



Investec Bank (Mauritius) Limited - Private Company / Public Company / Listed Company / Incorporated Partnership Account Application Form

Section 1: Account Information

"Account Holder" means the entity which owns the account, in whose name the account is opened and in whose favour Investec shall process credit and/or debit transactions in respect of the account.

"Investec" means Investec Bank (Mauritius) Limited.

"Online User" means the person(s) who will have access to the online banking platform of Investec, in respect of the account.

All correspondence by Investec to the Account Holder and Online User as may be applicable and in relation to the account, shall be transmitted by email.

1.1. Account Holder's details	
Private Company Public Company	Listed Company
Entity name	
Country of incorporation	
Date of incorporation	D D M M Y Y Y Y
Registration number	
Trading name (if any)	
Registered address	
Tax Residency(ies)	
Postal code	
Telephone number	
Fax number	
Email address	
Brief description of business including geographical location	
Where is the effective place of management	
Reason for opening a bank account in Mauritius	
Number of permanent staff employed (if applicable)	
Number of board members	
Please initial here	† Invested



Num	nber of signatories required				
Is the Entity a multi-national?				No	
If the	e Entity is listed, what is the name of the exchange				
on w	hich it is listed?				
Is th	e Entity a subsidiary of a listed company?	Yes		No	
If ye	s, name of listed company and name of exchange				
-	of balance sheet of Entity				
	it or loss amount of Entity				
	roximate initial deposit				
	en will the initial deposit be transferred?				
	rage value per transaction				
	imum value per transaction				
	•				
	ber of transactions per month				
	mated annual turnover on account				
Soul	rce of funds (eg. Loan/Equity/Business Revenue)				
0	6 W 61W 4 5 6 4 5				
	rce of wealth of Ultimate Beneficial Owner(s)	D			
require	as your wealth generated i.e. what economic activity generated your net worth? (led to substantiate from where your wealth originated). Failure to answer this sector erquired to provide documentary evidence of the source of your wealth.	Please tick the ion fully may re	appropria esult in a d	te box(es) and delay in or pre	d provide as much relevant information vent the opening of your account. You
	Personal savings/earned income (state time period)				
	Investments (shares, fixed income, collective investment	nt schemes	s. name	e which or	ne(s))
	The control (charge, investing, contesting investing)		,a		10(0))
	Sale of property/business (when, value, address)				
	Sale of property/business (when, value, address)				
	Inheritance/gift (from whom, year received, approximate	e value, ho	w did t	he giver o	create their wealth?)
	Other (please specify)				
In w	hich countries did you generate the majority of your wea	lth?			
	The second secon				
Inve	stec Group client?	Yes		No	
	s, where?				
-					
				F	Please initial here

