

## FIJI INFRASTRUCTURE BONDS TENDER FORM

ISIN	Coupon	Tenor	First Issue Date	First Coupon Date	Maturity	Yield curve as at 31 December 2025
FJ1528897556	1.59%	3 Years	04-02-2026	04-08-2026	04-02-2029	1.59%
FJ1528897564	2.06%	5 Years	04-02-2026	04-08-2026	04-02-2031	2.06%
FJ1528897572	5.75%	20 Years	04-02-2026	04-08-2026	04-02-2046	5.75%
FJ1528897580	7.00%	25 Years	04-02-2026	04-08-2026	04-02-2051	7.16%

**Investor Type:** ☐ Individual(s) ☐ Corporate Body ☐ Trust

**(Please tick which maturity is being tendered for)**

3-year Bond [ ☐ ] 5-year Bond [ ☐ ] 20-year Bond [ ☐ ] 25-year Bond [ ☐ ]

1. TO: The Reserve Bank of Fiji, Suva.

In accordance with the terms of the Prospectus dated \_\_\_\_\_ and the Notice of Issuance dated \_\_\_\_\_.

I/We hereby tender for bond to a total face value of \$ \_\_\_\_\_  
(\_\_\_\_\_ Dollars).

I/We undertake to accept the same or any lesser amount that may be allotted to me/us at:

(Place a tick in the box that is applicable)

☐ The weighted average yield of accepted competitive tenders.

☐ The yield of \_\_\_\_\_ % p.a.

2. I/We have deposited the payment of \$ \_\_\_\_\_ for the full face value of the amount tendered through FIJICLEAR.

I/We undertake to pay the Reserve Bank any difference no later than 13:00 noon on the day on which the relative Bond(s) are to be dated.

**Other Details of the Investor** (BLOCK LETTERS)<sup>1</sup>:

a) Date of Birth\*: \_\_\_\_\_

b) Postal Address: \_\_\_\_\_

c) Physical Address: \_\_\_\_\_

d) Telephone/Mobile No.: \_\_\_\_\_

e) Email: \_\_\_\_\_

f) Designation/Occupation\*\*: \_\_\_\_\_

g) TIN #\*\*\*: \_\_\_\_\_

h) Source of Funds\*\*\*\*: \_\_\_\_\_

*NB: Refer details on page two of the tender form for clarification on fields marked with \**

<sup>1</sup> The Reserve Bank of Fiji may require additional information not listed on the tender form of an investor as it deem so.

4. Please forward the portfolio statement:

(a) ☐ By post to me at the above address.

(b) ☐ Collect over the Counter or Email.

5. Please credit the interest payments to:

Bank: \_\_\_\_\_

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

Account No.: \_\_\_\_\_

Account Name: \_\_\_\_\_

6. Name/s, Signature/s & Designation of authorised dealers. (Company stamp for corporate body)

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

Date: \_\_\_\_\_

- Strike out whichever is not applicable.

---

*\* Date of Birth is applicable for individuals only.*

*\*\*Occupation is applicable to individual investors only.*

*\*\*\* Tax Identification Number.*

*\*\*\*\*Not applicable for supervised financial institutions.*