

THE REGISTRATION OF DOCUMENTS

ACT (CAP. 117)

TUWAMIF SERVICES`S FOR STAFFS`  
BENEFICIARIES FACILITATION AGREEMENT

BETWEEN

TUNZA WAZAZI MICRO-FINANCE TANZANIA  
COMPANY LIMITED “TUWAMIF”

AND

.....

CONTRACT# \_\_\_\_\_

DRAWN BY:

TUWAMIF  
SALASALA, KILIMA HEWA,  
SERONGA ROAD, PLOT #370  
P.O. BOX 63262,  
DAR ES SALAAM

## AGREEMENT FOR CHANNELING OF SUBSISTENCE ALLOWANCE

This Agreement is made at Dar es Salaam this \_\_\_\_\_ day of \_\_\_\_\_

### BETWEEN

**TUNZA WAZAZI MICRO-FINANCE TANZANIA COMPANY LIMITED** a Limited Liability company having its registered office in Dar es Salaam in the Republic of Tanzania and whose postal address is at SalaSala, Kilima Hewa, Seronga Road, Plot # 370, P. O. Box 63262, Dar es Salaam aforesaid (hereinafter called "TUWAMIF" which expression shall include its successors and assigns where the context so admits) **OF THE ONE PART**

### AND

I \_\_\_\_\_ (First-name);  
\_\_\_\_\_  
\_\_\_\_\_  
with NIDA# \_\_\_\_\_  
employee payment number / Check number \_\_\_\_\_ an individual natural person having his/her address at \_\_\_\_\_ TEL #1: \_\_\_\_\_ TEL #2 : \_\_\_\_\_ ,

Email address: \_\_\_\_\_ aforesaid (hereinafter called "**the Contributor**" which expression shall include its successors and assigns where the context so admits) **OF THE OTHER PART**

**WHEREAS** the plan (TUWAMIF) is a scheme established for the purpose of channeling of substance allowances for the contributor herein who are self employed or employee at \_\_\_\_\_

(organization, institute, authority or any other government agency) focusing to finance the contributor's beneficiaries.

**WHEREAS** the plan (TUWAMIF) is willing at consideration

and terms to be agreed to facilitate the payment of the post channeled subsistence allowances to the (first name) \_\_\_\_\_, (second name) \_\_\_\_\_, (Last name) \_\_\_\_\_ a (Father/Mother/Uncle/Aunt/Cousin/Nephew/GrandParent/Friend/Brother/Sister) or to \_\_\_\_\_

(Project/Activity/Occasion/others) located at (Region) \_\_\_\_\_, (District) \_\_\_\_\_, (Village) \_\_\_\_\_, \_\_\_\_\_, Tel/Mob: \_\_\_\_\_, respective contributor's beneficiary.

For the period starting this \_\_\_\_\_ (month) and (year) \_\_\_\_\_ till this \_\_\_\_\_ (month) and \_\_\_\_\_ (year). The channeled amount from contributor herein who are the staffs or employees at

(Public/Private/NGO's) which shall facilitate implementation of the said agreement.

**AND WHEREAS** the contributor agrees to channel the said Subsistence Allowance via TUWAMIF Scheme to the receiver / beneficiary monthly for the period of \_\_\_\_\_ months from \_\_\_\_\_ monthly salary/personal bulk deposit/other source \_\_\_\_\_.

