

APPLICATION FOR BANK GUARANTEE

The Manager
AfrAsia Bank Limited
Bowen Square
10, Dr Ferriere Street
Port Louis

Date: ____ / ____ / ____

Dear Sir,

I/We hereby request you to issue a Bank Guarantee as follows:

Applicant: _____

Type: _____

Amount: _____

Beneficiary: _____

Validity/Expiry: _____

Purpose: _____

Format Attached: Yes No

Authorised Signature(s) and Seal of Company

For Bank's Use Only

Signature Verified

GENERAL INDEMNITY

In consideration of your giving either alone or jointly an indemnity in the form of this bank guarantee for the sum of _____

I/ We jointly and severally “Sans benefice de discussion ou de division” hereby agree to indemnify you against all claims which may be made upon you in consequence of your giving the said indemnity and to pay to you on demand all payments, losses, costs, expenses, and commissions suffered or incurred by you in consequence thereof or arising thereout and I/We hereby irrevocably authorise you to debit my/ our account with all such payments, losses, costs, expenses and commissions.

I/ We irrevocably authorise you to make payments and comply with demands which may be claimed from or made upon you under the said Indemnity and irrespective of any deferences which may be claimed or set off which may have against such claim under the said Indemnity without any reference to or further from me/ us and agree that any payment which you shall make in accordance or purporting to be in accordance with the Indemnity shall be binding upon me/ us and shall be accepted by me/ us as conclusive evidence that you were entitled to make such payment or comply with such demand and further that may at any time determine or give notice to determine your Indemnity.

I/ We hereby authorise the bank to debit my/ our account No. _____ with all sums including commissions/ charges/ interests together with those of its correspondents where applicable.

I/ We further agree to pay you on demand any further charges, interest all legal and judicial costs or other sums which may arise in the event of any claim being made upon under the Indemnity

Dated at _____ , this _____

The wording “Read and Approved” to be handwritten by authorised signatories.

Authorised Signature and Seal of Company