



..... **Branch**

Application for:- (Kindly tick as appropriate)

| | | | | | | | | | |
|-----------|--------------------------|---------------|--------------------------|--------------|--------------------------|------------------|--------------------------|---------------------------------|-------------------------|
| Overdraft | <input type="checkbox"/> | Consumer Loan | <input type="checkbox"/> | Housing Loan | <input type="checkbox"/> | Educational Loan | <input type="checkbox"/> | Others <input type="checkbox"/> | |
| Lease | <input type="checkbox"/> | | | | | | | | <i>(Please specify)</i> |

1. APPLICANT (S) DETAILS

| | APPLICANT | JOINT-APPLICANT |
|--|--|--|
| Surname: | ..... | ..... |
| First Name (s): | ..... | ..... |
| NIC: | ..... | ..... |
| Age : | ..... | ..... |
| Nationality: | ..... | ..... |
| Residential address: | ..... ..... | ..... ..... |
| Telephone Number: | Res:..... Office:..... Mobile:..... Email:..... | Res:..... Office:..... Mobile:..... Email:..... |
| Residential Status: | <input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Parent's <input type="checkbox"/> Others | <input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Parent's <input type="checkbox"/> Others |
| Monthly Rental : | Rs..... | Rs..... |
| <i>(In case of rented)</i> | | |
| Marital Status:- | <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/er | <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/er |
| Marriage regime (strike whatever not appropriate) | Under legal community of goods / Separation des Biens | |

SPOUSE DETAILS

| | | |
|--------------------------|-------|-------|
| Name of Spouse: | ..... | ..... |
| Maiden Name: | ..... | ..... |
| Age : | ..... | ..... |
| Nationality: | ..... | ..... |
| Occupation : | ..... | ..... |
| Employer : | ..... | ..... |
| Years of service: | ..... | ..... |
| Net Salary/income | ..... | ..... |

2. EMPLOYMENT DETAILS

Applicant

Details: Salaried Sales/Commission based
 Self-employed Contract based
 Others

Joint Applicant

Salaried Sales/Commission based
 Self-employed Contract based
 Others

Occupation/Position:

Employer's Name:

Employer's Address:

Time in Present Employment : Years Years

Net Salary :

Previous employer:

Time in previous Job:Years Years

FOR SELF EMPLOYED (complete information below)

Nature of Business :

Years in business: Years Years

Monthly income: Primary Source of Income: Rs..... Primary Source of Income: Rs.....
Secondary Source of income : Rs..... Secondary Source of income : Rs.....
(Please annex support documents for both Primary & Secondary source of Income.)

3. PRESENT REQUEST

| | OD | Housing Loan | Consumer loan | Leasing | Others |
|---------------|------------------------------------|------------------------------------|---------------|--|------------------------------------|
| Amount | | | | | |
| Purpose | | | | <input type="checkbox"/> Vehicle <input type="checkbox"/> Equipment <input type="checkbox"/> Other | |
| Period | Months | Months |Mths | Months | Months |
| Interest rate | PLR +%, presently % | PLR +%, presently % | Plr+ % | PLR +%, presently % | PLR +%, presently % |
| Repayment | | | | | |
| Security | | | | | |
| Facility Fee | | | | | |

In case of deposit: Interest to read FDR + %, presently ... % or at such rates as may be determined by the B from time to time.

For facility under lease Description of goods to be leased (evidence to be enclosed)

Make & model

Year of registration (for reconditi

Expected delivery date

Supplier

Purchase price (excl. VAT & Insurance)

Address

Amount requested

Rs

Contact

Contract amount Rs

Residual Value Rs

Initial rental Rs

Lease period (months/year)

Net financing Rs (% financing)

Interest Rate: Bank One Plr +% presently% p.a. The Bank reserves the right to amend the lease rental payments should there be any change in Bank One PLR.

Initial rental of% (Rs.....) followed by Consecutive monthly rental payments of% (Rs.....) calculated net of VAT and/or any other taxes present or future on lease rentals and on the goods leased, with a Residual Value of% (Rs.....).

The lessee has the option to purchase the goods at the end of the lease term for this Residual Value amount.

5. GUARANTOR DETAILS

GUARANTOR 1

Relationship to borrower:

Details: Salaried Sales/Commission based
 Self-employed Contract based
 Others

Surname:
 First Name (s):
 NIC:
 Age :
 Nationality:
 Residential address:
 Telephone Number: Res:..... Office:.....
 Mobile:..... Email:.....
 Occupation/Position:
 Employer's Name:
 Employer's Address:
 Time in Present Employment : Years
 Present Salary/income.....
 Previous employer:
 Time in previous Job:Years

GUARANTOR 2

Relationship to borrower:

Salaried Sales/Commission based
 Self-employed Contract based
 Others

GUARANTOR'S NETWORTH (Office use)

Rs000's

| ASSETS | | LIABILITIES | |
|---------------|--|--------------------|--|
| Deposits: | | Loan 1 | |
| Real estate 1 | | Loan 2 | |
| Real estate 2 | | OD 1 | |
| Real estate 3 | | Credit cards | |
| Quoted shares | | Others | |
| Others | | | |
| <i>Total</i> | | <i>Total</i> | |

GUARANTOR'S NETWORTH (Assets - Liabilities)

| |
|----|
| Rs |
|----|

6. FINANCIAL DETAILS

**SALARIED CUSTOMER
MONTHLY INCOME & EXPENSES**

Monthly Household Income
(excluding travelling)

PAYE

Other deductions

NET INCOME (X)

Monthly household expenses
(including S/orders & excluding loan repayments)

Surplus before loan repayment **(Y)**

Loan repayments

Existing

New

TOTAL (Z)

Surplus (Y - Z)

**SELF EMPLOYED CUSTOMER
MONTHLY INCOME & EXPENSES**

Monthly turnover

Monthly cost of sales

Monthly operating expenses

Gross income

Tax-Current Payment System

NET INCOME (A)

Monthly household expenses
(including S/orders & excluding loan repayments)

Surplus before loan repmts**(B)**

Loan repayments

Existing

New

TOTAL (C)

Surplus (B - C)

REPAYMENT CAPACITY

Net Income **X or A; whichever applicable**

Total Loan Repayment **Z or C; whichever applicable**

Monthly debts servicing represents % of Net Income **(Z/X or C/A whichever applicable)**

7. BORROWER'S NETWORK (Office use)

| ASSETS | Rs000's | LIABILITIES | Rs000's |
|---------------|----------------|--------------------|----------------|
| Deposits: | | Loan 1 | |
| Real estate 1 | | Loan 2 | |
| Real estate 2 | | OD | |
| Real estate 3 | | Credit cards | |
| Quoted Shares | | Others | |
| Others | | | |
| <i>Total</i> | | <i>Total</i> | |

BORROWER'S NETWORK (Assets - Liabilities) Rs

8. DECLARATION

*Delete as appropriate

I/We* understand that the Bank of Mauritius has, in the exercise of the powers conferred upon it by law, established a Central Credit Bureau, the "Mauritius Credit Information Bureau" (MCIB) to collect information from banks regarding the credit facilities which they grant to their customers in order to enable a bank which is approached for a credit facility by a customer to obtain information from MCIB regarding any credit facilities granted to that customer by other Banks. I/We* understand that the information so collected will be kept in strict confidence by MCIB and the banks concerned.

I/We* further understand that:-

- . The Bank will, as part of its appraisal process of the present application, access MCIB to seek information on credit facilities provided to me/us by other banks, and I/We* authorize the Bank to do so.
- . It will be a term of credit facility applied for, if granted, that information regarding it shall be given to MCIB for the use of MCIB and other banks.

I/We* declare that we have given details of our monthly household expenses and our liabilities, if any, under the Borrower's Protection Act 2007, if applicable, to the best of my/our knowledge and belief and and that no information which might affect the decision of the Bank has been withheld.

I/We* hereby agree to abide by the rules and regulations of the Bank.

I/we hereby authorise the Bank to debit my/our account number with any fees, costs and accessories that may be required for processing my/our present request for banking facility/ies.

Borrower 1:(Name).....

Signature:

Date:

Borrower 2:(Name)..... Date:

Signature:

Documents to be submitted by client

- | | | | |
|--|--------------------------|---|--------------------------|
| 1. Last 3 months salary slip (for Salaried employees and spouse) | <input type="checkbox"/> | 7 Decreasing Term Assurance (if applicable) | <input type="checkbox"/> |
| 2. Salary pledge | <input type="checkbox"/> | 8 Fixed Deposit certificate (if applicable) | <input type="checkbox"/> |
| 3. In case of self employed supporting evidence for income, e.g. Bank Statement | <input type="checkbox"/> | 9 Share certificate or CDS statement (if applicable) | <input type="checkbox"/> |
| 4 For new customers last six months Bank Statement + letter from employer confirming status of employment (whether employed on contract or permanent basis) & years of service. | <input type="checkbox"/> | 10 Sugar Delegation/MSS pledge | <input type="checkbox"/> |
| 5. For housing loans and educational loans: certificates of liabilities from non-banks, if applicable. | <input type="checkbox"/> | 11 Surrender value of life policy (if applicable) | <input type="checkbox"/> |
| 6. Title deeds, Site plan if property/ies is/are offered as collateral | <input type="checkbox"/> | | |

VALUE OF COLLATERAL: Properties Deposit Others

SECURITY MARGIN Properties % Deposit % Others %

REALISABILITY OF SECURITY Good Fair Poor

Processing fee/Facility fee: Rs + monthly ledger fee: Rs +Vat

Sector [.....] **Subsector** [.....]

RECOMMENDATIONS Recommended Not recommended

Please annex a separate sheet to the proposal in case any further information/ details/ documents are given to support the proposal.

Prepared by: Name Signature Date

Recommended by: Name Signature Date

REMARKS/ COMMENTS OF REVIEWING OFFICER AT CREDIT RISK UNIT

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COMMENTS/APPROVAL OF HEAD-CREDIT RISK

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APPROVING AUTHORITY

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