## **DEFENCE SAVINGS & CREDIT COOPERATIVE SOCIETY**

ULINZI HOUSE, LENANA ROAD. P.O. BOX 40668-00100, NAIROBI, KENYA TEL: 0793281989

EMAIL: contactus@defencesacco.com

**PAYBILL: 907116** 



REVISED

## **LOAN APPLICATION FORM**

**Customer Care Stamp** 

## **INSTRUCTIONS**

- 1. Loan application form to be printed back to back.
- 2. Complete the form in block letters.

3. Attach the required documer	its (Copies of current pay slips, service II	O and copies of the guarantors	s' service ID.		
•	d signed, send to CAD/SAD offices for fu	-			
1. APPLICANTS' PERSONAL INF	ORMATION				
FULL NAME:		M/NO:	_SVC/NO:		
NATIONAL ID NO:	FORMATION/UNIT:	ION/UNIT:MOBILE NO:			
EMAIL:					
2. LOAN DETAILS (PLEASE TICK	AS APPROPRIATE)				
NEW LOAN	TOP-UP LOAN				
LOAN TYPES					
Loan Amount Applied For In Figure	Emergency Loan (12 months)  Fosa Unsecured (36 months)  Development Loan (48 months)  Deposit Purces:  Manufacturing and Servicing Industries  Agriculture  Land & Housing		nths)		
Mode of Loan Repayment:  NB: Salary must be channeled thro	Check off Standing order ough Desacco FOSA for standing order				
-	M	1onths:			
4. PAYMENT MODE (PLEASE TI	CK AS APPROPRIATE)				
(i) To DESACCO Fosa current acc (ii) IFT/EFT: Same day from co-o (iii) RTGS: Same day from co-op NB: If you choose (ii) or (iii) indicat	to other banks (charges 600/=)  te bank details below				
	BRANCH:				
ACCOUNT NAME:		ACCOUNT NUMBER:			

## 5. **DECLARATION**

I hereby authorize Defence Sacco Limited to confirm my credit information in other financial institutions and also any registered Credit Reference bureau (CRB) before processing this loan and also during repayment. I therefore, consent to my name, transaction and defaultdetails to be forwarded to CRB for listing in the event my account goes into default. I acknowledge that this information may be used by banking institutions and other guarantors in assessing application for credit by me, associated companies, and supplementary account holders and for occasional debt tracing and fraud prevention purposes. I also authorize Defence Sacco Ltd to use any registered debt collector to recover any outstanding liability owed. I hereby declare that the foregoing particulars are true to the best of my knowledge and belief. I agree to abide by the laws of the Society, the loan policy provision and any other variation by the Board of the Society in totality. I will inform the Society whenever I am transferred from my current work station. I willingly grant consent to DESACCO to verify, use, share and/or disclose the information given in accordance with the Society's By-laws and the Laws of Kenya. I authorize the necessary deductions, including interest on the loan, to be made from my salary or account as repayment for this loan.

NAME:		SVC NO:	SIGNATURE:	DATE://
. REPAYMENT GUARAN	ITEE			
GUARANTORS ARE REQUIR	RED TO CAREFULL	Y READ THROUGH TH	HIS LOAN APPLICATION FORM AN	ND UNDERSTAND THE
IABILITY BEFORE SIGNING)	)			
			lity for repayment of this loan of	
		derstand the amount	in default may be recovered from	n our salaries, offset
gainst our deposits within			,	
NAME	Service No	MOBILE NO	Guaranteed Amount (in Figures)	SIGNATURE
ii. Payslips (Current iii. Guarantors Natio	onal /Military ID ca		Designation: _	
ignature and Official Stamp	:		Date:	
CAD/SAD				
la mana			Davids Davidson	
lame: ignature and Official Stamp			Rank:Designat	ion:
ignature and Omciai Stamp	·	FOR OFFICIAL U		
LOAN PROCESSING		FOR OFFICIAL O	<u>JE ONLT</u>	
LUAN PROCESSING				
erified By: Rank	Name:		Date://20	_Signature:
aptured By: Rank	Name:		Date://20Sig	gnature:
pproved By: Rank	_Name:		Date://20Si	gnature:
Disbursed By: Rank	_Name:		Date://20	_Signature: :
Audited By: Rank	Name:		Date: / /20	Signature: