

BANK OF MAURITIUS

TREASURY NOTES OPENING OF BOOK ENTRY ACCOUNT

	1 st joint Applicant Holder	2 nd joint Applicant Holder
	TITLE: Mr/Mrs/Miss/Minor/_____ (other)	TITLE: Mr/Mrs/Miss/Minor/_____ (other)
Surname	_____	_____
Maiden Name	_____	_____
Initials	_____	_____
Other Names/ Company Name	_____	_____
Address	_____	_____
Town	_____	_____
Country	_____	_____
Date of Birth/ Incorporation	_____	_____
Tel. No. (Home)	_____	_____
(Office)	_____	_____
Fax No.	_____	_____
Nationality	_____	_____
NIC/Passport/ Reg. No.	_____	_____

DECLARATION

I/We hereby:

- (i) Request to open and maintain a Treasury Notes Account in Book Entry Form for the purpose of recording investments in Treasury Notes.
- (ii) Affirm that all information in the form are correct.
- (iii) Provide a list of persons authorised to operate the account and
- (iv) undertake to notify this Participant of any change of particulars or information provided by me/us in this form.

Signature	1 _____	Name	1 _____
	2 _____		2 _____
	3 _____		3 _____

(Security Account Holder/s (Joint)/Authorised Signatory/Guardian) Date: _____

For Participant use only

Verified by: _____
(Name) (Signature)

Authority Dated: _____

Date: _____ Seal: _____