Safaricom Sacco
LIMITED

SHORT TERM LOAN APPLICATION FORM

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LOAN NO.....

INSTRUCTIONS

Please complete in full in BLOCK Letters. Short Term Loan application Means any loan whose repayment is 12 Months and Below. All loans are paid through FOSA within an (1) Hour of Application upon completion of dully filled form with ALL documentation attached- EXCEPT Smart Home Loan LPO ready within 48Hrs.

Formal Employment Requirements	Business Requirements
Dully Filled Loan Form	Dully Filled Loan Form
Latest Certified payslip	**(6)** Six Months Bank Statement (Certified)
Copy of ID	Copy of ID
	Standing Order Instructions to the Bank **(DDA Form)**

PERSONAL PARTICULARS (As per ID or Passport)

FIRST **MIDDLE** **SURNAME**

GENDER

M	F

ID/PASSPORT NUMBER

DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y

PHYSICAL ADDRESS

EMAIL ADDRESS

TELEPHONE (PREFERABLY MOBILE NUMBER)

EMPLOYER & PARTICULARS OF OCCUPATION

COMPANY NAME

STAFF NUMBER

OCCUPATION

IF BUSINESS, FILL IN PHYSICAL LOCATION PRESENT WORK STATION & POSTAL ADDRESS

LOAN PARTICULARS/LOAN TYPE AS ADVISED BY LOAN OFFICER (TICK APPROPRIATELY)

NO	LOAN TYPE	TICK TYPE OF LOAN	REPAYMENT PERIOD	AMOUNT	INTEREST	TICK IF APPROPRIATELY REFINANCING
1.	EMERGENCY				1.25 % P.M	
2.	SMART HOME LOAN				1% P.M	
3.	EDUCATION LOAN				1% P.M	
4.	FOSA SILVER ADVANCE				5% P.M	
5	HOLIDAY LOAN				1.5% P.M	
6.	OTHER *(Specify)*					

GUARANTORS – IF REQUIRED

NO.	GUARANTORS NAME	MNO / STAFF NO.	ID/PP N0.	AMOUNT IN FIGURES	AMOUNT IN WORDS	SIGNATURE	FOR OFFICIAL USE
1.							
2.							
3.							
4.							
5.							

I agree to abide by all terms and conditions governing this product/s and any other future amendments

APPLICANTS NAME ……..……SIGNATURE ……DATE……

APPROVAL CREDIT MANAGER

We herewith confirm and accept the approval above and hereby authorize the accountant to disburse the funds as per the appropriate mode of payment for the above amount

SIGNED ……And…… And……

CREDIT MANAGER CEO/MANAGER ACCOUNTANT /FINANCE MANAGER

DATE……DATE……DATE……..