



SKYLINE SACCO SOCIETY LTD

P.O BOX 660-20103, ELDAMA RAVINE TEL 0717594338/084

Email: info@skylinesacco.com

Website: www.skylinesacco.com

LETTER OF OFFER

Date: _____

To: _____

P.O. Box _____

City / Town _____

Dear Sir/ Madam,

We refer to your application for a loan of Ksh _____ Dated _____

Day of _____ and we are pleased to advise you that the same has been approved subject to following terms and conditions;

Loan Type _____

Loan appraisal fee _____

Interest Rate _____ % per month

Repayment Period _____

Repayment Amount _____

Loan Processing fee _____

Loan Repayment: You will be advised on the repayment amount once the loan is booked into our system

Default loan: Facility will attract default amount of Kshs _____ as penalty for any overdue amount upon follow – up

Saving: Any loan due will be deducted from the savings amount. You are required to maintain the saving account throughout the period of the loan.

Loan Protection The built – in protection cover ensures that:

- Cover:
- (a) The loan is covered during the period of the loan
 - (b) In case of total and permanent incapacitation of the borrower, the loan balance will be paid under loan protection cover.
 - (c) In case of death the loan will be paid under protection cover, provided the loanee has not defaulted.

Other Condition: It is mandatory for you to execute all the security documentation for loan applied.

ACKNOWLEDGEMENT

I _____ of ID No. _____ acknowledge Receipt of the original letter of offer, accept the offer and undertake to comply with the terms and conditions therein.

Signature (Loan Applicant) _____ Date: _____