



Mauritius Institute of Professional Accountants

# Mauritius Institute of Professional Accountants

(Established under Financial Reporting Act 2004)

**COMPULSORY**

Registration No: MRN / MF / ...../.....

## MEMBERSHIP RENEWAL FORM

(For Member Firm)

**YEAR 2020-2021**

### SECTION A – MEMBERSHIP DETAILS

<b>Name of Member Firm</b>			
<b>Name of Contact Person</b>			
<b>Capacity in which Contact Person is Acting</b>			
<b>Email Address of Contact Person</b>			
<b>E-mail of Member Firm</b>			
<b>Website (Optional)</b>			
<b>Type of entity</b>			
<b>Business Registration Number</b>			
<b>Correspondence Address</b>			
<b>Phone</b>	<b>Mobile</b>		
<b>Fax</b>			
<b>Total Number of MIPA Members</b>			



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## LIST OF PARTNERS / DIRECTORS

Name	NIC No.	Title / Position at Work	MIPA Registration No. (Compulsory)
			MRN /
			MRN /
			MRN /
			MRN /
			MRN /
			MRN /

## LIST OF MIPA MEMBERS (other than partners/directors)

Name	NIC No.	Title / Position at Work	MIPA Registration No. (Compulsory)
			MRN /
			MRN /
			MRN /
			MRN /
			MRN /
			MRN /
			MRN /
			MRN /
			MRN /
			MRN /



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## SECTION B – PROFESSIONAL INDEMNITY INSURANCE

<b>Insurance Company</b>	
<b>Policy Number</b>	
<b>Valid up to</b>	
<b>Amount Insured</b>	

## SECTION C – PRACTICE DETAILS

Please indicate your organisation's main specialism with a tick (✓) in the column below.

1	Management Accounting		11	Planning & Strategy	
2	Financial Management		12	Training or Human Resources	
3	Taxation		13	Practice Management	
4	Internal Audit		14	Global Business	
5	Statutory Audit		15	Administration	
6	Corporate Accounting & Reporting		16	Company Secretarial	
7	Management Consultancy		17	Pensions	
8	Investment Advice		18	Marketing	
9	Insolvency and/ or Recovery		19	Information Technology	
10	Treasury		20	Other ( <i>Please specify</i> )	

## SECTION D – AML/CFT ACTIVITIES

Please indicate if the organisation carries out transactions for its clients concerning the following activities with a tick (✓) in the column below.

	<b>List of Activities as Per Recommendation 22 of the Financial Action Task Force</b>	<b>Yes</b>	<b>No</b>
1	Buying and selling of real estate		
2	Managing of client money, securities, or other assets		
3	Management of bank, savings, or securities accounts		
4	Organisation of contributions for the creation, operation, or management of companies		
5	Creating, operating or management of legal persons or arrangements, and buying and selling of business entities		

**Note: Failure to provide accurate and true information to this section is a breach of section 19J(4) of FIAMLA**



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## SECTION E – BUSINESS SECTOR

Please tick (✓) boxes below to indicate the nature of your company’s business.

1	Agriculture, Forestry, Fisheries	
2	Building, Construction, Civil Engineering	
3	Business Services / Consultancy	
4	Catering, Hotels, Tourism	
5	Distribution – Retail and/ or Wholesale	
6	Financial Services / Property – Banking, Insurance, Investment Management Companies, Security Dealing, Property and Real Estate	
7	Food, Drink and Tobacco	
8	Government, Public Sector, Regulatory Bodies etc.	
9	Industry – Tools, Chemicals / Plastics, Textiles, Pharmaceuticals, Domestic Products, Electrical Goods, Electronics, Furniture/ Wood Products, Printing, Packaging	
10	Media – Arts, Entertainment, Publishing, etc.	
11	Utilities – Power, Electricity, Gas, Water Supply	
12	Social Services, Health and Education	
13	Transport Storage, Shipping, Telecommunications	
14	Other ( <i>Please specify</i> )	

## SECTION F – DECLARATION

On behalf of the Member Firm, I hereby declare that:

1. At least half of the partners of the firm are registered with MIPA.
2. The firm and the partners individually undertake that they shall be bound by the disciplinary provisions of the rules of MIPA.
3. The firm and the partners individually undertake that they will observe and comply with the Financial Reporting Act and other laws, rules and regulations, policies, and guidelines issued by MIPA and have read the IFAC Code of Ethics issued by the IESBA and adhere to the same.
4. I confirm that to the best of our knowledge, no partner or MIPA Member from the firm has been convicted or been found guilty for any criminal offence in any country.
5. The firm holds an up to date Professional Indemnity Insurance or holds such other financial guarantee the MIPA may determine.
6. If there is a change in the firm’s particulars, I undertake to inform MIPA within 30 days of this change.
7. The firm has made arrangements for the continuity of its practice in the event of incapacity.



Suite 1104, 11<sup>th</sup> Floor, SIT Business Centre, THE CORE, 62, Cybercity, Ebene

Tel: 4677096 Fax: 4681880

Email: [info@mipa.mu](mailto:info@mipa.mu) Website: [www.mipa.mu](http://www.mipa.mu)





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8. I, the undersigned, confirm that the details I have given are true and accurate to the best of my knowledge. I understand that a false declaration on this form may lead to disciplinary action against the member firm and/or may invalidate any decision related to the application.

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

Signature: \_\_\_\_\_

Name of Partner/Director signing on behalf of the firm/company: \_\_\_\_\_

Stamp of firm:

## SECTION G – ANNUAL FEE

	Annual Fee 1 July 2020 to 30 June 2021	Amount (Rs)
Member Firm (MF)	___ Members x Rs 2, 000	
<b>Total Payable</b>		

## SECTION H – DOCUMENTS TO BE SUBMITTED ALONG WITH RENEWAL FORM

- ✓ A copy of Professional Indemnity Insurance (PII) for the firm (Updated)
- ✓ Shareholding structure (also known as particulars of company at registration)

*Note: Failure to provide the above documents at time of renewal might result in refusal to process the renewal. For any change in structure MIPA reserves the right to query the member prior to renewal.*