

SALARY ADVANCE FACILITY

Documents to be submitted with this application:

1. Clear copy of National Registration Card 2. Latest Stamped Payslip 3. Latest Stamped Bank Statement

ABOUT YOU - THE APPLICANT

First Name																									
Middle Name																									
Surname Name																									
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female																								
Date of Birth	D D M M Y Y Y Y																								
Marital status	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed																								
National Registration Card No.	/ /																								
Tax Payer Identification Number																									
Mobile Number													Email Address												

ABOUT YOUR HOME ADDRESS

House/Plot Number											Street/Road											Area										
City											Province											Accommodation Type	<input type="checkbox"/> Owned <input type="checkbox"/> Rented									

ABOUT YOUR EMPLOYMENT

Employer Name																								
Employee Number																								
Designation																								
Employment Type	<input type="checkbox"/> Permanent <input type="checkbox"/> Contract																							
Contract Period	D D M M Y Y Y Y - D D M M Y Y Y Y																							

ABOUT YOUR INCOME

Gross Pay (ZMW)								
Statutory Deductions (ZMW)								
Loan Deductions (ZMW)								
Other Deductions (ZMW)								
Net Pay (ZMW)								

ABOUT YOUR BANK DETAILS

Bank Name																								
Bank Account Number																								

ABOUT YOUR MOBILE MONEY WALLET

Mobile Network Operator	<input type="checkbox"/> MTN <input type="checkbox"/> Airtel <input type="checkbox"/> Zamtel																							
Mobile Money Number																								

EMPLOYER CONFIRMATION

We hereby confirm that the applicant with the above details as per our payroll records is and has been an employee of our organisation for the period stated above. We further confirm and advise that we shall deduct via payroll the loan repayment amount(s).

Name of Authorized Signatory																									
Designation																									
Mobile Number													Official Stamp												
Signature																									

APPLICANT DECLARATION

I confirm that the information contained in this application for a Salary Advance Facility is CORRECT. I accept and consider myself bound by it. I further declare that I have been totally honest, truthful, and informed QFIN CREDIT LIMITED of all my obligations and commitments.

																								D D M M Y Y Y Y															
Applicant Full Names												Applicant Signature												Date								Place							

TERMS AND CONDITIONS

- 1. THE LENDER:** QFIN CREDIT LIMITED, acting through its office at 3A Joseph Mwilwa Road, Rhodes Park, Lusaka, or such other office as it may from time to time select.
- 2. THE BORROWER:** As stated in ABOUT YOU - THE APPLICANT section.
- 3. NATURE OF FACILITY:** Salary Advance
- 4. AMOUNT:** As may be approved by Qfin Credit Limited.
- 5. EXPIRY DATE:** Next Pay Day.
- 6. PURPOSE:** Personal.
- 7. REPAYMENT:** The Loan shall be repayable on the next Pay Day.
- 8. INTEREST:** 15%
- 9. INTEREST CHANGES PROVISION:** QFIN CREDIT LIMITED reserves the right to determine and change the applicable Interest Rate applicable from time to time.
- 10. NOTIFICATION PROVISION:** In the event that QFIN CREDIT LIMITED adjusts the Interest rates, a general notice will be given to the borrower and their respective Human Resource Department.
- 11. SECURITY:** In the event of termination or resignation, assignment of all the end of Service compensation and benefits should be credited to QFIN CREDIT LIMITED for closure of outstanding balance.
- 12. PREDISBURSEMENT COVENANTS:** The Borrower should be confirmed.
- 13. POST DISBURSEMENT COVENANTS:**
 - (i) In case the Borrower leaves the company, the outstanding balance on the loan will be repaid in full before the last working day.
 - (ii) In the event that the Borrower leaves the company or is dismissed, the entire outstanding balance becomes due and is payable immediately.
- 14. AVAILABILITY OF CREDIT LINE:** The credit line will be made available by the Lender via Web App, Mobile App, or USSD to the Borrower upon acceptance of this letter of Offer.
- 15. LEGAL FEES:** Payable by the Borrower on suits filed to recover any outstanding amount(s).

Please provide Copy of ID, Latest Payslip and Bank Statement together with this application. Kindly sign and return the attached duplicate copy of this letter as an indication of your acceptance of the terms and conditions set herein.

ACCEPTANCE BY BORROWER

I accept the conditions set for the Salary Advance Facility above and confirm that I have read and understood the terms of this schedule and agree to the provisions set out herein.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Applicant Full Names	Applicant Signature	Date	Place

FOR QFIN USE ONLY

Application inputted by:	Application verified by:	Compliance Check by:
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Signature	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date <input type="text"/>	Date <input type="text"/>	Date <input type="text"/>