

RESERVE BANK OF FIJI



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 (mnts)	
Proposed Drawdown Date	
Declaration	
I/ We hereby certify that the information provided is true and correct to the best of my knowledge.	
Name:.....	Signature:.....
Title:.....	
Name:.....	Signature:.....
Title:.....	
<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>	
Bank Verification	
Bank Name	
Branch	
Assessing Bank Officer	
Signature	
Date	
Note: 1 Loans under the Facility are limited to \$0.5 million per affected business. 2 In the event that the commercial bank is unable to pay RBF on the specified date due to default by the customer, RBF will debit the respective commercial banks ESA account the total outstanding advance, including interest. 3 Completed forms to be submitted to Manager Domestic Markets, Tower 2, Reserve Bank of Fiji.	