

**NON- COMPETITIVE  
4% FIVE Year Government of Seychelles Treasury Bond  
APPLICATION FORM**

Official Use Application No.
---------------------------------

Date: \_\_\_\_\_  
Tel No. \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I/We have read and agreed to the terms of the Prospectus dated February 16, 2011 for the above-mentioned Bonds and I/We apply in accordance with the terms of the notice. I/We undertake to accept and pay the amount payable<sup>1</sup>.

Face Value<sup>2</sup>

Price<sup>3</sup>

The Bond is to be registered in the name(s)\* stated below:

	<i>Please tick (if applicabe)</i>
	<b>Either or Survivor</b>
	<b>Jointly</b>

PLEASE USE BLOCK LETTERS

1. \_\_\_\_\_  
2. \_\_\_\_\_

NIN: \_\_\_\_\_  
NIN: \_\_\_\_\_

**Signature:** .....

**Signature:** .....

- (1) Amount payable may be more or less than the face value.
- (2) Amount should be in minimum of SCR 5,000 and in multiples of SCR 5,000.
- (3) The cut-off price has been established by the Competitive Bond Auction.

**Note:** This application form should be handed in at the Domestic Debt Section at the Central Bank of Seychelles Monday to Thursday from 8:30 am to 2.30pm.

**Please note:** Defaulter shall be barred from investing in Government Securities and the CBS is not obliged to process incomplete or wrongly filled application forms.

**Banking Details**

Name(s): \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_

Principal and Interest will be paid to my/our bank account

Bank  Branch   
Account Number

**Signature:** .....

**Signature:** .....

For official use

**Date of receipt of payment :** \_\_\_\_\_  
**Amount received:** \_\_\_\_\_  
**Mode of Payment:** \_\_\_\_\_  
**Value Date:** \_\_\_\_\_  
**Maturity:** \_\_\_\_\_

**Date Discounted:** \_\_\_\_\_  
**Face Value:** \_\_\_\_\_  
**Bond No(s):** \_\_\_\_\_  
**Accrued Interest:** \_\_\_\_\_  
**Total Cost:** \_\_\_\_\_