

MINISTRY OF FINANCE, TRADE AND ECONOMIC PLANNING
13TH MONTH PAY FINANCIAL ASSISTANCE
APPLICATION FORM
YEAR ENDED:.....



A Business Information

<input type="checkbox"/> Company	<input type="checkbox"/> Sole trader	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust
<input type="checkbox"/> Cottage Industry	<input type="checkbox"/> Individual Employer	<input type="checkbox"/> Others Specify.....	

TAXPAYER IDENTIFICATION NUMBER (TIN)	<input type="text"/>
NAME OF BUSINESS	<input type="text"/>
FULL NAME OF CONTACT PERSON	<input type="text"/>
National Identity Number of Contact Person	<input type="text"/>
Postal Address for service of notices (Use Block Letters) <input type="checkbox"/> (Please tick if address has changed)	<input type="text"/>
Address where business is conducted	<input type="text"/>
Full Details of Nature of Business (E.g. the kind of manufacturer, retailer, hotel, etc)	<input type="text"/>
Business Telephone Number	<input type="text"/>
E-Mail Address:	<input type="text"/>

B Employees Information

<input type="checkbox"/> Number of Seychellois employees	<input type="checkbox"/> Number of Non-Seychellois employees
<input type="checkbox"/> Total number of employees	

C Financial Assistance Details

Sum of money applying for	<input type="text"/>
Justification for applying for requesting financial assistance	<input type="text"/>
<input type="checkbox"/> Number of employees being who has been on overseas training for an aggregate period exceeding 14 weeks or on unpaid leave for more than one month in the corresponding year (please attach all relevant documentation)	
<input type="checkbox"/> Number of employees who are in prison or otherwise detained in lawful custody for any period in the corresponding year being paid on a pro-rated basis (please attach all relevant documentation)	
<input type="checkbox"/> Number of employees on unauthorised absence from work (please attach all relevant documentation)	

D Supporting Documents

<input type="checkbox"/> Profit and Loss statement as at last accounting year (can be provisional)
<input type="checkbox"/> Latest Payroll/Payslip
<input type="checkbox"/> Letter of appointment and/or confirmation in post for all employees
<input type="checkbox"/> Business Tax Return/Presumptive Tax Return Statement
<input type="checkbox"/> Latest monthly Income Tax Clearance certificate or Summary of Income Tax remitted to SRC
<input type="checkbox"/> Certified copy of an Audited account statement/report for Companies
<input type="checkbox"/> Certified copy of Bank Statement by the Bank as at 31st December for which the 13th month is due
<input type="checkbox"/> Cash-flow statement and/or income and expenditure forecast

By submission of this application, you certify that all information is true and correct and that in accordance with section 46C of the Employment Act, the employee for whom the assistance is being applied for is entitled to the 13th month pay

Signature: Date: