



Public and Member checkboxes, RSS No. grid

RSS APPLICATION FORM

1.0 APPLICANT

Surname (Mr / Mrs / Miss):

First Name :

Surname at Birth (if applicable) : Place of Birth :

Marital Status (Please tick): Single, Married, Divorced, Widow, Widower

NIC No. grid

Occupation \*: Employer \*

Monthly Salary \* Rs: Pay Site Code\* grid \* Not applicable if self-employed.

Source of Funds: (Proof to be annexed if any). Source of wealth : (applicable for high risk customer).

Bank : Branch

Bank Account No. grid

Address :

Tel. No.(home): Office : Mobile : 5

Email 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 related to one? Yes No

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. (CRS – Individual Self-Certification Form). In accordance with the prevailing regulations, please be informed that if you are classified as a non-resident, the Association is required to report information relating to your accounts to the Mauritius Revenue Authority (MRA) under the Common Reporting Standard (CRS) framework. For further guidance, please refer to Chapter 6 of the CRS Guidance Notes available on the MRA’s official Website.

MODE OF CONTRIBUTION (MINIMUM CONTRIBUTION = RS100)

- I wish to make (Contributor may choose (1) or(2) or both):
1. A Lump sum contribution of Rs..... (Cash / Office Cheque). [To fill payment form in case lump sum contribution exceed Rs10,000].
2. A monthly contribution of Rs..... I authorize a monthly deduction of Rs ..... from my salary / from my bank account through standing order as from .....
3. Changes in my monthly contribution from Rs..... to Rs..... Effective date : .....

I agree to join the RSS subject to the rules and regulations of the Scheme

Signature of applicant : Date:

**1.1 BENEFICIARY** (in case of death)- [Mandatory : Applicant must put "Succession Account" in case there is no specific beneficiary]

Surname (Mr / Mrs / Miss):.....

First Name : .....

Surname at Birth (if applicable) : ..... Place of Birth : .....

Beneficiary NIC No.: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 (Attach documentary evidence).

Relationship with beneficiary : .....

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

Email address : .....

Bank : ..... Branch .....

Bank Account No.: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**1.2 SURVEY : Where did you hear about the Mutual Aid Association?**

From:  Existing member(s)  Colleague(s)  Social media  Others (Please specify:.....)

**1.3 CLIMATE RELATED AND ENVIRONMENTAL ASSESSMENTS**

1. Is your income source dependent on climate-sensitive sector(s)?  Yes  No

If yes, please select the relevant sector(s): 

Agriculture	Energy	Water Supply	Forestry
Transportation	Tourism	others (please specify):.....	

2. Has your property been affected by any of the following climate-related events in the **past 5 years**?  Yes  No

If yes, please specify:

1	Flooding during heavy rains	5		Strong cyclone impacts	9		Soil erosion
2	Flash floods	6		Rise in sea level (for coastal areas)	10		Other (please specify): .....
3	Coastal flooding/high waves	7		River overflow			
4	Landslides	8		Water accumulation due to poor drainage			

**Signature:** ..... **Date :** ...../...../.....

**2.0 SPECIAL CONDITIONS:**

1. In case of withdrawal from the Scheme, a penalty will be applied on both capital and accrued interest as per table below:

SN	YEARS OF CONTRIBUTION	% PENALTY
1	0 ≤ 10	25
2	> 10 ≤ 20	15
3	> 20 ≤ 30	10

SN	YEARS OF CONTRIBUTION	% PENALTY
4	> 30 ≤ 40	5
5	> 40	0

2. Contributions are credited with: Average Savings Rate (ASR) + minimum interest of 2 % p.a above ASR + Bonus as approved by the Board.

3. Should a client retire before the statutory retirement age, proof of retirement should be submitted.

4. A contributor shall be qualified for full lump sum under ‘resignation’ and ‘dismissal’ subject to the condition that the contributor has not opted for a new job and/or has not continued contributions to the Scheme.

5. RSS contributor joining the Scheme:

(a) On or before September 26, 2012, shall be qualified for full refund without penalty on reaching the age of 60.

(b) After September 26, 2012, shall be qualified for full refund without penalty on reaching the statutory retirement age.

6. The Association provides RSS statement of accounts to contributors on request and without charges. The customers can also query the RSS balance via SMS on 8977 (Type : Bal [leave a space] RSS account number) .

**3.0 DATA PROTECTION ACT**

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.

**4.0 DECLARATION**

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 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.com](http://www.mcsmutualaid.com)

Signature of Applicant : ..... Date: .....

**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) **Standing order : with reference “RSS” followed by name to the following bank accounts :**  
 142 093 790 at Barclays Bank Mauritius Ltd Or 610 301 0000 2233 at SBM Ltd. Or 010 704 647 at MCB Ltd.

**5.0 OFFICE USE**

**ORIGINAL AND PHOTOCOPY OF DOCUMENTS REQUIRED TO JOIN THE RSS:** *Please tick as appropriate*

- |    |   |   |   |   |                          |
|----|---|---|---|---|--------------------------|
| 1. | National Identity Card and <b>Birth Certificates</b> of Applicant and Beneficiary. -  | - | - | - | <input type="checkbox"/> |
|    | Online Birth Certificate is acceptable.   |   |   |   | <input type="checkbox"/> |
| 2. | Bank account number.  | - | - | - | <input type="checkbox"/> |
| 3. | Appointment letter from present employer (where applicable). <i>E-certificate is acceptable.</i> -  |   |   |   | <input type="checkbox"/> |
| 4. | Bank statement showing name and address / Utility Bill (CEB or CWA or Mauritius Telecom) - not more than 3 months. (If utility bill is not in name of applicant, a written confirmation and NIC should be secured from the utility bill account holder and the original and copy of NIC of signatory). <i>E-bills are acceptable.</i> |   |   |   | <input type="checkbox"/> |
| 5. | Recent payslip (where applicable). <i>E-payslip is acceptable.</i>  | - | - | - | <input type="checkbox"/> |

**OFFICE USE**

CATEGORY :  Recognised Institution       Approved Service       Self Employed  
 Others

**Applicant**  
 UNSC check (please tick):  Positive       Negative       False Positive  
 'PEP' (please tick):  Yes       No  
 'HNWI' (please tick):  Yes       No  
 Risk Category (please tick) :  Low       Medium       High  
 Reason for risk category : .....

**Beneficiary**  
 UNSC check (please tick):  Positive       Negative       False Positive  
 'PEP' (please tick):  Yes       No  
 'HNWI' (please tick):  Yes       No

**CLIMATE RELATED AND ENVIRONMENTAL ASSESSMENT:**  
 - Climate Risk Score :  1       2       3  
 - Climate Risk Rating :  Low       Medium       High  
 Reason for high risk : .....

**PEP / HNWI / CLIMATE RELATED AND ENVIRONMENTAL ASSESSMENT / HIGH RISK APPLICANT(S) TRANSACTION AUTHORIZED BY SENIOR MANAGEMENT**  
 Name:..... Post:..... Signature:..... Date:.....

<b>EDITING OF DATA</b>	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"/>
<b>MAKER</b>	Name :		Post :	Signature:	Date:
<b>CHECKER</b>	Name :		Post :	Signature:	Date:

	MAKER	POST	DATE	CHECKER	POST	DATE	EXAMINER	DATE
<b>CIF – CREATE / UPDATE</b>								
<b>RSS INPUT</b>								
<b>REMARKS</b>								

<b>REVIEWED BY SOO / MANAGER</b>		<b>Date</b>	
----------------------------------	--	-------------	--