MINISTRY OF HOUSING AND LANDS

50% reduction in rental for hotel for renovation/reconstruction works
(As per Section 8 Part 2 of the Second Schedule of the State Lands Acts)

APPLICATION FORM

PART A

1. Name of Lessee:

...........................................................................................................................................................................

Authorised representative of lessee :................................................................................................................................

...........................................................................................................................................................................

Address: ..................................................................................................................................................................

...........................................................................................................................................................................

Contact details:

Office: .................................................................................................................................................................

Mobile: ...............................................................................................................................................................

Fax No.: ...............................................................................................................................................................

Email Address: ...................................................................................................................................................

2. Name of hotel: ...................................................................................................................................................

Address: ...............................................................................................................................................................  

3. Extent of land leased : .....................................................................................................................................

4. Type of activity to be undertaken (Tick as appropriate)

   (i) Renovation  
        ☐   
   (ii) Reconstruction  
        ☐   

5. Total amount of Investment (Rs) : ..............................................................................................................

   a. Locals (Rs) : ............................................................................................................................................. 

   b. Foreign Sources (Rs) : ...............................................................................................................................
6. Labour Legislation Applicable: .................................................................

7. Labour Force
   (a) Actual:

<table>
<thead>
<tr>
<th>Expatriate</th>
<th>Mauritian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
<td>Female</td>
</tr>
<tr>
<td>Total</td>
<td>Total</td>
</tr>
</tbody>
</table>

   (b) No. of employees concerned by the renovation:

<table>
<thead>
<tr>
<th>Expatriate</th>
<th>Mauritian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
<td>Female</td>
</tr>
<tr>
<td>Total</td>
<td>Total</td>
</tr>
</tbody>
</table>

   (c) Additional jobs to be created (if any): ........................................

8. Arrangements made with employees during period of reconstruction/renovation:
   (a) Whether employees were required to work during the period of renovation;
   (b) Nature of work performed by employees during the period of renovation;
   (c) Whether all employees were remunerated fully during the period of renovation;
   (d) Whether the services of all employees were safeguarded and preserved during the period of renovation; and
   (e) Whether there has been any break in the continuity of service of the employees who were not provided with work during period of renovation.

9. Date of Closure of hotel: ............................................................................

   Starting date of reconstruction/renovation: .................................................

   Completion date: ............................................................................................

   Date of restart of operation: ..........................................................................

   Schedule of works (in the form of a GANTT Chart) to be included.
10. In case of reconstruction, please provide the following additional details:

   (i) room size: ..............................................
   (ii) plot coverage: ...........................................
   (iii) building height: ...........................................
   (iv) elevations: ..................................................%

11. Number of rooms:
   Before reconstruction/ renovation: .........................;  After reconstruction/renovation: .........................

12. Project justification:........................................................................................................................................

13. Description of works:........................................................................................................................................

Signature: ........................................................................................................

Full name: ........................................................................................................

Date : ........................................................................................................

PART B. For office use only

File Ref. : ........................................................................................................

Received on : .....................................................................................................

By (Name of Officer) : ..........................................................................................

(Signature) : .....................................................................................................

(To be filled according to the guidelines)

*Note: The Ministry has to be notified in writing of major changes in the information provided at date of application.*