

Out of the Ordinary



Investec Bank (Mauritius) Limited

Finance Application Pack



In returning this Pack, you should have:

- Read and understood all sections
- Signed and dated sections 2, 3 and 4





Finance Application Pack

Section 1	Account holder(s) information
Section 2	Personal statement of asset and liabilities
Section 3	Personal statement of monthly income and expenditure
Section 4	Declaration

Specialised Finance and Lending
Investec Bank (Mauritius) Limited
6th Floor, Dias Pier Building
Le Caudan Waterfront
Le Caudan, Port Louis
Mauritius
Tel No: (230) 207 4000
Facsimile: (230) 207 4002
E-mail: infomru@investec.co.mu
Website: <http://www.investec.com>

Section 1 – Account holder(s) information

Name of you Private Banker Tel Fax

Have you dealt with Investec before? Yes No

If yes, under what name/s are your facilities

Personal details

Title	<input type="text"/>	First name(s)	<input type="text"/>	Surname	<input type="text"/>	Known as	<input type="text"/>
Date of birth	<input type="text"/>	Place of birth	<input type="text"/>	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Citizen status (please tick appropriate box):		Permanent resident of SA	<input type="checkbox"/>	Foreign temporary resident of SA	<input type="checkbox"/>	Other	<input type="checkbox"/>
Nationality	<input type="text"/>	ID no	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Passport no	<input type="text"/>	Passport expiry date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Work tel no	() <input type="text"/>	Work fax no	() <input type="text"/>	Home tel no	() <input type="text"/>	Home fax no	() <input type="text"/>
Mobile no	<input type="text"/>	E-mail	<input type="text"/>				
Postal/Statement address			Residential address (domocilium citandi et executandi)				
<input type="text"/>			<input type="text"/>				
<input type="text"/>			<input type="text"/>				
Postal code			<input type="text"/>	Postal code			<input type="text"/>
Details of next of kin (not residing with you):				Period at this address		Years	Months
First name	<input type="text"/>			Tenant	<input type="checkbox"/>	Owner	<input type="checkbox"/>
Surname	<input type="text"/>			If a tenant, please provide Landlord details:			
Relationship	<input type="text"/>			Landlord's full name <input type="text"/>			
Contact number(s)	<input type="text"/>			Contact number(s) <input type="text"/>			
Postal address	<input type="text"/>			Postal address <input type="text"/>			
<input type="text"/>			<input type="text"/>				
<input type="text"/>			<input type="text"/>				
Postal code			<input type="text"/>	Postal code			<input type="text"/>
Send correspondence by	<input type="checkbox"/>	E-mail	<input type="checkbox"/>	Post	<input type="checkbox"/>	Fax home	<input type="checkbox"/>
If statement is to be addressed to person(s) other than Borrower, please provide details:							
<input type="text"/>							

Marital status

Married	<input type="checkbox"/>	Single	<input type="checkbox"/>	Divorced	<input type="checkbox"/>	Number of dependants	<input type="text"/>
If married, indicate marital contract:		Antenuptial Contract	<input type="checkbox"/>	Community of Property	<input type="checkbox"/>		
Spouse details: <input type="text"/>							
Employer	<input type="text"/>			Position	<input type="text"/>		
Period employed	<input type="text"/>			Occupation	<input type="text"/>		

Qualifications

Please provide details of your highest qualifications:

Qualification	<input type="text"/>	Year	<input type="text"/>	University	<input type="text"/>
Qualification	<input type="text"/>	Year	<input type="text"/>	University	<input type="text"/>
Spouse's qualification	<input type="text"/>	Year	<input type="text"/>	University	<input type="text"/>

Financial requirements

If you would like the finance to be in a name other than your own:

Entity name										
Entity type	Close Corporation		Partnership		Association		Private Company		GBL 1	GBL 2
	Listed Company		Trust		Individual					
Registration no	Nature of business and sector									
Please indicate the type of facility required:		Currency	Amount		Terms in months		Residual %			
Property										
Secured loan/Guarantee										
Aircraft/Equipment/Asset finance										
Other, please specify										
Should financial requirement be for property, please specify if the borrower will occupy the property							Yes		No	

Additional documents that will be required

- Personal statement of assets and liabilities (see section 2)
- Proof of major assets and liabilities listed
- Proof of income such as a payslip or copy of Income Tax return



Section 2 - Personal statement of assets and liabilities

Name			Client		Spouse	
Fixed property						
Address			Asset	Liability	Asset	Liability
Date acquired			Cost (incl. improvements)			
1.						
2.						
3.						
Investments						
Cash and bank balances						
Unit trusts						
Listed shares:						
Company name			No. of shares			
1.						
2.						
3.						
Unlisted investments						
Company name			No. of shares			
1.						
2.						
3.						
Other assets						
Motor vehicles:						
Make and model			Cost			
1.						
2.						
Equipment						
Furniture						
Debtors						
Other (details)						
Other liabilities						
Unsecured borrowings			Bank			
Overdrafts						
Unsecured loans						
Credit cards						
Contingent liabilities (for example suretyships)						
1.						
2.						
Totals						
Net assets (assets – liabilities)						

I warrant that the information contained herein is true and correct.

Signature _____ Date _____

Section 3 - Personal statement of monthly income and expenditure

Name	Client	Spouse
Income		
Salary		
Commission		
Other income		
Source of other income:		
1.		
2.		
Total		
Expenses		
Salary deductions ie. tax, pension etc.		
Medical aid (unless a salary deduction)		
Bond repayment/Rent		
Car repayment		
Loan Repayment		
1. Student loan		
2. Department stores		
3. Credit cards		
4. Other		
Food		
Water, electricity, rates and taxes		
Petrol and vehicle maintenance		
Insurances		
1. Life		
2. Motor vehicle		
3. Household		
Savings eg. Unit trusts		
Maintenance/Alimony		
Entertainment		
Education		
Clothing		
Other		
Totals		
Net surplus/(deficit)		

I warrant that the information contained herein is true and correct.

Signature _____ Date _____





Section 4 - Declaration

I/We, the undersigned, warrant that all the information contained herein is true and correct in every respect and that where this application is signed in a representative capacity. I/we have the capacity to do so and that the transaction is within my/our powers.

	1	2	3	4
Signature				
Name				
Date				
Capacity				

To assist us in our market research, would you please indicate where/how you first heard of Investec Bank (Mauritius) Limited. Your assistance would be greatly appreciated.

- Advertising (please indicate which publication) _____
- Recommendation Previously held an account Other (please specify) _____
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