

APPLICATION FOR STANDING ORDER

PLEASE PRINT CLEARLY IN BLACK INK, ONE CHARACTER PER BLOCK

Branch: \_\_\_\_\_

Date: / /  (e.g: dd/mm/yyyy)

By debit of my/our\* account No:

in the name of \_\_\_\_\_

Credit account in bank (please tick accordingly)

- The Mauritius Commercial Bank Ltd
 Barclays Bank
 Hong Kong & Shangai Banking Corporation
 Mauritius Post & Cooperative Society
 Other
 State Bank of Mauritius
 Bank of Baroda
 Habib Bank
 Banque des Mascareignes
 ABC Banking Corporation
 Bramer Banking Corporation
 Bank One Mauritius
 SBI Mauritius

Beneficiary customer

Account No

Name

Reference

Payment Purpose: cotisation annuelle de membre

Transfer Currency and Amount

MUR     500 .

(NOTE: In case the beneficiary's account is held at the MCB, the transfer can either be the currency of the remitter's account or the currency of the beneficiary's account. Whereas if the beneficiary's account is held in another local bank, the transfer currency MUST be in MUR)

Amount in Words: Rupees five hundred

Frequency

Either  Every Week  Every two weeks  Every three weeks

Or on the  First day  Last day  Other Please specify day

Of  Every month  Every two months  Every three months
 Every four motnhs  Every six months  Every year

As from  last payment date   Until further notice

In case my/our\* request is accepted, I/we\* hereby authorise you to debit my/our\* above-mentioned account with the relative commissions equivalent of the sum of commissions at the current rate prevailing on the transaction date.

Signature(s)
Where applicable seal of company
Name(s)
Phone/Mobile No(s)

\*Strike out and initial as appropriate