

I. IDENTIFICATION & ACTIVITIES

Company Name:			
Address:			
Telephone No:		Fax no.:	
Email Address:			
Web Site:			
VAT Number:			
Business Registration Number:			
Legal Status:		Capital:	
Date of Incorporation:			
Main Activities (%):			
Other Activities (%):			
Trademarks:			

2. SHAREHOLDING

(Individual: surname and first name - Company/ Partnership: name)

	%:
	%:
	%:
	%:

3. ANNUAL TURNOVER

	Year n-3 Turnover (VAT EXCL.)	Year n-2 Turnover (VAT EXCL.)	Year n-1 Turnover (VAT EXCL.)	Estimated Turnover (VAT EXCL.)
Local				
Export				
Total				

4. TURNOVER WITH CORPORATE BODIES FOR THE LAST 12 MONTHS (VAT INCLUSIVE)

Month	Turnover	No. of invoices	Amount of credit notes	No. of credit notes
TOTAL				

5. SUPPORTING DOCUMENTS**

(please tick where appropriate)	
Purchase Order	
Delivery Note	
Combined Invoice & Delivery Note	
Contract	
Confirmation Order	
Others (please indicate)	

** Supporting Documents relative to a transaction to be provided including copy of an invoice.

6. LIST OF MAIN DEBTORS**

Legal name	Annual Turnover (VAT incl.)	Country	Currency of Invoice	Payment Terms

**Continue on a separate list if necessary

7. SUPPLIERS WHICH ARE ALSO DEBTORS

Legal Name	Activity

8. RELATED ENTITIES TRANSACTIONS

Legal Name	Activity

9. FINANCIAL RELATIONS

Name	Overdraft facilities (MUR)	Loans (MUR)	Import Facilities (MUR)	Leasing (MUR)

10. OTHER FINANCIAL AND CREDIT RISK PARTNERS

Partner	Name	Signing date
Credit Insurer		
Debt Collection Agency		
Factoring company		

11. MRA (TAX / VAT)

VAT Declaration Period (Monthly, Quarterly)	
VAT due and not yet paid	
Income Tax due and not yet paid	

12. DECLARATIONS

The undersigned formally certifies that the above information provided in this declaration form, as well as on all attached documents is true and correct to all intents and purposes. This information is hereby passed on to MCB Factors Ltd for the purpose of conducting a risk analysis without any commitment whatsoever on part of MCB Factors Ltd to proceed further with any application made by the undersigned. MCB Factors Ltd reserves the right in its sole and absolute discretion to enter into any transaction with or make any offer to the undersigned. The undersigned also hereby authorizes MCB Factors Ltd to submit information contained in the present document to its credit insurer and correspondents for evaluation purposes.

Name:

Date:

Signature and company's seal:

PLEASE NOTE THAT INFORMATION REQUESTED IN THIS DOCUMENT IS NOT EXHAUSTIVE & MCB FACTORS LTD RESERVES THE RIGHT TO ASK FOR ANY ADDITIONAL INFORMATION NEEDED TO COMPLETE APPLICATION.

13. DOCUMENTS REQUIRED (Copies):

Certificate of Incorporation/Memorandum of Association/Latest annual return	
Business Registration Card	
VAT Certificate	
Latest Audited Accounts or Management Accounts	
Statement of liabilities**	
Latest Ageing list of debtors**	
Latest Ageing list of creditors**	

** Documents provided must not be more than one month old

FOR OFFICE USE ONLY

Date received: _____ Officer's signature: _____

I4.AUTHORITY TO COMMUNICATE

YOUR LETTER HEAD

Date: _____

The Manager
The Mauritius Commercial Bank Limited

Dear Sir,

Authority to communicate information to MCB Factors Ltd.

We hereby formally authorize you, The Mauritius Commercial Bank Ltd, in accordance with Section 64(2) of the Banking Act 2004, to disclose and provide to MCB FACTORS LTD any relevant information with respect to _____
_____ requested from time to time by MCB Factors Ltd, as part of its overall risk assessment procedures.

The foregoing is a standing instruction and shall remain in force until formally revoked in writing.

Yours faithfully,

Authorised Signatory

Authorised Signatory

Name

Name

Company Seal	
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