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UFANISI LOAN APPRAISAL FORM

MR./MRS./MISS……………………………………….TSC/PF. NO………………….MNO……….…

DEPARTMENT……………………TERMS OF SERVICE……………….……..AGE………….........

WARD………………………………BASE…………………………..SCHOOL………………………

TELEPHONE NO………………………………………………………………………………………..

PART 1

PRESENT GROSS SALARY KSHS…………………………………………………………………….

NET SALARY KSHS……………………………………………………………………………………

MONTHLY SHARE CONTRIBUTION………………………………………………………………..

PART II

LOAN AMOUNT REQUESTED………………………………….REASONS……………………….

PROPOSED RECOVERIES KSHS……………………………….P.M. INTEREST (2%) KSHS……..

SIGNATURE………………………………………………….DATE………………………………….

FOR OFFICE USE PART III

A.SHARE CAPITAL SHARE/CONTRIBUTION

LOAN OUTSTANDING KSHS………………………………………………………

PREVIOUS LOAN TAKEN IN THE MONTH OF………………………………….

LAST DATE OF DEDUCTION… (Applies to Normal Loan Only)

**SHARES 0.4% OF THE LOAN REQUESTED: YES**………………**NO**……………………

II LOANS DEPARTMENT

1. AMOUNT RECOMMENDED… 2/3 OF GROSS SALARY
2. TOTAL MONTHLY PAYMENTS
3. THE APPLICANT IS/NOT A GUARANTOR OF LOAN BEING DEFAULTED OF KSHS……………………………….TAKEN IN……………………..20……………

PREMIUM AMOUNTS KSHS…………………………………………………………

B: REMARKS BY LOANS OFFICER

……………………………………………………………………………………………………

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…………………………………………………………………………………………………… ACCOUNTANT………………………………………………………………………………… MANAGER’S REMARKS……………………………………………………………………… SIGNATURE……………………………………………………………………………………..