

RESERVE BANK OF FIJI



NATURAL DISASTER REHABILITATION FACILITY APPLICATION FORM

Application Details	
Name of Company	
Address	
Contact Person	
Phone/ Mobile	
Fax/ Email	
Funding Details	
Estimated Damage (\$)	
Total Funding Required (\$)	
Estimated Funding Duration	
Proposed Drawdown Date	
Declaration	
<p>I/ We hereby certify that the information provided is true and correct to the best of my knowledge.</p> <p>Name:..... Signature:.....</p> <p>Title:.....</p> <p>Name:..... Signature:.....</p> <p>Title:.....</p> <p><i>Names and Signature(s) of applicant(s). (If signing on behalf of a corporate body, indicate in what capacity and stamp with the company stamp).</i></p>	
Lending Institution Verification	
Institution Name	
Branch	
Assessing Officer	
Signature	
Date	
<p>Note:</p> <p><i>1 Loans under the Facility are limited to \$0.5 million per affected business.</i></p> <p><i>2 In the event that the lender is unable to pay RBF on the specified date due to default by the customer, RBF will debit the respective lending institution's ESA/Call/Advance account for the total outstanding advance, including interest accrued.</i></p> <p><i>3 Completed forms to be submitted to Manager Domestic Markets, Tower 2, Reserve Bank of Fiji.</i></p>	