

**EPZA SAVINGS AND CREDIT COOPERATIVE SOCIETY LTD.
P.O BOX 788-0242- KITENGELA.**

A. Loan Application and Repayment Terms

I, Mr/Mrs/Miss
do hereby apply for a loan of Kshs.....*in words*
..... only and to
be repaid in.....monthly installments of Kshs.....
per month and to be effected immediately the loan is granted.

Note: Please attach photocopy of your Identity Card, KRA Pin and 3 Original latest Pay-Slip

B. The Purpose for which this Loan is Applied (Tick)

(Development Loan, Emergency Loan, School fees, Special Loan, Masaa)

C. Personal Information

I am employed by.....on **Permanent/Contract/Temporary** terms of service
And stationed at..... P. O. Box..... Tel No.....

1. Position in employment Payroll
2. Position in the Society is a Member / Committee Member / SACCO employee (*Tick*)
3. Sacco Membership Number Mobile Tel:.....

Your Bank Details

- 1) Name of Bank:.....
- 2) Branch.....
- 3) Account No:.....
- 4) Account Name.....

Security Offered for This Loan (s)

1. My Deposits in the SACCO Kshs.....
2. My Guarantors total deposits as listed overleaf of Kshs.....
3. Other (Specify).....Kshs.....

Name: **Amount:** **ID No:** **Signature:**

D. Declaration

I hereby declare that the foregoing particulars are true to the best of my knowledge and belief and **agree to abide by the By-Laws of the SACCO, the Loan Policy and any variations by the Credit Committee, in respect of the loan repayment terms.** I authorize the necessary deductions including.....% interest monthly, to be made from my salary as repayment for this loan. I declare that I am not indebted to any other SACCO, Bank or Loan agency (except as listed herein) either as borrower or endorser or guarantor.

- a) Signature of Applicant Date
- b) Name of the Witness..... Payroll No.....
- c) Employed by Station
- d) Signature of Witness Date

E. Repayment Guarantee

We the undersigned hereby accept individually, jointly and severally, liability for the repayment of the loan advanced in the event of the borrower’s default. We understand that the amount in default may be recovered by an offset against my/our deposits in the SACCO or by attachment of property or salary and that we shall not be eligible for loans unless the amount in default has been cleared in full.

Note:

- 1. *The total amount of deposits offered by the guarantor should not be more than the total deposits saved at the SACCO by the guarantor.*
- 2. *As a Guarantor, ensure that Name, Amount applied & Signature of Loan applicant are clearly indicated before you sign.*

A) Details of the Loan Guarantor(s)

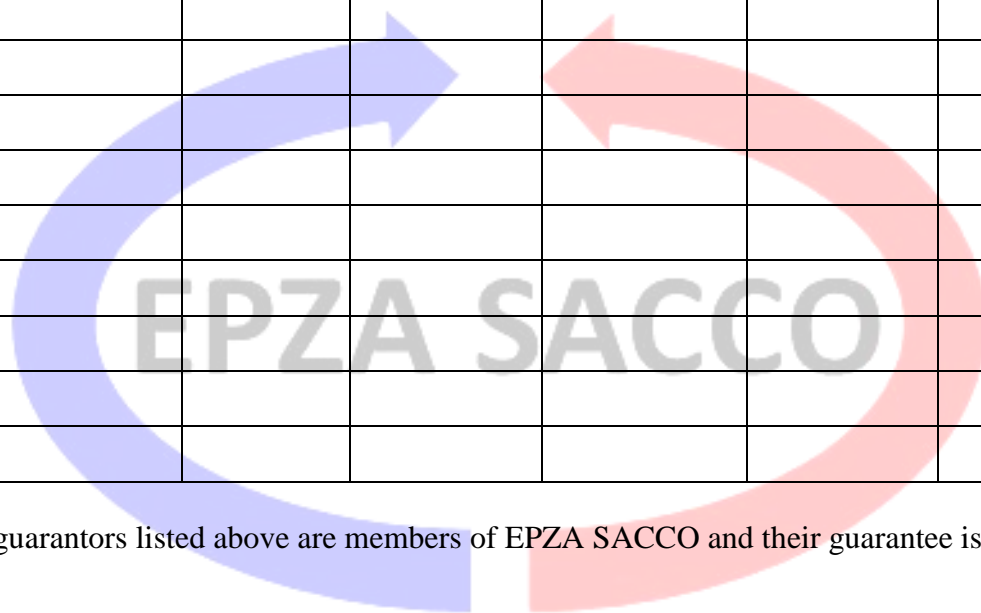
| No | Names of Guarantors | M/NO. | Mobile NO | Amount Offered | Amount in Words (Kshs) | ID No. | Signature and Date |
|----|---------------------|-------|-----------|----------------|------------------------|--------|--------------------|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |

Name: Amount: ID No: Signature:

| | | | | | | | |
|----|--|--|--|--|--|--|--|
| 9 | | | | | | | |
| 10 | | | | | | | |
| 11 | | | | | | | |
| 12 | | | | | | | |

B) Details of Witnesses to the Guarantors

| No | Names of Witnesses to the Guarantors | Personnel Number | Membership Number | Identity Card Number | Mobile Telephone | Signature | Date |
|----|--------------------------------------|------------------|-------------------|----------------------|------------------|-----------|------|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| 11 | | | | | | | |
| 12 | | | | | | | |



I certify that guarantors listed above are members of EPZA SACCO and their guarantee is within the rules of the SACCO

Sacco Staff Name.....SignDate.....

F. Confirmation of Guarantors Details by CMC Representative

I.....of (company).....certify that the guarantors listed above have confirmed to me that the signatures above are truly theirs and that the ID/Nos are the same as in their original National Identity Cards.

Signature.....Date.....

G. To be Completed by SACCO Office

| | |
|---------------------------------------------------|--|
| Total Deposits | |
| Maximum Loan- 3* deposits. | |
| Gross Salary | |
| Net Salary | |
| $\frac{1}{3}$ rd of Gross/Basic Salary | |
| Amount Available for deduction | |
| Amount Applied | |
| Amount Approved | |
| Loan Balance(principal) | |
| Commission (14%) for top ups loans | |
| Net Payable | |

Loan Officer Name Signature.....Date.....

I. Credit Committee Consideration

Loan approved Kshs Recoverable in Monthly
 Installments of Kshs.....at an interest rate of.....% per month on
 reducing balances or an average rate calculated at Kshs... per month.

Credit Committee Meeting Minute No.....Date.....

This loan application has been deferred / rejected due to the following reasons

1.
2.

.....
 Chairperson Secretary Member

J. Cheque Dispatch

Cheque No:Kshs..... Datedagainst Payment Voucher No.....is
 Dispatched to or collected by (Name)

ID. No.....Mobile Tel:Signature..... Date.....

K. Human Resource/Payroll Department.

Kindly Confirm if the employee qualifies for the loan amount applied for.

.....

Hr. NameSignature..... Date

Name: Amount: ID No: Signature: