



Safaricom Sacco
L I M I T E D

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APPLICATION FOR QUICK FIX DEPOSIT LOAN

I
(FULL NAME IN BLOCK LETTERS)

Hereby apply for an Advance of Kshs (Amount in figures)
..... (Amount in words)

To be paid in 1 monthly installments Plus interest of 5 %

PERSONAL PARTICULARS

1. Staff Number Membership Number ID No
2. Date of birth Department
3. Present work station and postal address
4. Office Telephone No Mobile Telephone No
5. Email

FOR SOCIETY USE ONLY

CREDIT MANAGER

This application has been recommended for Kshs Repayable in
..... installments: If rejected or amount requested reduced, reasons are: -

Comment

Signed Date

APPROVED BY GENERAL MANAGER

This application has been approved for the amount of Kshs:

Comment:

Signed Date

TERMS AND CONDITIONS FOR QUICK FIX DEPOSIT LOAN

1. Applicants must be holders of FOSA salary account or Savings account and earn their salary through this account
2. Attach a copy of the most recent pay slip duly certified by HR personnel
3. Maximum amount shall be half your net salary
4. The advance is repayable in one(1) month

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

.....
SIGNATURE OF APPLICANT

.....
DATE: