

**APPLICATION FOR FINANCE LEASE FACILITY - PERSONAL AND SELF-EMPLOYED**

Application Date .....

Relationship Manager .....

**APPLICANT DETAILS**

☐ New ☐ Existing  
Title ☐ Mr ☐ Mrs ☐ Miss  
Surname .....

First Names .....

NIC / Passport no

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Residential Address .....

Mailing Address (if different from above) .....

Nationality .....

Phone-Home .....

Phone-Mobile .....

Fax .....

Email .....

Marital Status

☐ Single ☐ Married ☐ Other (please specify) .....

Residential Status

☐ Home Owner ☐ Living with Parents ☐ Tenant

No of Children under 18 .....

**EMPLOYMENT DETAILS**

☐ Salaried ☐ Self-employed ☐ Other  
Present Occupation .....

Name of Employer .....

Employment – Permanent / Contractual basis (please specify) .....

Length of time in current Employment/Business .....

Monthly Salary .....

Spouse's Details

☐ Employed ☐ Other .....

**GUARANTOR / JOINT APPLICANT DETAILS (if applicable)**

☐ New ☐ Existing  
Title ☐ Mr ☐ Mrs ☐ Miss  
Surname .....

First Names .....

NIC / Passport no

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Residential Address .....

Mailing Address (if different from above) .....

Nationality .....

Phone-Home .....

Phone-Mobile .....

Fax .....

Email .....

Marital Status

☐ Single ☐ Married ☐ Other (please specify) .....

Residential Status

☐ Home Owner ☐ Living with Parents ☐ Tenant

No of Children under 18 .....

**GUARANTOR / JOINT EMPLOYMENT DETAILS (if applicable)**

☐ Salaried ☐ Self-employed ☐ Other  
Present Occupation .....

Name of Employer .....

Employment – Permanent / Contractual basis (please specify) .....

Length of time in current Employment/Business .....

Monthly Salary .....

Spouse's Details

☐ Employed ☐ Other .....

STATEMENT OF ASSETS AND LIABILITIES (Applicant)

Details of Assets/Immovable Properties .....

Details of Liabilities (Loans, Leases, Credit Cards, O/D etc.)	Outstanding Amount (MUR)	Monthly Repayment (MUR)
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

INCOME & EXPENDITURE STATEMENT (Applicant)

Monthly Income/Expenditure	Applicant	Spouse	Guarantor
INCOME			
Salary	.....	.....	.....
Other income (Self-employed)	.....	.....	.....
TOTAL MONTHLY INCOME	.....	.....	.....
EXPENDITURE			
Income TAX / PAYE	.....	.....	.....
Existing loan / Lease repayment	.....	.....	.....
Other expenditure	.....	.....	.....
DISPOSABLE INCOME	.....	.....	.....

DETAILS OF ASSET TO BE LEASED (Please provide Quotation/Pro-forma Invoice)

☐ New☐ Second-Hand

Supplier	.....	Cost of Vehicle/Equipment including VAT	.....
Make	.....	VAT Amount	.....
Model	.....	Initial Deposit Amount	.....
Year	.....	Lease Amount	.....
Insurance Company	.....	Lease Period (months)	.....
		Interest Rate (%)	.....
Source of Deposit	.....	Residual Value (%)	.....

Office Use Only

Documents Required (please tick if provided)	Additional information for Expatriates	Additional Information / Comments
<input type="checkbox"/> Proof of Identity (Copy of ID Card or Passport)	<input type="checkbox"/> Passport	.....
<input type="checkbox"/> Marriage Certificate (if applicable)	<input type="checkbox"/> Work Permit	.....
<input type="checkbox"/> Proof of Address (Not older than 6 months)	<input type="checkbox"/> Residence Permit	.....
<input type="checkbox"/> Bank Statements (for the last 6 months)	<input type="checkbox"/> Proof of address	.....
<input type="checkbox"/> Salary Slip (for the last 3 months)	<input type="checkbox"/> Banker's reference	.....
<input type="checkbox"/> Quotation of Vehicle		.....
<input type="checkbox"/> Survey report (where applicable)		.....
Additionally for self-Employed		.....
<input type="checkbox"/> Business Registration Card		BOM Sector: .....
<input type="checkbox"/> Trade licence / PSV licence		BOM Sub-Sector: .....
		Customer Risk Category: .....

BANK DETAILS

For standing Order Instructions

Bank ..... Branch Address .....

Account No.

ACCOUNT OPENING

I accept to open an account with ABC Banking Corporation Ltd as per details below:

Account No

Customer 1/Administrator 1 ..... Customer 2/Administrator 2 .....

CIF No  CIF No

Types of Account ☐ Savings Account ☐ Current Account

Product Name ..... Please specify currency .....

MODE OF OPERATION

The mode of operation on this Account will be (Please tick as appropriate)

☐ Singly by .....

☐ Either by ..... or .....

☐ Jointly by ..... or .....

CUSTOMER DECLARATION

I/We confirm that the information given is true, correct and complete and I/We understand that the facility if approved will be governed by the Laws of Mauritius. I/We understand that the Bank reserves the right to reject the application at its sole discretion without stating any reason.

Applicable for Credit Facility Application

I/We understand that the Bank of Mauritius has, in 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 authorise the Bank to investigate and verify all of the information provided and to exchange credit-related information and experience with other financial institutions. A photocopy of this document authorises other financial institutions to release to this Bank information about their credit experience with me/us. 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 authorise the Bank to do so.  
• it will be a term of the credit facility applied for, if granted, that information regarding it shall be given to MCIB for the use of MCIB and other banks.

Applicable for account opening:

I/We hereby confirm that the details and information given by me/us in support of the present application are true and correct. By signing this application form, I/We confirm that I/We have read and understood, and accept the terms and conditions attached to opening an account with ABC Banking Corporation Ltd and agree to comply with them. I/We are fully aware of the provisions applicable under the Financial Intelligence and Anti-Money Laundering Act 2002 and the Prevention of Corruption Act 2002. The true source of funds and purpose of transactions have been declared and all money will be duly accounted and no money laundering will be made.

I/We confirm that I/We have been recommended by ABC Banking Corporation Ltd to seek professional advice with regards to the optimal management of my/our assets before applying for this account.

I/We am/are fully aware that my/our personal data and information, submitted to ABC Banking Corporation Ltd, relating to my/our dealings with the banking services, will be delivered, handled and stored by a service provider and the bank assures its customers that section 64 of the Banking Act 2004, with respect to Confidentiality will be complied with in the process.

Signature ..... Signature .....

Name ..... Name .....

Date ..... Date .....

Office Use Only

Relationship Manager ..... Signature ..... Date .....

**RESIDENTIAL PLAN**

Name .....

Address .....