1.2. Which Investe	c service(s) are yo	ou applying for?				
Online banking required Debit card required If yes, number of card Lending facility require Global custody Wealth & Investment s	holders ed		Yes	No No No No		
1.3. Account detail	ls					
Currencies USE Account type Call account Fixed account	GBP 1 month	EUR ZAR 3 months	AUD 6 months	CHF	MUR Other	
Interest Instruction						
Interest to be paid to the Account name Branch Account number On the maturity date of under the same perior least two (2) business account selected is av	of a Fixed account d at prevailing madays prior to the d	t, the deposit, toge arket interest rates ate of maturity. The	Bank Branch code Account type ether with interes	structions ar	re received by Inve	estec a
1.4. Director / Part	ner details					
Where the Director or Not applicable to Liste Title Surname First name(s) Mother's maiden name Date of birth Place of birth Profession Nationality(ies) Citizenship(s) Tax residency(ies) Residential address Mailing address	ed Companies (ple				quired)	
				F	Please initial here	
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Home telephone	Work telephone
Mobile number	Home fax number
Email address	
Passport(s) information (please complete for each	passport you have)
Passport country(ies) of issue Passpor	rt number(s) Passport expiry date
1.	
2.	
3.	
4.	
Investec Group client? If yes, where?	Yes U No U
-	Yes No
Is the Director/Partner an Authorised Signatory? Is the Director/Partner an Ultimate Beneficial Owner.	
Online access required?	Yes L No L
Nature of online access required	
☐ View only USD ☐ GBP ☐ EUR ☐	ZAR AUD CHF MUR Other
Capturer USD GBP EUR	ZAR AUD CHF MUR Other
Authoriser USD GBP EUR	ZAR AUD CHF MUR Other
Currency Dealer/Trader	ZAIC
1.5. Authorised Signatory (only in respect of Inc.	
Where the Authorised Signatory is an Entity please con	mplete 1.7 (please attach additional copies of the sheet as required)
Title	
Surname	
First name(s)	
Mother's maiden name	
Date of birth	
Place of birth	
Profession	
Nationality(ies)	
Citizenship(s)	
Tax Residency(ies)	
Residential address	
Troolad Mar address	
Home telephone	Work telephone
Mobile number	Home fax number
Email address	Tione lax number
Email address	
	Please initial here
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	t(s) information (please co		. ,	iave)	D	mant access	loto	
	t country(ies) of issue	Passport n	umber(s)		Pass	sport expiry o	ate	V
1							1 1 1	IV
2.						D M M	YYY	Y
3.					D	D M M	YYY	Y
4					D	D M M	Y Y Y	Y
Investec	Group client?					Yes	No	L
If yes, wl	here?							
Is the Au	thorised Signatory an Ultin	mate Beneficial Ow	ner (see de	finition in 1	.6)	Yes	No	
Online a	ccess required?					Yes	No	
Nature o	f online access required							
Viev	w only USD GBP	EUR Z	ZAR A	NUD	CHF	MUR	Other	
Cap	oturer USD GBP	EUR Z	ZAR 🗌 A	NUD	CHF	MUR _	Other	
Auth	noriser USD GBP	☐ EUR ☐ Z	ZAR 🗌 A	AUD 🗌	CHF	MUR	Other	
Curr	ency Dealer/Trader							
Transact	ion notification Email	Text	Transa	ction conf	irmation	Email	Text	L
	Ultimate Beneficial Owner							
,	only in respect of individua			ers or Auth	norised Sig	gnatories and	d not to be	9
	completed if the Account H	loluel is a Listeu Co	эпрапу).					
•	Not applicable to Listed	•						
•	Please attach additiona	al copies of the shee	et as require	ed				
ı	Ultimate Beneficial Owner	means:						
			.f - T		1 C	0)		41
1	 the Individual or a Tr event of a Foundation 				•	,	,	
	ultimately owns and/o							COL
2	2. the Individual or a Tr				•			n tl
	event of a Foundation	, please complete 1	1.6.3), includ	ding a nom	inee, who	/which, direc	tly or indir	ect
	ultimately owns and/o				lirectly or i	ndirectly, ow	ns or exer	cis
	control of 20% or more	·		Holder.				
1	I.6.1. Ultimate Beneficia	l Owner being an Ir	ndividual					
Title								
Surname								
First nan	` '							
Mother's	maiden name							
Date of b	pirth		D	D M M	YY	YY		
Place of	birth							
Profession	on							
Nationali	• ` '							
Citizensh	nip(s)							
Tax Resi	dency(ies)							
						Please initial h	ere	

