

## APPLICATION FOR ISSUE OF BANK GUARANTEE

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. 1. Customer Details Name of Applicant: For Individual please specify full name. In case of legal entity please specify full name of Company, Society or Association Address: Street & city Postal Code: Country: Email: Maximum 40 characters Phone Mobile Fax Number: Number: Number: **Contact Person** Only applicable in case of Corporate Customers Name: 2. Beneficiary Details Name of beneficiary: Address of beneficiary: 3. Bank Guarantee Details Currency and guarantee amount: % of contract value (CCY) Amount: In words Validity Period: Expiry date: (dd/mmm/yyyy) Unlimited If limited validity period Claim end date: (dd/mmm/yyyy) e.g. 01/JAN/2010 Purpose of Guarantee: Description of works Contract Number: If applicable **Type of Guarantee** Bid Bond Closing: date / /  $(\mbox{\scriptsize dd/mmm/yyyy})$  and time (hh:mm) Duration: Days Weeks Months Advance Payment Guarantee Cheque Guarantee Performance Guarantee **Retention Money Bond** Loan Guarantee Payment Guarantee **Customs Guarantee Expatriate Guarantee** Miscellaneous Guarantee

Initials:		

Please refer to Note at verso of the form

Testimonials – approximate contract value:								
With commitment OR Without commitment								
% Performance Guarantee % Advance Payment Guarantee								
Specimen of guarantee: MCB's standard specimen Specimen as per enclosure								
BY SWIFT (if applicable)								
Foreign Ban	k:							
City and Co	untry							
city und co								
Contact Nar	ne (of collection in foreign country):							
Phone Number:		Mobile Number:		ax umber:				
National ID:								
Passport Nu	mber:							
Community	iah Limia d Volidik . Donio d							
	<b>ith Limited Validity Period</b> se you to debit my/our <sup>*</sup> account numbe	r 0 0 0	for	relative bank charges and/c	laim(s) if any			
			101	relative ballk charges allu/c	iaiiii(3) ii aiiy.			
	ith Unlimited Validity Period							
	ise you to debit my/our* account numl			or relative yearly bank cha	_			
original bank guarantee is returned to the bank for cancellation or renewal of the bank guarantee where applicable and claim(s) if any.  I/We* formally acknowledge that the bank shall have a right of set-off in virtue of Article 2150 of the Mauritian Civil Code, in respect of any money								
due by and d	emandable from me/us* under these p	resents, against all or any part	of all monies standing	g to the credit of my/our* a	accounts.			
*Strike out and initialise as appropriate								
Please sign below: Authorised Signatory(ies)								
	Signature:		Signature:					
			If more than one signature needed					
	Name:		Name:					
	Date: / /	(dd/mmm/yyyy)						
	e.g. 01/JAN/2010	(33/1111111/9999)						
			Company Seal: If applicable					

- The Guarantee will be delivered at our counters within 3 clear working days if all prerequisites are met.
- For cancellation, the original guarantee and a covering letter must be submitted and a cancellation fee shall be charged as published.
- Bank guarantees, if uncollected within 10 working days from notification date, shall be automatically cancelled in our books and the minimum fee applicable at such time, shall be debited from your account.
- Expatriates are required to produce the following documents:
- i. Photocopy of passport if the request is in favour of Government of Mauritius
- ii. Copy of letter from the Ministry of Labour if request is in favour of the Ministry of Labour
- $iii. \ Copy \ of \ letter \ from \ Passport \ and \ Immigration \ Office \ if \ request \ is \ in \ favour \ of \ Passport \ and \ Immigration \ Office$
- Contact number for any query: 202 6060 Email: tradefinance.bankguarantees@mcb.mu