### Contribution Details

Employee payment number / Check number	
Contribution Amount (Tshs)	
Monthly Service's charge(Tshs)	
Total Contribution Amount (Tshs)	
Duration o contribution (month's)	

NOW THIS AGREEMENT WITHNESSTH AS HEREUNDER

**1. CHANNELLING OF SUBSISTENCE ALLOWANCE**

In consideration of terms and conditions described in this agreement, TUWAMIF shall channel the amount of Tanzanian Shillings

from the contributor's source of income to (one or multiple) beneficiary named as:-

A. First name \_\_\_\_\_;  
Second Name \_\_\_\_\_  
Last Name \_\_\_\_\_

a who is located at

(Region) \_\_\_\_\_,  
(District) \_\_\_\_\_  
(Village) \_\_\_\_\_  
Tel/Mob: \_\_\_\_\_

B. First name \_\_\_\_\_;  
Second Name \_\_\_\_\_  
Last Name \_\_\_\_\_

a who is located at

(Region) \_\_\_\_\_,  
(District) \_\_\_\_\_  
(Village) \_\_\_\_\_  
Tel/Mob: \_\_\_\_\_

C. First name \_\_\_\_\_;  
Second Name \_\_\_\_\_  
Last Name \_\_\_\_\_

a who is located at

(Region) \_\_\_\_\_,  
(District) \_\_\_\_\_  
(Village) \_\_\_\_\_  
Tel/Mob: \_\_\_\_\_

**OR**

To a Project/ Activity/ Occasion/ others;-

Termed as \_\_\_\_\_  
located at (Region) \_\_\_\_\_,  
(District) \_\_\_\_\_  
(Village) \_\_\_\_\_  
Tel/Mob: \_\_\_\_\_

**2. COLLECTION AND DELIVERY TIME**

TUWAMIF shall request establishment of contribution code into private, and/or government institutions and prefers the delivery date of contributions to be on 24th of every month. And further that, TUWAMIF shall channel the subsistence allowance with reasonable notification email and or sms to contributor's

beneficiary. Where the subsistence allowance cannot be made within the period set forth, TUWAMIF shall notify the contributor and their beneficiary of the expected period within which the funds will be delivered to the beneficiary.

**3. BANK SERVICES**

The contributor shall bear the cost for opening an account to non account holder for their beneficiaries [parents, guardians, or dependents] save only where the bank account is provided by the contributor during the registration but subject to confirmation with respective bank; NMB BANK, as preferred bank for the plan by TUWAMIF.

**4. LIMITATION OF LIABILITY**

The released value of the contributed subsistence allowance is hereby specifically stated by contributor to be Tanzanian Shillings

only. The agreed value shall be channeled and charged in monthly basis as per (**select one**) category "See Section 6";-

A. Individual

Block figure \_\_\_\_\_ TSH OR Percentage \_\_\_\_\_ of  
\_\_\_\_\_ TSH

B. Group/Family

Block figure \_\_\_\_\_ TSH OR  
Percentage \_\_\_\_\_ of \_\_\_\_\_ TSH

C. Company/NGOs'

Block figure \_\_\_\_\_ TSH

The rates quoted in this agreement are subjected to periodic review upon a written agreement between the parties herein. Protection against loss or wrongly channeling of subsistence allowance exceeding contributor liability under this agreement may be secured, if desired, by obtaining additional insurance coverage through contributor.

**5. INSURANCE**

Notwithstanding the declaration of value in Section 4, TUWAMIF (T) Co. Ltd hereby declares the total amount at recipient to be TZS \_\_\_\_\_ of which TUWAMIF insure its coverage for a total protection.

**6. CHARGES**

**6.1.** Client shall have to comply with Section 2 of the main contract termed AGREEMENT BETWEEN TUWAMIF AND AUTHORITY/EMPLOYER

**6.2. Subsistence Allowance Scheme: Code TWM-SB**

These are money deducted from contributor source of fund such as salary intended to specified beneficiary under monthly basis. The minimum contribution amount to beneficiary per month shall be 40,000/=TSH.

