entry.	(iii) Valuation of car to b	ne submitted.	
		(vi) Certificate of 'Gage Sans Deplacement'.	()		

A. IF LOAN IS SECURED BY PERSONAL GUARANTOR(S):

SN	ORIGINAL & PHOTOCOPIES OF DOCUMENTS REQUIRED BY GUARANTOR	CS (√ /X)	QC (√ /X)
1	Original & Photocopy of guarantor/s' National Identity Cards and Birth Certificates (KYC record). Online Birth Certificate		
	is acceptable.		
2	Guarantor/s' recent payslips (not more than 1 month). <i>E-payslip is acceptable</i> .		
3	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		
Ü	account holder) or any other document showing relation (KYC record). E-bills are acceptable.		
	SIGNATURE		

B. IF LOAN IS SECURED BY FIXED CHARGE ON PROPERTY

SN	ORIGINAL & PHOTOCOPIES OF DOCUMENTS REQUIRED BY APPLICANT	CS (√ /X)	QC (√ /X)
1	Title Deed and/or Notarial Deed certifying that land/property belongs to applicant.(PIN number should be		
1	included) (For Applicant only)		
2	Site Plan.		
3	Location Plan.		
4	Valuation Report.		
5	Original and photocopy of Marriage Certificate (as applicable).		
6	Original & Photocopy of spouse's National Identity Card and Birth Certificate (KYC record) (as applicable). Online Birth		
U	Certificate is acceptable.		
7	Spouse's recent payslip (not more than 1 month) (as applicable). E-payslip is acceptable.		
8	Original and photocopy of National Identity Card of co-owner or usufruct holder(s).		
	SIGNATURE		

C. IF LOAN IS SECURED BY LIFE ASSURANCE POLICY(LAP)

SN	ORIGINAL & PHOTOCOPIES OF DOCUMENTS REQUIRED BY APPLICANT	CS (√ /X)	QC (√ /X)
1	Necessary certificate(s) from the Institution(s)Life Assurance Policy		
2	Surrender Value Certificate		
3	Assignment Deed		
	SIGNATURE		

$\textbf{D.} \hspace{1.5cm} \textbf{IF LOAN SECURED BY MUTUAL AID FIXED DEPOSIT(FD)} \\$

SN	ORIGINAL & PHOTOCOPIES OF DOCUMENTS REQUIRED BY APPLICANT	CS (√ /X)	QC (✔/X)
1	Mutual Aid Fixed Deposit Certificate.		
	SIGNATURE		

E. IF LOAN SECURED BY RETIREMEN SAVINGS SCHEME (RSS)

SN	ORIGINAL OF DOCUMENTS REQUIRED BY APPLICANT	CS (√ /X)	QC (√ /X)
1	Mutual Aid RSS certificate		
	SIGNATURE		

9.1 For more details concerning terms and conditions for securities (Personal Guarantor(s) or Fixed Charge on Property, please refer to the relevant KF1C(s).

10.0 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)		