

BANK M (TANZANIA) LIMITED STAFF LOAN APPLICATION FORM

1	Name of the employee:	
	Bank Account No.	
	Branch/Department:	
2	Designation:	
	Date of Birth	
	Date of Joining	
	Date of Confirmation	
	Terms of Service:	
	Permanent/Contract/Temporary	
3	Current Gross Salary per Month	
	Net Salary (Attach latest payslip)	
	(Account latest payonp)	
4	Credit Facilities and/or Emergency Loans Held with the Bank (i.e. BANK M)	
	a) Amount of Outstanding Loan Personal Loan TZS Emergency Loan TZS Rent advance TZS	b) Type of Loan (Please tick where applicable) □ Personal Loan □ Emergency Loan □ Rent advance
	c) Maturity date of the Loan	Personal Emergency
	d) Monthly deductions/repayments.	

5	Credit Facilities Held with other Banks/Other External Loans	
	a) Name of the Bank	
	b) Amount of Outstanding Loan	
	c) Maturity date of the Loan	
	d) Monthly deductions/repayments.	
6	Application for Personal Loan/Car	
	a) Loan Applied For (Please tick where applicable)	b) Amount Requested:
	□ Personal Loan	$\sqrt{\text{Personal LoanTshs}}$
	□ Rent Loan	$\sqrt{\text{Rent LoanTshs}}$
	□ Emergency Loan	Emergency loan -Tshs
	c) Proposed Repayment Period	d) Repayment Amount
	$\sqrt{\mbox{Personal LoanMonths}}$	$\sqrt{\text{Personal LoanTshsper month}}$
	Rent LoanMonths	$\sqrt{\text{Rent LoanTshsper month}}$
	Emergeny LoanMonths	Emergency Loan—Tshsper month
7	No. of times Emergency loan availed i	n current year
8	Purpose for which the loan is applied:	

I hereby declare that the information stated above is true and correct to the best of my knowledge and belief and agree to abide by the loan policy and any variations in respect of the above loan. In case of resignation/ termination of my services, I undertake to liquidate the outstanding loan amount immediately failure to which the loan will attract interest at commercial/penal rates. I also authorize the bank to adjust my loan dues against the PPF benefits payable to me.

Declarations:

- 1. I hereby certify that no credit facilities availed of from any bank were recalled and/or no legal action has been initiated by any bank against me for non-payment of advances availed of by me.
- 2. Authority to disclose information in the event of default.

I, as a pre condition to accepting the terms of any offer of facilities as a result of this application, agree that, in the event of default, Bank M Tanzania Limited may, at its sole discretion, pass the factual and true default information to a Credit Reference Bureau without legal recourse by me the applicants herein.

Yours truly,

Signature of Applicant: ------Date------Date-----

Head of Department/Supervisor (For Forward Approval to HR) **Application perused and in order.**

8	Name	Signature	Date

NOTE: Items 10 and 11 below should be completed by CAD & Finance before request is approved.

Credit Administration Department (For confirmation of outstanding internal loans)

9	Outstanding Internal Loan	
	Amount	
	Monthly Deduction on Internal	
	Loans	
	Signature of confirming Credit	
	Officer	

Finance Department (For confirmation of monthly deductions towards all external and/or internal loans inclusive of the proposed loan)

10	Monthly Gross Loan Deductions	
	Signature of confirming Finance Officer	

Recommendation by Human Resources Department.

11	Eligibility for amount	Amount Eligble TZS	Amount Applied TZS	Eligible Yes/ No
	Deductions	%age with proposed loan	Lower than 50% of Net salary stipulated	Eligible Yes / No
	Tenure of service	No. of months	Minimum Six months	Eligible Yes/ No
	Signature Head-HR		Date	

Approval

Comments	
Signature	
Designation	Chief Credit Officer
Date	