

Individual Self-Certification

## This form can be filled in on a computer; alternatively please print and complete fields in CAPITAL letters using black ink and tick ( - ) where appropriate.

Tax Regulations<sup>1</sup> applicable to financial institutions require MCB Ltd to collect and report certain information about each account holder's tax residency and in certain circumstances, citizenship status.

This form is designed to capture the tax residency and in certain circumstances, the citizenship, of the person entitled to the income and assets associated with an account. Should you be completing this form on behalf of the account holder, you should complete same using information relating to the tax residency and if applicable, the citizenship of the account holder rather than your own.

Please complete, where applicable, the relevant sections below in relation to all relevant accounts and provide any additional information as may be required. Please be advised that in certain circumstances, MCB Ltd may be required to share this information through the Mauritius Revenue Authority with the tax authorities of another country or countries in which the account holder may be tax resident.

If you have any questions about how to complete this form including defining your tax residency status, please contact your tax adviser.

You can also find out more, including a list of jurisdictions that have signed agreements to automatically exchange information, along with details about the information being requested on the OECD's Automatic Exchange of Information (AEOI) website: www.oecd.org/tax/automatic-exchange/

Do not use this form if you are an entity.

1. Customer Identification					
Customer's Information					
First Name(s):					
Last Name:					
Maiden Name: Where applicable					
Country of Birth:		Date:	/	/	(dd/mm/yyyy)
Permanent Residential Address					
Street:					
Province, State					
or Town:					
Postal					
Code:	City:				
Country:					
Mailing Address (if different from above):					
Street:					
Province, State					
or Town:					
Postal					
Code:	City:				
Country:					

<sup>1</sup>The term "Tax Regulations" refers to regulations implemented in Mauritius to enable automatic exchange of financial account information and include the Agreement for the Exchange of Information Relating to Taxes (United States of America- FATCA Implementation), Regulations 2014 and the regulations implemented in connection with the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information (CRS).

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Initials:

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Declarant's Information					
To be completed if the declarant is different from the person for who	om the business	relationship is	to be establ	lished or to be	continued.
Declarant's Name(s):					
Relationship with Customer:					
Country of Birth:		Date:	/	/	(dd/mm/yyyy)
Permanent Residential Address					
Street:					
Province, State					
or Town:					
Postal					
Code:	City:				
Country:					
Mailing Address (if different from above):					
Street:					
Province, State					
or Town:					
Postal					
Code:	City:				
Country:					

## 2. Tax Residency Information

For the purposes of taxation, you hereby certify that you are a resident in the following countries and your Tax Identification Number (TIN)/ functional equivalent in each additional country is set out below or you have indicated that a TIN/functional equivalent is unavailable and explained the reasons why.

	Jurisdiction(s) of Residence for Tax Purposes	TIN	Alternate Identification Type	Alternate Identification Number
1.				
2.				
3.				
4.				

If no TIN is available, please provide the appropriate reason by ticking one of the boxes below and kindly submit an Alternate Identification Number (e.g. social security number/ national insurance number/ citizen or personal identification code or number/ resident registration number) specifying the type thereof.

The country where you are liable to pay tax does not issue TINs to its residents.

Any other reason, please specify:

Tax Residency – Nil

I hereby confirm that I have no residence for tax purposes and undertake to provide a reasonable explanation and the relevant supporting documentation thereof.

## **AUTHORISATIONS AND UNDERTAKINGS**

- 1. I authorise MCB Ltd to provide information contained in this form and information regarding the account holder and any accounts maintained by MCB Ltd, directly or indirectly, to domestic and/or overseas tax authorities, as may be required pursuant to intergovernmental agreements to exchange financial account information and/or the Tax Regulations.
- 2. I certify that I am the beneficial owner (or am authorised to sign for and on behalf of the account holder) of all the income and assets associated with an account to which this form relates or that I am using this form to document myself as an individual that is an owner of an account held at MCB Ltd.

I undertake to notify MCB Ltd within 30 days of any change in circumstance which affects my tax residency status and/or to the above information and to provide MCB Ltd with a suitably updated self-certification form within 30 days of such change in circumstances.

I declare that all the information provided on this form is true, correct, and complete and I undertake to indemnify MCB Ltd and its Officers in the event I would have made any misstatement in this certificate.

Please sign	below:			
$\sim$	Signature:	Signature: If more than one signature needed		
	Name:	Name:		
	Date:	/ / (dd/mm/yyyy)		
If you have signed this on behalf of the account holder please indicate the capacity in which you have acted here:				
(If you have sig	gned under a pow	of attorney, please also attach a certified copy of the power of attorney).		