

info@rekimucredit.com https://www.rekimucredit.com Office:+254 723 534 369

P.o Box 2484 - 90100,

Machakos

Letter of Loan Request

Mon, 04 Feb 19 15:46:40 +0300

FORM - RC 1. LOAN APPLICATION FORM

BORROWER'S DETAILS:

Full names	Alice Nduta Nganga
I.D./Passport number	4826380
Contacts – Telephone number	0727768432
Postal address	
Physical address – Business Location	General Hospital
Home address	19 Machakos
Email address	
Occupation	Nurse
Business name / Employer	County Government

I/ we the above mentioned have applied for a loan facility as follows:

Amount in Kes:	Ksh.20,000
Loan purpose:	Personal development
Repayment period	29 days

Security for the facility:

Collateral pledged by the Borrower:

(Note - Value to be more than twice the borrowed amount).

Description of the item (Serial no.)	Estimated Current Market Value
Total Market value.	Kes.

Client's Name & Signature:	 Date:

- All payment should be done through our Bank Accounts and the deposit slip forwarded to our offices for confirmation.
- Timely repayments and good credit record will attract rebates payable yearly.
- Our turn around time is at most 24 hours- provide all the necessary requirements on time.



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A sketch map showing client's bus	iness / work premises and residence
1. Business / Work premises	
2. Residence	
Acceptance of the Borrower:	
I have read and agreed to the terms an	d conditions here below:
1. I have willingly applied for the above le	oan facility and I shall abide by the said terms and conditions.
2. The pledged items are strictly prohibit	ted from being disposed in any way until the facility is fully repaid.
3. The lender reserves the right to cance contravention to the set terms and cond	el the application and or recall the facility in the event that the borrower acts in litions of this agreement.
4. I shall cater for any legal cost that may	y arise from my failure to honour my loan facility.
Client's Signature: Da	ate:
Client's Name & Signature:	

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RC 2. GUARANTOR'S INFORMATION	
Full names	
Relationship with the borrower	
I.D./Passport number	
Contacts – Telephone / Mobile phone.	
Postal Address	
Physical location – Business / residence	
Home Address	
E-Mail Address	
Name of the business / employer if employed	
undertake to guarantee the above borrower for the facility plus	all the interest accrued thereof until the facility is fully paid.
pledge the following assets as collateral for this borrowing:	

Description of the item (Serial no.)	Estimated Current Market Value
Total Market value.	Kes.

Acce	ntance	of the	Guarante	or.
ACCE	Diance	or trie	Guaranti	υı.

Name :	Signature :	
Client's Name & Signature	Date	

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RC3. REFEREE'S INFORMATION	
Full names	
Relationship with the borrower	
I.D./Passport number	
Contacts – Telephone / Mobile phone	
Postal Address	
Physical location – Business / residence	
Home Address	
E-Mail Address	
Name of the business / employer if employed	
I undertake to be a referee for the above borrower for the facility case of a default produce the borrower when called upon to do s	offered. I shall undertake to ensure the facility is fully repaid and in o.
Acceptance of the Referee:	
Name : Signature: _	

Client's Name & Signature:	Date:
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RC 4. OFFICE VERDICT

FOR OFFICIAL USE ONLY		
Company Name Ltd received your loan request and Approved / declined		
If approved:		
Amount applied:	Amount approved:	
Date received :	Date to be approved:	
Name & Signature of the approving officer :		

Client's Name & Signature:	Date:
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RC 5. REPAYMENT SCHEDULE

This loan is scheduled to be paid in 1 installment(s)

Date	Installment Principal	Installment Interest	Total
14 Jan, 2019	ksh.20,000	ksh.3,000	ksh.23,000
		ksh.3,000	ksh.23,000

Client's Name & Signature:	Dato
Client S Name & Signature:	Date:

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