



MAURITIUS HOUSING COMPANY

Foreign Account Tax Compliance Act (FATCA) Assessment Form

Self Certification Form (Individual)

The fields should be filled in CAPITAL letters and tick (✓) where required

CIF Reference:

1. PERSONAL INFORMATION

A. Personal Details

Title: Mr Mrs Miss Other, please specify

Surname: First Name:

Maiden Name:

(If applicable)

Marital Status: Single Married Widow/er Divorced

NID No.: Passport No.:

Date of Birth: / / Nationality:

B. Place of Birth

City or Town of Birth: Country of Birth:

C. Address Details

Residential Address: Postal Address:

Country: Country:

ISO Country Code: ISO Country Code:

Postal/ZIP Code:

D. Contact Details

Residential No.: Mobile No.:

Office No.: Email Address:

E. Occupation Details

Designation: Employer:

Sector:

Employed since: / / Local: Foreign:

Salary Currency: Monthly Salary:

(e.g MUR, EUR, USD etc)

Please state the number of dependents you have:

2. TAX RESIDENCY INFORMATION

Tax Regulations applicable to financial institutions require The Mauritius Housing Company Ltd (MHC Ltd) to collect and report certain information about each account holder's/ Beneficial Owner's (B.O) tax residency and in certain circumstances, citizen status.

Please complete, where applicable the relevant sections overleaf. In that respect, please be advised that in certain circumstances, The MHC Ltd may be required to share this information through the Mauritius Revenue Authority with tax authorities of another country or other countries in which the account holder/B.O may be tax resident.

Initials:.....

PORT LOUIS, MHC Building Reverend Jean Lebrun St. Tel : 405 5555 Fax: 212 3325	CUREPIPE Charles Lees St. Tel : 676 0245/46/49 Fax: 676 0248	GOODLANDS Blk A2 Cnr Royal Road & Route Les Pensees. Tel : 282 1460/42 Fax: 282 1461	FLACQ Francois Mitterand St. Tel: 413 5139/40 Fax: 413 5138	BAMBOUS Royal Road Tel/Fax : 452 0372	TRIOLET Royal Road 8eme Mille Tel : 261 7623 Fax : 261 5324	RODRIGUES Camp Du Roi Tel : 831 1787 Fax : 261 5324	MOKA Avenue Ledezio, Tel : 460 1234	ROSE BELLE Domah Com, Centre Royal Rd Tel : 660 9787
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If you have any question about how to complete this form, including defining 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: <https://www.oecd.org/tax/automatic-exchange/> .

Further information about the implementation of FATCA in Mauritius is accessible at <https://www.mra.mu/download/FATCAGuidance140515.pdf> .

For the purpose 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 as set out below or indicate that a TIN/ functional equivalent is unavailable.

Jurisdiction 1

TIN (1) As applicable:

Additional Jurisdiction (2)

As applicable:

TIN (2)

Additional Jurisdiction (3)

As applicable:

TIN (3)

If no TIN is available, please provide the appropriate reason by ticking one of the boxes below:

The country where you are liable to pay tax does not issue TINs to its resident: Yes Other reason (Please fill in below)

Other reasons for non-availability of your TIN:

3. BANKING TRANSACTION REGULATORY INFORMATION

3.1 Purpose of Relationship (The list is available on Page 5)

3.2 Source of Funds (Income/Revenue)

Source Type	Amount (In Figures)	Currency (e.g., MUR, EUR, USD)	Frequency
Salary Rent Dividend			
Rent			
Dividend			
Business Dividend			
Pension			
Interest			
Other, Please specify,			

3.3 Source of Wealth (Provide Full Details)

Initials:.....

PORT LOUIS,
MHC Building
Reverend Jean
Lebrun St.
Tel : 405 5555
Fax: 212 3325

CUREPIPE
Charles Lees St.

Tel :
676 0245/46/49
Fax: 676 0248

GOODLANDS
Blk A2 Cnr Royal
Road & Route Les
Pensees.
Tel : 282 1460/42
Fax: 282 1461

FLACQ
Francois Mitterand
St.
Tel: 413 5139/40
Fax: 413 5138

BAMBOUS
Royal Road

Tel/Fax : 452 0372

TRIOLET
Royal Road
Seme Mille
Tel : 261 7623
Fax: 261 5324

RODRIGUES
Camp Du Roi

Tel : 831 1787
Fax : 261 5324

MOKA
Avenue Lecezio,

Tel : 460 1234

ROSE BELLE
Domah Com, Centre
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4. Authorisation and Undertaking

I authorise The Mauritius Housing Company Ltd (MHC Ltd) to provide, directly or indirectly, to domestic and/or overseas tax authorities any information that MHC Ltd may have in its possession on me and I declare that all statements made in this document are correct and complete.

(i) I undertake to indemnify The MHC Ltd and its designated Responsible Officer in the event I would have made any misstatement herein and inform the Company as soon as possible, should any certification on this statement become incorrect.

(ii) I undertake to inform The MHC Ltd within 30 days, should any certification on this statement become incorrect or incomplete.

NAME:

SIGNATURE:

DATE:

Initials:.....

