LAIKA SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LTD. (LOAN APPLICATION AND LOAN AGREEMENT FORM) KARIBU LOAN FORM

PLEASE ATTACH A COPY OF YOUR IDENTITY CARD

A: PERSONAL & EMPLO	YMENT INFOR	MATION:	
1. Membership No			
Group			Mob. No
4. Name	5. ID 1	No	Mob. No
6. Position in Society: Com	mittee:-Member:	- Others:-Spe	cify
7.EmployersName	Ad	dress	
9. Terms of employment: (7	Tick the appropri	iate box)	
Permanent/Seasonal			
D. C. C. L. L. DDV LC. L. TVO. L.			
B: LOAN APPLICATION			annean an ID aand)
I	(Full I Kebe	names as tney	ds
For a period of	months to be r	nr word enaid installn	nents of Kshs
Per month. Commencing fr	om	epara motami	Territo di Territo.
Interest of 1.5% fixed rate c	ommencing fron	n	month.
C: LOAN PURPOSE:			
1:			
2:			
D: SECURITY WHICH I C	FFFR FOR THE	LOANS IS:	
	_		
E: AUTHORITY FOR DE			
-	•		e loan's monthly installment
			terms of the loan. Additionally I
			ce until the loan is repaid in full. I
-	·	•	s and benefits and remit to the
			ned employer towards the loan
repayment if the loan ha	s not been repa	iid in full.	
DEDUCTIONS:		BRE	AK DOWN:
	ıtion from		to Kshs:
			to Kshs:
			to Kshs:
1.1311dily 20dil Tepay Inch	10110		
Loanee Signature:		Date	
Witnessed by: Name:	ID:		Signature:

F: REPAYMENT GUARANTEE:

We the undersigned hereby accept to be jointly and severally liability for the repayment of this loan, interest and charges thereof in the event of borrowers default. We understand that the amounts in default may be recovered by an offset against our Deposits in the Society or by attachment of our property or salary, and that we shall not be eligible for loan unless the amount in default has been cleared in full.

C.	CII	ΔR	ΔΝ	TC	RS:
(T:	(TU	AI	AIN		ハコ:

Payroll	Employer	Name	Deposits	Loan	I D No.	Signature
No/M/No	_ ,		Kshs	Kshs		
Deposits		_x3	Minus loan_		Mi	nus
Guarantees_		Loan applied		_= Kshs		

(RESULT MUST BE MORE THAN ZERO)

Consent Clause:-

- 1. a). I/We warrant that the information given in this application form is true and complete and authorize you to make any enquires necessary in connection with this application.
 - b). I hereby confirm that I have authorized Laika Sacco Society to share my credit information/access my credit profile and those of the Directors/Guarantors for credit appraisal with licensed Credit Reference Bureaus (CRBs).
 - c). I further release CRB and Laika Sacco and its officers, employees and agents from all claims, actions or proceedings of whatsoever nature and howsoever arising, suffered or incurred in connection with this sharing and access for the purpose afore stated.
 - d). I/We confirm that we have read and understood the standard trading terms and conditions (as amended time to time) and agree to bound by them. I/We agree that am/are jointly/severally reliable for amount outstanding at any time in the account.

FULL NAME	ID/NO		
	,		
SIGNED.	DATE.		

H: FOR OFFICIAL USE ONLY:

Total Deposits Kshs:	Total loan Outstanding Kshs			
Amount currently requested Ksh				
Deposits Kshs>	3 = Kshs	S		
Members present net monthly inc	come Kshs:	x 0.66 = Kshs		
Total monthly payment to society	including above	loan Kshs		
(Amount must not exceed 66% ru	ıle)			
Does the guarantors' cover the lo	an amount? Yes/I	No		
I certify that the application is/is	not within the Ru	ıles of the Society		
(If not specify:				
Official name:S	signature:	Date:		
I: CREDIT COMMITTEE:				
Loan approved, Kshs	Recoverable	e in installmen	ts of	
KshsMonthly and]				
Credit Committee Minutes No: _	Date	ed		
Chairman: Secre				
J: OTHERS:				
Cheque Nofor Kshs		Date:	_	
Received by (Name):	Signature	::Date:		