

## GOOD FAITH SACCO SOCIETY LTD

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## **NORMAL LOAN APPLICATION FORM**

<i>A</i> .	Please attach a copy of	ID and KRA PIN					
В.	PERSONAL DETAIL	<u>.S</u>					
Mem	ber's name:						
Mem	bership no:	Id number:	. Tel:				
Addr	ess:	Physical/Residential Address					
LOA	N APPLICATION AN	<u>D REPAYMENT</u>					
I (Na	me)	hereby apply for a	loan of Kshs:				
Amo	unt in words:						
Reco	verable in	months					
C.	PURPOSE FOR WHI	CH LOAN IS APPLIED					
In cas	se of several uses state ex	act amount for each					
D.	SECURITY WHICH	I OFFER FOR THE LOAN					
E.	CAPACITY TO SERVICE THE LOAN						
	Please explain clearly how you plan to pay the loan by stating the sources of your income;						
	i. Employment: Name of employer /Copy of Payslip						
	ii. Large Scale/Small Scale business.						
	iii. Dairy farming; Monthly milk payment Slip						
F.	LOANS IN OTHER FINANCIAL INSTITUTIONS						
	INSTITUTION	OUTSTANDING BALANCE	MONTHLY REPAYMENT				
		CONDITIONS FOR THE L	OAN				

## <u>CONDITIONS FOR THE LOAN</u>

- i. Your personal information and credit account details will be disclosed to the *Credit Reference Bureau* within *Ninety days* (90 days) and to the *Debt Collector* within one hundred and twenty days (120 days) of default.
- ii. Information on this loan may be used by other institutions that offer services or goods on credit, in debt collection, assessing applications for credit and other facilities required by you, members of your household and associated business concerns and for purposes of skip tracing and fraud prevention.
- iii. Any credit defaults will remain on your credit profile for up to five years from date of settlement.
- iv. Offsetting of the loan product against your savings is NOT allowed by the Sacco
- v. Withdrawing from the Sacco before the loan is fully settled is NOT allowed

<b>G.</b> I h	bereby undertake to service the loan fully in accordance with the loan payment timeline without									
	•	t with deposits or seeking for	•		1 3					
		anee:								
Signature: Date: Page 19 Date:										
		indersigned hereby jointly an	d severally undertake	the liability fo	or repayment of	the loan in				
the	the event of the borrowers' default. I /we understand that the amount in default may be offset against my savings and that I / we shall not be eligible for loan until the amount in default has been cleared in									
my										
ful	_		C							
1071	•									
	M no.	Guarantors Name	Guarantors ID No.	Amount Guaranteed	Guarantor's Tel	Guarantor' Signature				
1										
2										
3										
4										
5										
6										
Sig	me gnature	EEREEID No		_						
		ICIAL USE ONLY OFFICER								
a)		pove guarantors can secure the	e loan applied except th	nose marked.						
b)		e checked the particulars of this loan Application for completion.								
		Member numbertotal savingsless guaranteed amountnet savingsadd guarantors funds=total securityloan								
	_	sadd guara it recommended		=total	security	loan				
		ent								
	Check	ed by	.Sign	Date						
	ANAGE									
<u>Cr</u>		erence bureau report								
Th		ant qualifies for Kes								
		by	Sign	Date.						
		COMMITTEE	1' 17 1			<b>A</b>				
1.	Approve the Loan Application. Amount approved in Kshs									
	Words:									
	SignatureDate.									
2.	Reject the loan Application (Reasons)									
	Applica	Application Rejected by								
	Signatu	ro	Data							