OFFICE USE ONLY

The data as per the document provided by customer are the same as information provided in this form

	NAME	SIGNATURE	DATE
MAKER			
CHECKER			

PORT LOUIS, MHC Building Reverend Jean Lebrun St. Tel : 405 5555 Fax: 212 3325	CUREPIPE Charles Lees St. Tel : 676 0245/46/49 Fax: 676 0248	GOODLANDS Blk A2 Cnr Royal Road & Route Les Pensees. Tel : 282 1460/42 Fax: 282 1461	FLACQ Francois Mitterand St. Tel: 413 5139/40 Fax: 413 5138	BAMBOUS Royal Road Tel/Fax : 452 0372	TRIOLET Royal Road Seme Mille Tel : 261 7623 Fax : 261 5324	RODRIGUES Camp Du Roi Tel : 831 1787 Fax : 261 5324	MOKA Avenue Ledezio, Tel : 460 1234	ROSE BELLE Domah Com, Centre Royal Rd Tel : 660 9787
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ANNEXURE

Please tick as appropriate

SECTION A		Yes	No
1.	Are you a US citizen?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you have a US Green Card?*	<input type="checkbox"/>	<input type="checkbox"/>
3.	Are you taxable in the US?*	<input type="checkbox"/>	<input type="checkbox"/>
4.	Were you born in US?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Do you have a US passport?*	<input type="checkbox"/>	<input type="checkbox"/>
6.	Is your country of residence US?	<input type="checkbox"/>	<input type="checkbox"/>
7.	Do you have a current US residence or mailing address?*	<input type="checkbox"/>	<input type="checkbox"/>
8.	Do you have a current US landline phone number?*	<input type="checkbox"/>	<input type="checkbox"/>
9.	Do you maintain an "in care of" or a "hold mail" US address?*	<input type="checkbox"/>	<input type="checkbox"/>
10.	Have you lived or worked in US during the past 3 years?*	<input type="checkbox"/>	<input type="checkbox"/>
11.	Do you have any income from US source?* (See note 1)	<input type="checkbox"/>	<input type="checkbox"/>
12.	Do you have standing instructions to transfer funds to an account maintained in the US, or instructions regularly received from a US address?*	<input type="checkbox"/>	<input type="checkbox"/>
13.	Have you granted signatory authority to a person with US address?*	<input type="checkbox"/>	<input type="checkbox"/>
14.	Do you have 10% or more interest by vote or value in a US company?*	<input type="checkbox"/>	<input type="checkbox"/>

*If you have answered "Yes" to any of the above, please complete Section B.

Note 1: Income can be interest, dividend, rent, salary, wage, premium, annuities, compensations, remuneration, emoluments and other fixes or determinable annual or periodic gains, profits and income from US sources. Also include gross proceeds from sale or other disposition of any property of a type which can produce interest or dividend from US sources.

SECTION B		DETAILS	
1.	US Green Card No.		
2.	US Tax Identification Number (TIN)		
3.	US Passport No.		
4.	US Mailing Address		
5.	US Landline Phone Number		
6.	US "in care of" / "hold mail" address		
7.	Expected annual income from US (in \$)		
8.	Type of fund transferred to the US		
9.	Name/s of US authorised signatory		
10.	Name/s of US company in which you have 10% or more interest by vote or value		
Dates you have been in US during the past 3 years and reasons for stay			
From		To	Stay Purpose
11.	a		
	b		
	c		

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IMPORTANT NOTE

The Mauritius Housing Company Ltd hereby informs you that if you are connected to the US (for example if you are a US citizen or resident or receive any fixed or determinable, annual or periodic income from the US), MHC Ltd may be obliged to report information related to your account to its competent local tax authority which will in turn pass on the information to the competent tax authority in the United States.

SECTION C: DECLARATION

I am/ am not a US citizen or US resident or taxable under the US laws. I confirm that all the information provided above is true and correct.

I understand it is my responsibility to inform The MHC Ltd of any changes regarding my personal and tax status.

I am aware that The MHC Ltd shall be required to disclose and report to its competent local tax authority any personal tax information, financial account information or any additional due diligence information obtained from me in compliance with the FATCA regulations.

NAME:

SIGNATURE:

DATE:

Initials:.....

FATCA CLASSIFICATION:

Reportable

Non-Reportable

OFFICE USE ONLY

The data as per the document provided by customer are the same as information provided in this form

	NAME	SIGNATURE	DATE
MAKER			
CHECKER			
APPROVED BY			

*REFERENCE – HELP FOR FORM FILLING

LIST FOR PURPOSE OF RELATIONSHIP

Savings	Related Party - Director
Transactional – Salary	Related Party - Shareholder
Transactional – Business Related	Related Party - Signatory
Application BOI - Investment	Related Party – IB Mandates
Application BOI – Professional Activity	Related Party – Corporate Card Mandates
Application BOI – Self-Employed	Operation of account - Proxy
Application BOI – Retired Scheme	Operation of account – Joint Owner
Application BOI – Acquisition of residential unit under IRS/RES/PDS/SCS	Operation of account – Legal Guardian
Investment	Operation of account – Well-Wisher
Related Party – Beneficial Owner	Operation of account – Succession

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