

## SSB LOAN APPLICATION AND CONTRACT FORM

Qupa Microfinance Ltd (hereinafter referred to as "the Lender" which expression, unless repugnant to the context or meaning hereof, shall include its successor(s), administrator(s) or permitted assignee(s)) is a registered microfinance institution established and existing under the laws of Zimbabwe and having its registered corporate offices at 2nd Floor, Chambers House, Cnr. First and G. Silundika, Harare.

AND

### 1. CUSTOMER PERSONAL DETAILS

Title: Mr/ Mrs/ Miss	Mr _____	Surname: _____	First Name: _____
Gender:	_____	Date of Birth: _____	Marital Status: _____
Nationality:	Zimbabwean	I.D Number: _____	Cell Number: _____
WhatsApp:	_____	Email Address: _____	
Name of Responsible Ministry:	Education / Health / Home Affairs / Justice / Other: _____		
Name of Employer:	_____	Employer Address: _____	_____
Permanent Address (if different):	_____		
Property Ownership:	Owned / Employer Owned / Rented / Mortgaged / Parents Owned: _____		
Period at current address:	Less than One Year / Between 1–2 years / Between 2–5 years / More than 5 years: _____		
Status of employment:	Permanent / Contract / Part time: _____		
Job Title:	_____	Date of Employment: _____	Name of Head of Institution: _____
Cell No of Head of Institution:	_____	Current Net Salary (USD): \$ _____	Employment number: _____

### 2. SPOUSE AND NEXT OF KIN DETAILS

Full names	Relationship	Phone Numbers	Residential address
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### 3. BANKING/MOBILE ACCOUNT DETAILS

Bank	Branch	Account Number
_____	_____	_____

### 4. LOANS WITH OTHER INSTITUTIONS (ALSO INCLUDE QUPA LOAN)

Institution	Monthly Instalment	Current Loan Balance	Maturity Date
_____	_____	_____	_____
_____	_____	_____	_____

### 5. CREDIT FACILITY APPLICATION DETAILS

Price/ Applied Amount (USD):	\$ _____	Tenure:	3 months / 6 months / 9 months / 12 months / Other: months _____
Purpose/ Asset Applied For	<div style="border: 1px dashed black; height: 60px; width: 100%;"></div>		



## EARLY CONTRACT TERMINATION

The Borrower has the option to pay up the credit earlier than the maturity date. The Borrower shall, however, pay Qupa Microfinance early termination administration fees if the cancellation is voluntarily requested by the Borrower.

## IMPORTANT NOTICE

1. The terms and conditions highlighted in this agreement can be explained in the Borrower's local language upon request of the Borrower.
2. Qupa Microfinance reserves the right to decrease or increase the instalment amount or adjust the tenure where credit performance is an issue or statutory changes.
3. For all queries or enquiries customers should contact Qupa through the ZB branch network or Bancozim.

## CREDIT CESSION AND COLLATERAL

1. The Borrower hereby conclusively and unconditionally cede the credit to Bancozim.
2. The Borrower hereby cede the purchased item(s) as collateral for the credit and further authorises Qupa Microfinance through the Merchant to repossess or deny the use of the pledged asset in the event of a default.

## DECLARATION

I declare that the information given above is accurate and correct. I am aware that falsifying information automatically leads to decline of my credit application. I authorise Qupa Microfinance to obtain and use the information obtained for the purposes of this application from the recognised credit bureau. I authorise Qupa Microfinance to obtain references from Bancozim if there is need. I undertake to provide all documents required by Qupa Microfinance and to update all records in the event of change of any personal details. I hereby consent to be covered by Qupa Microfinance insurance policy which Qupa takes out with the insurance company of its choosing and further cede my rights to Qupa Microfinance in the event of a claim.

