

TAMAKIKA

SAVINGS INVESTMENT AND CREDIT SOCIETY



**LOAN
NUMBER : TL.....**

SOKOPLUS LOAN APPLICATION FORM

CONTACT US:
0762091448/0706002062
EMAIL: credit@tamakika.co.ke
WEBSITE: www.tamakika.co.ke

I. PERSONAL DETAILS

NAME:			
ID NUMBER:		GENDER:	
AGE:		MARITAL STATUS:	
TELEPHONE ADDRESS:		EMAIL ADDRESS:	
KRA PIN:			
TYPE OF RESIDENCE: Self Owned:		Rented:	
ESTATE:		LOCATION:	
CONSTITUENCY:			
RESIDENTIAL DESCRIPTION (nearby landmark/road):			
MEMBERSHIP NUMBER:		NON-MEMBER:	
SIGNATURE:			

II. BUSINESS DETAILS (attach photos of business and owner)

BUSINESS NAME:			
TYPE OF BUSINESS: Self Owned:		Rented:	
Group/Joint:			
LOCATED AT:		estate,	
Constituency,		County,	
RESIDENTIAL DESCRIPTION (at least two nearby landmarks/road):			
YEARS OF OPERATION:			
PROOF OF OWNERSHIP: (attach photo/document)			
DEALS WITH:			
AVERAGE MONTHLY INCOME (attach statements/turnovers):			
METHOD OF OPERATION:			
SIGNATURE:			

III. LOAN DETAILS

AMOUNT:	
AMOUNT IN WORDS:	
DATE OF APPLICATION:	
PERIOD:	
TO BE DEPOSITED IN THE FOLLOWING ACCOUNT:	
M-Pesa Account Number:	
Airtel Money:	
Bank:	
Bank Account:	
SIGNATURE:	



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IV. BUSINESS LOCATION(Draw Map)

DRAW MAP WITHIN THE BOUNDARIES OF THIS BOX
INCLUDE KEY LANDMARKS, CHURCHES, SCHOOLS AND ROADS

IV. GUARANTORS INDEMNITY

a) Non-Member (Attach passport photo, ID and KRA PIN Copy)

NAME:							
ID NUMBER:		GENDER:		AGE:		MARITAL STATUS:	
TELEPHONE ADDRESS:		EMAIL ADDRESS:					
KRA PIN:		RELATIONSHIP WITH APPLICANT:					
TYPE OF RESIDENCE:	Self Owned:		Rented:				
ESTATE:		LOCATION:		CONSTITUENCY:			
RESIDENTIAL DESCRIPTION (nearby landmark/road):							
EMPLOYED:		Self employed:		State type of business and location:			
By appending my signature below, I hereby agree that the applicant is well known to me and confirm that he/she has been in the mentioned business for a period of years.							
						SIGNATURE:	

b) MEMBER (attach ID copy)

- By signing this form, I hereby confirm to have agreed with the details filled therein by the applicant.
- I agree to be fully aware of this application and accept to be liable to any misconduct by the applicant.
- I confirm that the applicant, the non member guarantor and the member-referee are well known to me to be of good conduct and sound mind.
- I understand that the Credit Committee has the right to recover from my savings the amount outstanding inclusive of a penalty of 10% of the balance or Ksh.200 whichever is more should the applicant default from his/her repayment.

NAME	MNo.	AMOUNT	TEL. No.	Gender	SIGNATURE



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TERMS&CONDITIONS

I. REQUIREMENTS

a. The applicant shall fill in this form fully in his/her own handwriting and submit a clear copy of his/her national ID, passport photo, KRA pin copy and photos of the business among other requirements requested by the Credit Committee.

II. INTEREST RATES

b. The interest rates shall be determined by the credit committee and approved by the board from time to time depending on certain considerations. The minimum rate will be between 10% and 12% per month depending on the amount and period for upto three months.

III. QUALIFICATION

c. A person will qualify for sokoplus loan if he/she owns a kiosk and has been operating for more than six months. The maximum amount shall be Ksh. 5000 on first time borrowing and upto Ksh. 15000 on subsequent borrowing. To qualify for more, one will have to register as a member.

IV. REPAYMENT

d. The loan shall be repaid in full on or before the due date. The applicant is required to pay the loan in monthly instalments for loans of a period of more than one month as stipulated by the credit committee policy.

e. Failure to pay the loan in full amounts within the specified period will attract a penalty fee of 2% per month on the amount outstanding or a deduction from the guarantors.

V. GUARANTORS

f. The total amount guaranteed by the guarantors should add up to the amount to be repaid by the loan applicant or he/she adds an item as security for the amount borrowed.

g. In the event that the applicant fails to clear the withstanding loan, the credit committee is allowed to contact the guarantors.

h. In the event that the applicant fails to clear the outstanding balance within the specified period, the guarantors will be considered as debtors in the Sacco and the total outstanding amount will be deducted from their savings in addition to a penalty fee of Ksh. 200 or 10% of the total loan balance, whichever is more.

VI. APPROVAL AND DISBURSEMENT

i. The full procedure of approval and disbursement will be carried out independently by the Credit Committee. The committee will hold a meeting and discuss the application. Upon approval, the committee disburses the amount to the applicant's listed means. The approval process will take not more than three to seven days.

VII. LOAN REJECTION

The Credit Committee has the right to reject any application with or without giving reasons. Some of the factors leading to rejection of applications are; wrongly filled application, failure to submit documents requested, invalid documents, guarantor(s) disqualification, poor credit rating among others.

DECLARATION

- a. I declare that all information given is true and correct.
- b. I understand that the credit committee has the rights to decline my application without giving reasons.
- c. I understand that the Credit committee is licensed to recover any loan amounts defaulted from my savings and my guarantors' savings with a fine of 10% the amount outstanding or Ksh. 200 whichever is more.
- d. I understand that the Sacco has mandate to recover any security item from my possession should I default from servicing my loan.
- e. By appending my signature on this form, I hereby confirm and agree with the above terms and conditions and accept to be bound by them and other regulations stipulated by the Credit committee policy.

NAME:

SIGNATURE:

FOR OFFICIAL USE ONLY

AMOUNT: INTEREST%: INTEREST: LPF:

DISCOUNTS ALLOWED: PERIOD:

TOTAL AMOUNT PAYABLE:

TERMS OF PAYMENT:

CrO In-Charge:

We the Credit Committee accept to have carried out a proper KYC by reviewing the details filled in this form and all documents. We hereby approve this application by appending our signatures below:

(To be reviewed and approved in accordance to the Credit Committee policy guidelines on Loan Appraisal)

	NAME	MNo.	SIGNATURE
CHAIRPERSON			
SECRETARY			
MEMBER			
MEMBER			

CREDIT
COMMITTEE
STAMP



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