

UNI-COUNTY SAVINGS AND CREDIT SOCIETY LIMITED

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GENERATIONS HOUSE

P.O. BOX 10132-20100 NAKURU

EMERGENCY LOAN APPLICATION AND AGREEMENT FORM

NOTES/INFORMATION

1. Study this emergency loan application form very carefully before answering the questions.
2. Additional sheets of paper may be attached in the space provided when it is not enough.
3. The Management Committee reserves the right of reducing the total amount applied subject to eligibility of a member.
4. Giving false information on loan application form will lead to disqualification.
5. The emergency Loan will be paid within a period of one year.
6. While applying for emergency loan, the applicant will be required to attach documentary evidence of the same.
7. This document forms contractual agreement and shall remain in force for the period of loan repayment as detailed herein.
8. The Sacco may seek or disclose information about the borrower to Credit Reference Bureau and other agencies who may use or give information to other lenders.

A. PERSONAL DETAILS

DATE:

MEMBERS NAME

MEMBERS ADDRESS: TEL:

EMPLOYER'S NAME: ADDRESS:

PHYSICAL ADDRESS: TEL:

ID. No. MEMBERSHIP No. P/ No.

SECTION: DESIGNATION

ARE YOU A MEMBER OF ANOTHER SACCO?

TERMS OF SERVICE: PERMANENT / CONTRACT / SECONDMENT / CASUAL

POSITION IN SOCIETY i.e. COMMITTEE / OFFICER / OTHERS Specify

B. LOAN APPLICATION & REPAYMENT

AMOUNT APPLIED AMOUNT APPLIED IN WORDS

..... For a period of Months with equal monthly installments of Kshs commencing on

REASON

FUNERAL COURT FINE

MEDICAL DOMESTIC

SECURITY OFFER FOR THE LOAN IS:

1. 2. 3.

I HEREBY DECLARE THAT THE FOREGOING PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND MY BELIEF AND AGREE TO ABIDE BY THE BY LAWS OF THE SOCIETY. THE LOAN POLICY AND ANY VARIATION BY THE CREDIT COMMITTEE IN RESPECT OF SECTION B ABOVE. I HEREBY AUTHORIZE DEDUCTIONS BE MADE FROM MY SALARY AS REPAYMENTS FOR THE LOAN. I ATTACH THE PAYSLIPS FOR THE LAST TWO MONTHS.

SIGNATURE.....DATE.....
WITNESS NAME.....SIGNATURE.....
WITNESS PAYROLL NUMBER.....MNO.....

D. REPAYMENT GUARANTEE

WE THE UNDERSIGNED HEREBY ACCEPT JOINTLY, AND SEVERALLY, LIABILITY FOR THE REPAYMENT OF THE LOAN OF THE BORROWERS DEFAULTS. WE UNDERSTAND THAT THE AMOUNT IN DEFAULT MAY BE RECOVERED BY AN OFFSET AGAINST OUR SALARY AND THAT WE SHALL NOT BE ELIGIBLE FOR LOANS UNLESS THE AMOUNT IN DEFAULT HAS BEEN RECOVERED IN FULL.

GUARANTORS

1. NAME..... ID No..... M/No.
P/No.....SHARES..... SIGN.....
2. NAME..... ID No..... M/No.
P/No.....SHARES..... SIGN.....
3. NAME..... ID No..... M/No.
P/No.....SHARES..... SIGN.....

E. FOR OFFICIAL USE:

TOTAL DEPOSITS.....TOTAL LOAN OUTSTANDING KSHS.
FREQUENCY LOAN DURING THE YEAR.....AMOUNT CURRENTLY REQUESTED
KSHS..... NEW TOTAL LOANS WILL BE KSHS.....
ELIGIBLE CAL. SHARES KSHS.....x 3
MEMBERS PRESENT NET INCOME ISx 0.66 KSHS.....

TOTAL MONTHLY PAYMENT TO SOCIETY INCLUDING PAYMENTS ON LOAN REQUESTED ARE
KSHS..... (MUST NOT EXCEED AMOUNT ABOVE).THE GUARANTORS SHOULD
COVER THE AMOUNT OF LOAN REQUESTED.

WE CERTIFY THAT THE APPLICATION IS /NOT WITHIN THE RULES OF THE SOCIETY. IF NOT SPECIFY WHY.

.....
.....DATE

AUDITOR:.....SIGNATURE:.....DATE:.....

COMMITTEE'S REMARKS.....

CHAIRMAN.....SIGNATURE.....DATE.....

SECRETARY.....SIGNATURE.....DATE.....

MEMBER.....SIGNATURE.....DATE.....