

DEFENCE SAVINGS & CREDIT COOPERATIVE SOCIETY

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REVISED

LOAN APPLICATION FORM

Customer Care Stamp

INSTRUCTIONS

1. Loan application form to be printed back to back.
2. Complete the form in block letters.
3. Attach the required documents (Copies of current pay slips, service ID and copies of the guarantors' service ID.
4. Once the form is duly filled and signed, send to CAD/SAD offices for further action.

1. APPLICANTS' PERSONAL INFORMATION

FULL NAME: _____ M/NO: _____ SVC/NO: _____
NATIONAL ID NO: _____ FORMATION/UNIT: _____ MOBILE NO: _____
EMAIL: _____

2. LOAN DETAILS (PLEASE TICK AS APPROPRIATE)

NEW LOAN TOP-UP LOAN

LOAN TYPES

Karibu Loan (12 months) Emergency Loan (12 months) Sharia Emergency (12 months)
 Elimu Loan (12 months) Fosa Unsecured (36 months) Sharia Loan (36 months)
 Personal Loan (36 months) Development Loan (48 months) Premier Loan (72 months)

Current Deposits in Figures: _____ Deposit Purchase Amount In Figures: _____

Loan Amount Applied For In Figures: _____

Loan Amount Applied For In Words: _____

PURPOSE OF THE LOAN: Manufacturing and Servicing Industries Consumption and Social Services
 Education Agriculture Land & Housing Asset Financing Human Health
Others (Specify): _____

3. REPAYMENT DETAILS

Mode of Loan Repayment: Check off Standing order

NB: Salary must be channeled through Desacco FOSA for standing order

Repayment Period (Years): _____ Months: _____

4. PAYMENT MODE (PLEASE TICK AS APPROPRIATE)

- (i) To DESACCO Fosa current account
(ii) IFT/EFT: Same day from co-op to co-op and two working days to other banks (charges 72/=)
(iii) RTGS: Same day from co-op to other banks (charges 600/=)

NB: If you choose (ii) or (iii) indicate bank details below

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

5. DECLARATION

I hereby authorize Defence Sacco Limited to confirm my credit information in other financial institutions and also any registered Credit Reference bureau (CRB) before processing this loan and also during repayment. I therefore, consent to my name, transaction and default details to be forwarded to CRB for listing in the event my account goes into default. I acknowledge that this information may be used by banking institutions and other guarantors in assessing application for credit by me, associated companies, and supplementary account holders and for occasional debt tracing and fraud prevention purposes. I also authorize Defence Sacco Ltd to use any registered debt collector to recover any outstanding liability owed. I hereby declare that the foregoing particulars are true to the best of my knowledge and belief. I agree to abide by the laws of the Society, the loan policy provision and any other variation by the Board of the Society in totality. I will inform the Society whenever I am transferred from my current work station. I willingly grant consent to DESACCO to verify, use, share and/or disclose the information given in accordance with the Society's By-laws and the Laws of Kenya. I authorize the necessary deductions, including interest on the loan, to be made from my salary or account as repayment for this loan.

NAME: _____ SVC NO: _____ SIGNATURE: _____ DATE: ___/___/___

6. REPAYMENT GUARANTEE

(GUARANTORS ARE REQUIRED TO CAREFULLY READ THROUGH THIS LOAN APPLICATION FORM AND UNDERSTAND THE LIABILITY BEFORE SIGNING)

We, the undersigned, hereby accept jointly and severally, the liability for repayment of this loan of kshs _____ in the event of the borrower's default. We understand the amount in default may be recovered from our salaries, offset against our deposits within DESACCO

NAME	Service No	MOBILE NO	Guaranteed Amount (in Figures)	SIGNATURE

7. EMPLOYER'S (UNIT) RECOMMENDATION

I hereby confirm that the attached are true copies of the applicant's:

- i. National/Military ID card
- ii. Payslips (Current)
- iii. Guarantors National /Military ID card

Name: _____ Rank: _____ Designation: _____

Signature and Official Stamp: _____ Date: _____

8. CAD/SAD

Name: _____ Rank: _____ Designation: _____

Signature and Official Stamp: _____ Date: _____

FOR OFFICIAL USE ONLY

9. LOAN PROCESSING

Verified By: Rank _____ Name: _____ Date: ___/___/20___ Signature: _____

Captured By: Rank _____ Name: _____ Date: ___/___/20___ Signature: _____

Approved By: Rank _____ Name: _____ Date: ___/___/20___ Signature: _____

Disbursed By: Rank _____ Name: _____ Date: ___/___/20___ Signature: : _____

Audited By: Rank _____ Name: _____ Date: ___/___/20___ Signature: _____