



ASSOCIATION OF INBOUND OPERATORS
(MAURITIUS)
A I O M

MEMBERSHIP ELIGIBILITY CONFIRMATION FORM

1. Applicant Details

Applicant Company Name : _____

Business Registration Number : _____

Tourism Authority Licence Number : _____

Registered Address : _____

Contact Person : _____

Designation : _____

Telephone Number : _____

Email Address : _____

2. Eligibility Criteria Confirmation

Please tick (✓) the appropriate box to confirm that your Company complies with the following eligibility criteria for membership of the Association of Inbound Operators (Mauritius):

| Eligibility Criteria | Yes | No |
|---|--------------------------|--------------------------|
| The Company is duly licensed by the Tourism Authority. | <input type="checkbox"/> | <input type="checkbox"/> |
| The Company has been fully operational for a minimum period of one (1) year. | <input type="checkbox"/> | <input type="checkbox"/> |
| The Company has suitable office premises with a dedicated working environment. | <input type="checkbox"/> | <input type="checkbox"/> |
| The Company has full communication facilities, including telephone, facsimile and e-mail. | <input type="checkbox"/> | <input type="checkbox"/> |
| The Company agrees to an inspection of its office premises by delegated member of the AIOM. | <input type="checkbox"/> | <input type="checkbox"/> |
| The Company reflects a professional image and employs qualified staff. | <input type="checkbox"/> | <input type="checkbox"/> |



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| | | |
|--|--------------------------|--------------------------|
| All vehicles are either owned or sub-contracted. | <input type="checkbox"/> | <input type="checkbox"/> |
| The Company agrees that all applicable fees shall be payable in advance. | <input type="checkbox"/> | <input type="checkbox"/> |
| The Company confirms that details of its Ultimate Beneficial Owners are available and will be disclosed. | <input type="checkbox"/> | <input type="checkbox"/> |

3. Supporting Documents Checklist

Applicants are kindly requested to submit the following documents in support of their application:

| Documents | Attached |
|---|--------------------------|
| Copy of Tourism Authority Licence | <input type="checkbox"/> |
| Certificate of Incorporation / Business Registration Card | <input type="checkbox"/> |
| Proof of Registered Office Address (dated less than 3 months) | <input type="checkbox"/> |
| Company Structure Chart | <input type="checkbox"/> |
| Confirmation of Ultimate Beneficial Owners | <input type="checkbox"/> |

4. Declaration

We hereby confirm that the information provided above is true and correct.

We understand that providing false or misleading information may result in the rejection of our application for membership in the Association of Inbound Operators (Mauritius).

We further undertake to comply with all rules, regulations and requirements of the Association of Inbound Operators (Mauritius).

Name of Authorised Signatory : _____

Designation : _____

Signature : _____

Date : _____

Company Seal : _____