

# PORT LOUIS FUND LTD

## KNOW YOUR CUSTOMER (KYC) FORM

### A. CLIENT'S DETAILS

Name : \_\_\_\_\_  
 ID : \_\_\_\_\_  
 Address : \_\_\_\_\_  
 Tel No : \_\_\_\_\_  
 Email : \_\_\_\_\_

### B. EMPLOYMENT DETAILS

Employment status: Employed  Self-Employed  Retired  Housewife  Unemployed  Other, please specify \_\_\_\_\_

If Employed/Self-employed: Your present occupation \_\_\_\_\_  
 Your Employer's Name and Address \_\_\_\_\_

### C. FINANCIAL DETAILS (COMBINED MONTHLY INCOME FOR JOINT HOLDERS)

| Yearly Income (MUR)                          | Derived mainly from   |   |  |
|--|---|---|--|
| Below 100,000 <input type="checkbox"/>       | Salary <input type="checkbox"/>                                 | Savings <input type="checkbox"/>        |  |
| 100,000 - 200,000 <input type="checkbox"/>   | Rental/Property Sale <input type="checkbox"/>                   | Loan <input type="checkbox"/>           |  |
| 100,001 - 300,000 <input type="checkbox"/>   | Inheritance/Gift <input type="checkbox"/>                       | Trade Business <input type="checkbox"/> |  |
| 300,001 - 500,000 <input type="checkbox"/>   | Dividend/Interest <input type="checkbox"/>                      | Cash Gift <input type="checkbox"/>      |  |
| 500,001 - 700,000 <input type="checkbox"/>   | Maturing Investment/Sale of Investment <input type="checkbox"/> | Tuition Income <input type="checkbox"/> |  |
| 700,001 - 1,000,000 <input type="checkbox"/> | Lottery/Casino/Betting <input type="checkbox"/>                 | Other <input type="checkbox"/>          |  |
| Above 1,000,000 <input type="checkbox"/>     | Retirement Benefits/Pension <input type="checkbox"/>            |   |  |
|  | Other, Please Specify _____                                     |   |  |

Source of Funds \_\_\_\_\_

**D. HAVE YOU EVER BEEN CONVICTED OF ANY OFFENCE IN MAURITIUS OR ELSE WHERE OR ARE THERE ANY PROCEEDINGS NOW PENDING AGAINST YOU WHICH MAY LEAD TO SUCH A CONVICTION?**

YES  NO

If yes, please specify \_\_\_\_\_

### DECLARATION AND SIGNATURE

I hereby declare that to the best of my knowledge and belief, the statements made in this application and any documents are true and complete

- The monies being invested pursuant to this application are not proceeds of illegal/criminal activities and my investment is not designed to conceal such proceeds and to avoid prosecution for an offence.
- All information provided is true and correct and I agree to inform of any change in the personal information provided.
- I understand that I should make my own appraisal of the risks arising from the subscription to or acquisition of this instrument and should consult to the extent necessary my legal, financial, tax, accounting and other professional advisors in this respect prior to any subscription and acquisition.
- Made in good faith and in full awareness of the consequence of my statement under the Financial Intelligence and Anti-Money Laundering Act 2002 and amendment brought by Finance Act 2006 and subsequent admendments.

SIGNATURE : \_\_\_\_\_

DATE : \_\_\_\_\_

### DOCUMENTS TO BE SUBMITTED BY INDIVIDUALS

For Identity, kindly submit one of the following: National Identity Card/ Passport/ Original\*\* or Certified copy\* of Birth Certificate

For Address, kindly submit one of the following: Certified copy\*/Original\*\* Public Utility Bill (Less than 3 months old) or Bank Statement

**\*\*Original will be returned immediately**