## **DEFENCE SAVINGS & CREDIT COOPERATIVE**

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

EMAIL: contactus@defencesacco.com PAYBILL: 907116



**REVISED** 

## **MAKAO MORTGAGE APPLICATION FORM**

Customer Care Stamp

INSTRUCTIONS			<u> </u>	Odotomor Saro Otamp		
1. APPLICANTS' PERSONAL INFORMA	ATION					
Z. A. FEIGHT OF EROOME IN ORIVI						
FULL NAME:		M/NO:		SVC/NO:		
NATIONAL ID NO:	FORMATION/UNIT:		MOBILI	E NO:		
KRA PIN:	EMAIL:					
2. INCOME DETAILS						
Gross income	Other incomes(specify)		Monthly rei	thly rental expense		
			-			
3. LOAN PARTICULARS						
Amount applied in figures						
Amount applied in words						
PURPOSE OF THE LOAN (Tick appropris	ately):					
House Construction	House Purchase					
4. PARTICULARS OF PROPERTY TO B	F MORTGAGED	_	_			
Plot No. and location of the property						
Name and contacts of property vendor (if						
Name and contacts of current occupier (if						
Ownership(Freehold/Leasehold/allotmen						
Selling Price /Cost of Development						
Indicate source and evidence of source of						
appropriately)		•				
Personal savings	Disposal of Investment	Γ	Amount	already spent		
Others (Specify):	•			, ,		
5. SPOUSE, NEXT OF KIN AND BENEF	FICIARY					
Marital Status: Married	Single	Divorced				
Spouse Name:		Spouse co	ntacts:			
Spouse ID No:						
Next of Kin:						
Relationship with next of Kin:						

List of	Beneficiaries:						
S/No	Name					Re	lationship
1							
2							
3							
6. DE	CLARATION	_					
I hereb	y declare that th	ne foregoing parti	culars are true to the best	of my kn	owledge	and b	pelief and agree to abide by the by-
laws an	nd loan policy of	the society and v	ariation by the Credit Com	mittee ir	respect	of am	nount applied and repayment
period.	I hereby author	rize the necessary	recoveries to be made fro	m my sal	ary/bank	c as re	payment for this home loan.
Applica	nt Name:						
				٦_			
Applica	nt Signature:			Date	2:		
				_			
7 FM	IDI OVER'S (IIN	IIT) RECOMMEN	ΙΠΔΤΙΩΝ	-	-		_
	•	•	rue copies of the applicant'	ς.			
i.	•	Ailitary ID card		J.			
ii.	Payslips (C	•					
Name:		•	Rank:			_ Des	ignation:
Signatu	ure and Official	Stamp:			n	ato:	
Signatu	ire and Official .	Stailip				ate	
8. CA	D/SAD						
Name:				Rank:			Designation:
Signatu	re and Official	Stamp:			Da	te:	
0.6							
			FOR OFFICIAL U	SE ON	<u>LY</u>		
9. LO	AN PROCESSIN	NG					
Cantur	ed Bv: Rank	Name:	ſ	)ate:	1	/20	Signature:

9. LOAN PROCESSING					
Captured By: Rank	_Name:	_Date:	_/	_/20	_Signature:
Approved By: Rank	_Name:	Date:	_/	_/20	_Signature:
Disbursed By: Rank	Name:	Date:	/	/20	Signature: