

Received by	
Date	

Branch _____

Loan No _____



VIKTAS SACCO SOCIETY LTD

P.O BOX 2183, NYAHURURU CELL 0729885713

Email: info@viktassacco.co.ke

LOAN APPLICATION FORM

APPLICANTS DETAILS

Full names Mr/Mrs/Miss/Dr/Prof/Eng _____

ID/Passport No.(attach copy) _____ MBR NO. _____

Contact _____ Mailing Address P.o Box _____

Marital status _____ (single, married, widow, widower) Occupation _____ Age _____

Spouse contact _____ MBR NO. _____

Physical Address _____ Location _____ Village _____

LOAN APPLIED

- Normal loan Emergency School fees Top up Burudika
 Maziwa Staff Okoa Business Pata jiko
 Smart loan Stock Boost Fosa loan Institutional Weekend loan

LOAN REQUEST AND AGREEMENT

I/ We _____ hereby apply to the Sacco for a loan of Ksh _____ (Amount in words) _____ to be

Repaid over a period of _____ months

Purpose of the loan _____

Failure to pay the month loan instalments shall incur 3% penalties.

Any boosting of shares above ksh 2000 will remain in the SACCO for at least four months to qualify for any loan. Incase I fail to service the loan any part thereof as agreed between me and the SACCO I authorize the SACCO to auction the below mentioned items to recover any monies owed by me.

TOTAL VALUE.....

ITEMS	DESCRIPTION	SERIAL NO	AMOUNT	ESTIMATED VALUE
1.
2.
3.
4.
5.

I further swear that the above surrendered items belong to me and no any other person even spouse may claim over the items I have provided as security.

Signature.....DATE.....

GUARANTORS INFORMATION

(To be completed by at least three guarantors)

Amounting of Loan Guaranteed ksh.....

(in words).....

In consideration of the SACCO granting the whole of the above loan or lesser amount, we the undersigned hereby accepted jointly and severally, liability for its repayments in the event of the borrower default. We understand that the amount default may be recovered by any offset against our shares in the SACCO or by attachment of our property and that we shall not be eligible for loans unless the amount in default has been cleared in full.

M/NO.	NATIONAL ID	GUARANTOR'S NAME	PLEGDED	PHONE NO.	SIGNATURE

GUARANTORS CONFIRMED BY:

NAME _____ DESIGNATION _____ SIGNATURE _____

CRB CONSENT

I confirm that I have authorized **VIKTAS SACCO SOCIETY LIMITED** to access my credit profile and this profile to be delivered to their email-/postal address indicated herein and hereby authorize Metropol CRB ltd to mail/delivery/send my credit report to the email/postal address indicated herein. I release CRB and VIKTAS SACCO SOCIETY LTD and its officers, employees and agents from all claims, action or proceeding of whatsoever nature and howsoever arising, suffered or incurred in connection with metropol CRB sending/delivering/mailling my credit report to the addresses that I have provided.

Name _____ ID NO. _____ SIGNATURE _____

Customer Declaration		
a.	I certify that the information contained in this application is true and correct to the best of my knowledge and belief	
b.	I accept and agree to abide with VIKTAS SACCO LTD loan policy and hereby indemnify the Sacco at my cost against any loss incurred from claims arising from any un-satisfactory performance on my part when serving the loan.	
NAME	SIGNATURE	DATE

CHECK LIST

OFFICIAL USE ONLY

		YES	NO	N/A
1	Has the ID card copy been attached?			
2	Have the collateral detailed been filled?			
3	Have the personal details on the loan form been verified			
4	Has the loan form been signed by the member?			
5	Has the guarantors section been fully filled?			
6	Has the affidavit section been fully filled?			
7	Has the loan form been registered?			
8	Has the business details been filled?			
9	Has the financial details been filled?			
10	Has the guarantors signatures been confirmed?			

CONFIRMED BY:

NAME _____ SIGNATURE _____ DESIGNATION _____

OFFICIAL USE ONLY

Client repayment history.....

SHARES/DEPOSITS	LOANS OUTSTANDING
Shares Capital.....	Normal loan.....
Deposit held.....	School fees.....
Business savings.....	Emergency.....
Fosa Shares.....	Business Loan.....
	Others.....
	Total loans.....

The guarantor cover the loan amount Yes No

CREDIT OFFICER ELIGIBILITY CALCULATION

Amount applied/Requested.....
Maximum qualified amount.....
Amount approved.....
Repayment period.....
Monthly instalments.....

Additional notes of the appraiser.....

Name..... Designation.....

Sign..... Date.....

MANAGEMENT COMMITTEE

Chairman..... Secretary..... Treasurer.....

Approved by CREDIT Committee:

Amount applied _____ *in words* _____

Amount approved/Rejected _____ *in words* _____

Chairman..... Signature..... Date.....

Secretary..... signature..... Date.....

Member..... signature..... Date.....

Manager..... signature..... Date.....

Remarks.....

Remarks/Verification notes by the Internal Auditor.....

Name.....

Sign.....Date.....

DISBURSEMENT

I/We acknowledge receipt of ksh..... being loan advanced to me by **VIKTAS SACCO SOCIETY LTD**, Payable in..... Monthly instalment of ksh.....

Starting from.....20.....to.....20.....

Advised by.....

MBR NO..... ID NO.....SIGNATURE..... DATE.....

COURT AFFIDAVIT

I/We.....swear and state before this court commissioner of oaths.

(Name in full capitals)

As follows:-

That (i) I am a/ We are member(s) of Viktas Sacco Ltd Member No.....

(ii) I am/ We are swearing this affidavit for the purpose of acquiring a loan from Viktas Sacco Ltd

(iii) The loan so applied will be used for the intended purpose and will make all the effort to repay the said loan.

(iv) I/We have read and understood (I have been read to me in a language I can understand) the contents of PART of this application and its consequential effects in case of failure to repay the said loan.

(v) I have stated, and all the particulars on my loan application are true to the best of my Knowledge and belief.

DATED this.....day of.....20.....

Signed by the loan applicant

ADVOCATE & COMMISSIONER OF OATHS

Signature.....

/Res. Magistrate.....