

## APPLICATION FOR FINANCE LEASE FACILITIES – SME & CORPORATE

Application Date .....

Relationship Manager .....

### COMPANY PARTICULARS

Corporate Name

.....

Corporate Status (i.e. Ltd Company/Société etc)

.....

Date of incorporation

.....

Registered Address

.....

.....

.....

Mailing Address

.....

.....

.....

Contact Person

.....

Email Address

.....

Office Phone no 1

.....

Office Phone no 2

.....

Mobile no

.....

Fax no

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### COMPANY PROFILE

Business Activity

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Main Clients

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Business Sector

.....

No. of Employees

.....

Annual Turnover

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### DETAILS OF SHARE CAPITAL, SHAREHOLDERS, DIRECTORS

Share Capital

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No. Shares Issued

.....

Shareholders

.....

.....

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.....

.....

Directors

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### STATEMENT OF ASSETS AND LIABILITIES (*Applicant*)

Details of Liabilities  
(Loans, Leases, Credit Cards, O/D etc.)

Outstanding Amount (MUR)

Monthly Repayment (MUR)

.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

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 (%)	.....

BANK DETAILS

For standing Order Instructions

Bank	.....	Branch Address	.....
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Account No. 

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GUARANTOR (if any)

Personal / Company details .....

Address .....

Tel ..... Home ..... Off .....

APPLICANT'S DECLARATION

We declare that the information presently stated in this application form is, to the best of our knowledge, true and correct. In case of approval, We give our consent and authorise you to send written confirmation of approval of the lease facilities to the Supplier/s.

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	.....	Date	.....
Name	.....	Title	.....

Any offer of lease facilities further to this application shall be subject to the terms and conditions of ABC Banking Corporation Ltd.

Office Use Only

Documents Required (please tick if provided)	Additional Information / Comments
<input type="checkbox"/> Certificate of Incorporation	.....
<input type="checkbox"/> Memorandum & Articles of Association / Constitution (if applicable)	.....
<input type="checkbox"/> Complete set of application for incorporation of the company	.....
<input type="checkbox"/> Valid Trade licence	.....
<input type="checkbox"/> Business Registration Card	.....
<input type="checkbox"/> Certificate of Current Standing" issued by the Registrar of Companies for businesses more than one year in operation.	.....
<input type="checkbox"/> Clear certified copies of Identity Cards / Passports and Proof of Residential address (less than 3 months old) of all directors, and ultimate Beneficial owner(s).	.....
<input type="checkbox"/> Audited Financial Statements for the past 3 years	.....
<input type="checkbox"/> Company Business Plan outlining the business activities, name of directors and shareholders, types of transactions and projected cash flows.	.....
<input type="checkbox"/> Change of name certificate (if applicable)	BOM Sector: .....
<input type="checkbox"/> Quotation of vehicle	BOM Sub-Sector: .....
<input type="checkbox"/> 6 last month Bank statements	Customer Risk Category: .....
<input type="checkbox"/> Board Resolution	
Relationship Manager .....	Signature .....
	Date .....

## MCIB DECLARATION

ABC BANKING CORPORATION LTD

CREDIT FACILITY FORM

Application by a Corporate Body

Name of Applicant .....

Address Residential .....

Business (if any) .....

Company No .....

Occupation/Business .....

Type/Amount of Facility requested/to be renewed .....

Other banks from with the applicant has obtained credit facilities .....

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 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\* 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.

\*Delete as appropriate

Signature(s) .....

Date .....

Name(s) in Block letters of person(s) signing:

Capacity of Signatory(ies):

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