Full Name:

Signature:

Date:  
2025-10-30

## FOR OFFICIAL USE ONLY

Received & Checked by:	_____	Name:	_____	Signature:	_____	Date:	_____
Approved by:	_____	Name:	_____	Signature:	_____	Date:	_____

KYC Checklist

1. Copy of ID or Valid Passport
2. Current Pay Slip/Business records
3. Confirmation Letter from employer (serves as proof of residence)

Bank Stamp:





## **Deduction Order Form - TY 30**

(Please give effect to the following deduction)

[? New](#)   [? Change](#)   [? Delete](#)

## CUSTOMER DETAILS

First Name:	_____	Surname:	_____	ID Number:	_____																
Ministry:	_____	Province:	Harare _____	Employee Code Number:	<table border="1"><tr><td> </td><td> </td></tr></table>																
Department Code:	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>								Station Code:	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>							Check Letter:	_____			
Payee Code:	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>							Monthly Rate (installment amount):	\$ _____	From Date:	2025-11-30 _____										
To Date:	2026-10-30																				

## DECLARATION

I acknowledge receipt of a contract dated 2025-10-30 and confirm that I have read, understood, and accept the loan under the terms, conditions and warranties as stated therein and authorise Upa Microfinance and SSB to deduct money from my earnings or terminal benefits in the event of death or termination of employment according to the above instruction.

Full Name:

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**Signature:**

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Date:  
2025-10-30

FOR OFFICIAL USE ONLY

Authorised Signatory:	Name: _____	Signature: _____	Date: _____
Authorised Signatory:	Name: _____	Signature: _____	Date: _____

Qupa MFI Stamp:



# BancoZim

## PRODUCT ORDER FORM (P.O.F)

Date	2025-10-30	Client Name	_____
E.C Number	_____	Delivery Address	_____
Product/Item Description	Product Code	Quantity	Instalment
_____	.....	1	\$ _____
			<b>Total:</b> \$ _____

**Declaration by Ordering Client :-**

I the undersigned \_\_\_\_\_ (also known as the client) do hereby confirm that today I have indeed ordered the above stated product/item from Bancozim (also known as the product supplier) as per their product catalogue and/or price list shown to me. This being made possible and facilitated by a zero rated deposit S.S.B micro financing funding arrangement by Qupa Microfinance (also known as the financier) who will be deemed to be the custodians of the consequential loan and if successfully processed I will be fully indebted to them for all future instalments due. I further confirm that I have not been requested to pay an advance payment or deposit of any kind and neither have I paid any such monies to the Bancozim representative attending to me. I authorise Qupa Microfinance to compensate Bancozim to the value of loan amount as stated on the application form directly to them in exchange for my yet to be delivered ordered product/item. I do hereby acknowledge that once I have appended my signature on the loan application form and submitted all my KYC documents, then the process will then be deemed to be irrevocable and therefore cannot be cancelled. I confirm that the delivery of the product will be done to my employer's address as stated above free of charge and delivery to any other address other than this will be done as at Bancozim's management sole discretion and may require an extra transportation charge depending on the distance involved.

**I declare that if I initiate cancellation of this application for whatever reason then I authorize and agree to be charged a penalty equivalent to one month instalment.  
Which amount deemed as an administration cost shall be deducted directly from my salary without prejudice.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
I.D Number





The Manager  
Salary Service Bureau  
P.O Box CY Causeway

**DEDUCTION ORDER FORM - TY 30**

(Please give effect to the following deduction)

New: X      Change:      Delete:

**CUSTOMER DETAILS**

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_ ID Number: \_\_\_\_\_

Ministry: \_\_\_\_\_ Province: \_\_\_\_\_

Employee Code Number: \_\_\_\_\_ Check Letter: \_\_\_\_\_

Department Code: \_\_\_\_\_ Station Code: \_\_\_\_\_ Payee Code: \_\_\_\_\_

Monthly Rate (installment amount): \_\_\_\_\_ s \_\_\_\_\_ From date: 30112025 To Date: 30102026

**DECLARATION**

I acknowledge receipt of a contract dated \_\_\_\_\_ and confirm that I have read understood, and accept the loan under the terms, conditions and warranties as stated therein and authorise Quupa Microfinance and SSB to deduct money from my earnings or terminal benefits in the event of death or termination of employment according to the above instruction.

Full Name: \_\_\_\_\_

Signature:

Date:

2025-10-30

**FOR OFFICIAL USE ONLY**

Authorised Signatory: Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Authorised Signatory: Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Quupa MFI Stamp:

I.D N  
I declare that I have read the terms and conditions of this agreement and I fully understand them. I do hereby accept the terms and conditions of this agreement and I agree to be bound by them. I am well known to the above named company and I have read and understood the information contained in the attached document. I have read and understood the information contained in the attached document. I have read and understood the information contained in the attached document.

**OZIM**