Residential address	
Mailing address	
Home telephone	Work telephone
Mobile number	Home fax number
Email address	
Passport(s) information (please comple	ete for each passport you have)
Passport country(ies) of issue	Passport number(s) Passport expiry date
1.	D D M M Y Y Y
2.	
3.	D D M M Y Y Y
4.	D D M M Y Y Y
Investec Group client?	Yes No
If yes, where?	
Online access required?	Yes No
Nature of online access required	
☐ View only USD ☐ GBP ☐	EUR ZAR AUD CHF MUR Other
Capturer USD GBP	EUR ZAR AUD CHF MUR Other
Authoriser USD GBP	EUR ZAR AUD CHF MUR Other
Currency Dealer/Trader	
Transaction notification Email	Text Transaction confirmation Email Text Text
1.6.2. Ultimate Beneficial Ow	ner being a Trust
Name of Trust	
Name of Trustee(s)	
Name of Settlor(s)	
Country of establishment	
Date of establishment	
Registration number (if any)	
Trading name (if any)	
Registered address	
Postal code	
Telephone number	
Fax number	
Email address	
Investec Group client?	Yes No
If yes, where?	
	Please initial here
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1.6.3. Ultimate Beneficial Owner being a Foundation	on
Name of Foundation	
Name of Councillor(s)	
,	
Name of Founder(s)	
Country of establishment	
Date of establishment	D D M M Y Y Y
Registration number (if any)	
Trading name (if any)	
Registered address	
Postal code	
Telephone number	
Fax number	
Email address	
Investec Group client?	Yes No
If yes, where?	
1.7. Director, Partner or Authorised Signatory being a Priva	vate Company or Incorporated Partnership
Director Authorised Signatory	
Name	
Country of incorporation	
Date of incorporation	D D M M Y Y Y
Registration number (if any)	
Trading name (if any)	
Registered address	
Postal code	
Telephone number	
Fax number	
Email address	
Investec Group client?	Yes No
If yes, where?	
	Please initial here

1.8. Online User d	letails				
To be completed only if Please attach addition			Director / Partner	and/or Ultimate Beneficial Owr	ner
Title					
Surname					
First name(s)					
Mother's maiden nam	ne				
Date of birth			D D M M	YYYY	
Place of birth					
Profession					
Nationality(ies)					
Residential address					
Home telephone			ork telephone		
Mobile number		Но	me fax number		
Email address					
Passport(s) information					
Passport country(ies)	of issue	Passport number	(s)	Passport expiry date	
1.				D D M M Y Y	YY
2.				D D M M Y Y	YY
3.				D D M M Y Y	YY
4.				D D M M Y Y	YY
Investec Group client	?			Yes L	10
If yes, where?					
Online access require	ed?			Yes L	10
Nature of online acce	ss required				
☐ View only USI	D GBP	EUR ZAR	AUD	CHF MUR Other	
Capturer USI	D GBP	EUR ZAR	AUD	CHF MUR Other	
Authoriser USI		EUR ZAR	AUD	CHF MUR Other	
Currency Dealer/	Trader				
Transaction notification	on Email 🗌	Text T	ransaction confi	rmation Email 🗌 Te	ext
				Please initial here	

1.	9.	Due	Diligence	documents
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Please refer to the Due Diligence checklist.

1.10. Declaration and Undertaking

- 1. The decision to open the account(s) is within the sole and absolute discretion of Investec.
- 2. We, the undersigned, warrant that the information supplied by us in the Account Application Form, whether completed by us or not, and supporting documents is true, correct, current and complete in every respect and we declare that we have read and understood the Terms and Conditions ("Conditions") set out in the Information Pack, and agree to be bound thereby, as well as to any Conditions that Investec may add/amend from time to time.
- We, the undersigned, hereby undertake to inform Investec of any change in the information provided by us in this Account Application Form and authorise Investec to obtain independent verification of 3. any data provided.
- If any information provided in the Account Application Form, changes materially, is false and/or 4. misléading, Investec reserves the right, in its sole discretion, to close the account(s).
- We acknowledge and understand that on approval of this application by Investec, we will not automatically qualify for all or any of Investec's services. These limitations may relate to particular services or legal and regulatory constraints. 5.
- 6. We agree:
- that the Conditions constitute our agreement with Investec for any account; 6.1.
- 6.2. that we will be bound by the Conditions immediately when my/our card, card number or the account number is used. We acknowledge that the Conditions are available on a printable web-page and that we can access the Conditions on www.investec.com.
- 6.3. that we are principally liable for our obligations and, applicable only to the Account Holder(s), for the obligations of any extra Account Holder.

Signature of Authorised Signatory	Signature of Authorised Signatory	Online User (if applicable)
Name	Name	Name
Date D M M Y Y Y Y	Date D M M Y Y Y	Date D D M M Y Y Y Y

Self-Certification Section 2:

To be completed and signed by the Account Holder.