**6.2.1.TWM-SB from Individual; Code TWM-SB01**

These are subsistence allowances contributed from individual/s to beneficiary. These shall be executed by either of the

followings:-

**A. Contributing by Block Figure; Code TWM-SB01BF,** refer These shall comply with;-

- a) Clause 2.1.1 and 2.1.2 remain;

**B. Contributing by Percentages; Code TWM-SB01PT**

The contributor shall comply with;-

- a) Clause 2.1.1 and 2.1.2 shall remain;
- b) There shall be service facilitation charges served as follows;-
  - i. Class A; 5% of (X); charges Annexure A;
  - ii. Class B; 7.5% of (X); charges Annexure A;
  - iii. Class C; 10% of (X), charges Annexure A

**6.2.2.TWM-SB from Group/Family; Code TWM-SB02**

These are subsistence allowances contributed from a group of people of same location or from a number of organized family members toward a beneficiary. These shall be executed by either of the followings;-

**A. Contribution by Block Figure; Code TWM-SB02BF**

These shall comply with;-

- a) Clause 2.1.1 and 2.1.2;

**B. Contribution by Percentages; Code TWM-SB02PT**

These shall comply with;-

- a) Clause 2.1.1 and 2.1.2 shall remain;
- b) There shall be service facilitation charges served as follows;-
  - i. Class A; 5% of (X); charges Annexure A;
  - ii. Class B; 7.5% of (X); charges Annexure A;
  - iii. Class C; 10% of (X), charges Annexure A

**6.2.3.TWM-SB from Company/NGO's; Code TWM-SB03**

These are subsistence allowances contributed from company/s or NGO's to one or more identified beneficiary. These shall be executed by individual through block figure contributions.

**A. Contributing by Block Figure; Code TWM-SB03BF**

These shall comply with;-

- a) Clause 2.1.1 and 2.1.2 remain;

**7. CONTRIBUTOR'S LIEN**

TUWAMIF shall have a general lien on any and all transaction involved in subsequent channeled or depository by contributors for the information interchanged or performance of the other services. Such lien shall also be extend to such transaction for all lawful claims for money, advanced subsistence allowance, interest, communication privileges, and other charges in relation to such transaction or any part thereof for all charges and expenses for notice and advertisement of sale of the goods where there has been a default in satisfying banks obligation under this agreement: and for all court costs and reasonable attorney fees in collecting such charges or enforcing such lien or in defending itself in the event that it is made party to any litigation concerning the goods

while they are in its possession.

**8. OWNERSHIP OF TRANSACTION**

TUWAMIF represents and warrants that banks is lawfully possessed of described transactions and has the authority to channel/transfer and/or accounting for such transaction in accordance with the terms of this agreement. TUWAMIF shall indemnify contributors in the event of any adverse claim or in the event contributor is made a party to any litigation by reasons of having the transaction, or any portion thereof, channeled, or deposited, and shall pay attorney fees and court costs, if any incurred in connection with such litigation.

**9. GOVERNMENT RECOGNITION**

The plan for executing requested Service's shall be subjected to government regulations and the service to be performed in accordance to this agreement shall be governed by rates, interest, and regulations of micro-finance bodies.

**10. CHANGE OF BENEFICIARIES' PARTICULARS**

The contributor shall promptly notify in writing of any change of particulars of beneficiary and where required provide bank accounts, address or other details to TUWAMIF.

**11. DELAYS**

In the event the TUWAMIF is delays in the processing of disbursement of subsistence allowance, but due acts of God, fire, flood or any other unavoidable casualties; or by labor strike, late processing of employees salaries, or by skipped employees contribution, or by neglect of conditions and terms, the time for disbursement of subsistence allowance to beneficiaries shall be extended for the same period as the delay occasioned by any of the aforementioned causes.

**12. CONFORMITY WITH ADVANCES AND UNFORECASTED SERVICES**

The TUWAMIF agrees to re-execute any service sounding micro-finances, and warrants the disbursement performed, and agrees to remedy any defects resulting from beneficiaries' acts which shall become evident during completion or closing of the agreement.

**13. INDEMNIFICATION**

In the event the disbursement of subsistence allowance to beneficiaries due to TUWAMIF gross negligence, the TUWAMIF agree to top-up a 1% disturbance charges as liquidated damages until such time as disbursement is completed.