For the purposes of the Foreign Account Tax Compliance Act ("FATCA"), the related Intergovernmental Agreement ("IGA") and the OECD Common Reporting Standard ("CRS"), Investec is obliged to collect information about each Account Holder's tax obligation(s) and citizenship(s), as applicable. In certain circumstances, Investec may be obliged to report this information to the Mauritius Revenue Authority.

Terms referenced in this form shall have the same meaning as applicable under the relevant IGAs, local Regulations and/or local Guidance Notes.

Tax rules are very complex and we strongly recommend that you seek the assistance of a professional tax advisor when completing this form. Should any information provided change in the future, please advise Investec immediately.

2.1. Account Holder's Tax Status
Please list all the countries where the Entity is resident for tax purposes. Opposite each country, please stipulate the Tax Identification Number (" TIN "), issued to the Entity in that country. If that country does not issue a TIN please stipulate an equivalent number, for example a registered number or similiar official identification number and insert a tick in the box "No TIN".
Country TIN No TIN
2.2. Classification of Entities
Please tick the relevant classification under FATCA for this Entity.
Registered deemed compliant Participating FFI/Model 1 or IGA FFI Sponsored FFI Certified Deemed compliant FFI Active NFFE Passive NFFE- Please also complete section 2.3. below Direct reporting NFFE Non-participating FFI Trustee documented trust Exempt beneficial owner Is the classification of this Entity under CRS different from its classification under FATCA? Yes No If yes, please stipulate the classification Does the Entity have a Global Intermediary Identification Number ("GIIN") issued by the US Internal Revenue Service? Yes No If it does, please provide the GIIN Is a sponsoring entity acting on behalf of the Entity to perform all due diligence withholding and reporting obligations under FATCA/CRS? Yes No
Please initial here

If it does, please prov							
Name of sponsoring of GIIN	entity						
2.3. If the Entity is	s a Passive NF	FFE, please provide	the details of the Con	trolling	Persons		
The Controlling pers ownership is greater	on is a naturathan 20%), or	al person who exerc settlor, or trustee, or	cises control over an protector, or beneficia	entity aries, o	(being wh r class of b	ere pero peneficia	centage of
Controlling Person's	s details (1)						
Title							
Surname							
First name(s)							
Date of birth			D D M M	YY	YY		
Place of birth							
Nationality(ies) Citizenship(s)							
Residential address							
rtoolaorillar aaarooo							
Mailing address							
3							
Home telephone			Work telephone				
Mobile number			Home fax number				
Email address							
Passport(s) information Passport country(ies) 1 2 3 4 Country of Tax Obligation) of issue	Passport num		Pa	D M	m y m y m y m y m y m	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Controlling Person's Title Surname First name(s) Date of birth Place of birth Nationality(ies) Citizenship(s) Residential address Mailing address Home telephone	s details (2)		Work telephone	Y Y	Y Y		
					Please ini	ial here _	
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Mobile number			Home	fax number								
Email address												
Passport(s) inform	nation (please comp	lete for each	passport you	ı have)								
Passport country(ies) of issue Passport			t number(s)	,	Passport expiry date							
1.			. ,		D	D	M	M	Υ	Υ	Υ	Υ
2.					D	D	M	M	Υ	Υ	Υ	Υ
3.					D	D	M	M	Υ	Υ	Υ	Υ
4.					D	D	M	M	Υ	Υ	Υ	Υ
Country of Tax Ob	oligation	TIN										
2.4 Declaration	on and Undertaking											
We acknowledge Self-Certification of specified by Investigation	ne information provion that Investec may redocument. We agree tec in its request.	quest additio e to comply a	nal informatio at all times w	on/or docume vith such a red	quest fro	om I	nves	stec,	wit	hin 1	the	time
to be incorrect or	incomplete.								-			
Full Name												
Date					Signat	ure (of Au	utho	rise	d Się	gna	tory