**14. DEFAULTS; REMEDIES.**

The occurrence of any one or more of the Additional Events of Default set forth in this agreement or any of the following events shall be an event of default:

- A) Death, Dissolution, etc.

If the beneficiary or contributor is an individual, death of the beneficiary or contributor; or if the beneficiary is a partnership, death of a general partner; if the beneficiary or

any entity or surety named before in Section 1 of the Schedule is a Registered Organization, dissolution or termination of the existence of such Registered Organization, or failure of the Registered Organization to continue to operate as a going concern;

B) Court Order or Decrees

- i. An approval or consent of the beneficiary, by any court of competent jurisdiction, approving a petition seeking reorganization of the beneficiary or appointing a new receiver, trustee or liquidator of the beneficiary or of all, or respective bank account being under investigation as per bank notice, or and such order or judgment or decree issued by the court to redirect beneficiary, death can be considered an event of default, and your default on any other disbursement of subsistence allowance to the beneficiary can trigger default on this agreement as well.
- ii. Upon receiving above listed information and or related which trigger validity of this agreement; TUWAMIF will notify the contributor and issue a written notice of Termination of Contract to Contributor within three (3) days upon received information.

**15. CONTRIBUTER ENTITLEMENTS**

A) CONDOLENCE

Subject to the provision of Section 14.A; upon the death of an active contributor or beneficiary who has contributed or receiving a subsistence allowance in total of not less than 2years, the condolence of one month will be paid to the contributor or the named next of kin during registration with TUWAMIF.

B) CONTRIBUTOR PRIVELEDGE

For every contributor who has signed a contract for any service provided by TUWAMIF shall be entitled to an account which will enable him/her to log in and observe the disbursement of his/her contribution to his/her beneficiaries. Furthermore, a contributor who contributed for not less than two years he/she will be entitled a free TUWAMIF email account for the whole time in which the contract survive plus a one way bus ticket to visit his/her beneficiary after every two years of contribution.

**16. DISPUTE RESOLUTION**

If a dispute, difference or controversy arises between parties out of or in relation to or in connection with this Agreement shall be first settled in good faith by parties by negotiation. If the dispute, difference or controversy remains unsettled within the period of forty five (45) days the same shall be finally settled by arbitration composed of two arbitrators one appointed by each party and the chair person to be appointed by the mutual consent of parties. The decision reached by the Arbitrator shall be final, binding and conclusive on both Parties.

In **WITNESS WHEREOF**, the parties hereto have executed this agreement as of the day, month and year first appearing above.

**SEALED** with the **COMMON SEAL** of the Said **TUWAMIF** and **DELIVERED** in the presence of us this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

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

Signature: \_\_\_\_\_

Designation: \_\_\_\_\_

Email address: \_\_\_\_\_

Postal Address: \_\_\_\_\_

I, CERTIFY that the Director/Manager/ Secretary of the above named TUWAMIF appeared before me on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ and, being known to me acknowledged the above signatures to be theirs and that they have freely and voluntarily executed this instrument and understood its contents.

(Signature) \_\_\_\_\_  
COMMISSIONER FOR OATHS

**SIGNED** and **DELIVERED** by the said

\_\_\_\_\_ who is known to me personally / identified to me by the latter \_\_\_\_\_  
CONTRIBUTOR being known to me personally in my presence this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

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

Signature: \_\_\_\_\_

Designation: \_\_\_\_\_

Email address: \_\_\_\_\_

Postal Address: \_\_\_\_\_

**SIGNED** and **DELIVERED** by the said

\_\_\_\_\_ who is known to me

personally / identified to me by the latter \_\_\_\_\_  
**CONTRIBUTOR** being known to me personally in my presence this \_\_\_\_\_  
day of \_\_\_\_\_ 20\_\_\_\_

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

Signature: \_\_\_\_\_

Designation: \_\_\_\_\_

Email address: \_\_\_\_\_

Postal Address: \_\_\_\_\_