

P.O. Box 83, Kerugoya Branch: 0724 256 461

Mwea Branch: 0722 781092 Kitengela Branch: 0711 356753 Kiserian Branch: 0740 485382

Kimana Branch: 0707 555 886 / 0748 031 196

Kianyaga Branch: 0758 576 624 Narok Branch: 0707 031 630 Thika Branch: 0790 271 036

Email: info@ollin.coke Website: www.ollin.co.ke

**Customer Care lines:** 

Kerugoya Branch:- 0707-555-802, 0707-555-863 | Mwea Branch:- 0707-555-863 | Kitengela Branch:- 0707-555-886, 0707-555-892 Kiserian Branch:- 0740 485 382 | Kimana Satellite Office:- 0707 555 886 Kianyaga Satellite Office:- 0758 576 624 | Narok 0707 031 630 | Thika 0790 271 036

# OKOA LOAN APPLICATION FORM

#### PART 1

A) PERSUNAL DETAILS:			
1 Member's Name			

- 1. Member's Name:....
- 2. ID/Passport No.....

## B) LOAN APPLICATION:

I /We (Name) ...... hereby apply for a loan of

Amount in figures Ksh.

Recoverable in.....months.

#### C) LOAN CONDITIONS:

- I) Applicant's salary/pension must be channeled through the Sacco
- ii) The maximum amount qualified will be determined by 75% of 1/3 months average salary net of advance and Fanikisha loan deductions.
- iii) Repayment period of one (1) month.
- iv) Appraisal fee applicable will be charged
- v) Guarantors: For a member
- No guarantor required
- For Non- member
- One salaried member guarantor required

#### D) WHAT TO ATTACH:

- i) ID Photocopy
- ii) 1 Most recent Pay slip

### E) APPLICANT'S DECLARATION:

- a) I hereby declare that:-
- i) The foregoing particulars are true to the best of my knowledge and belief and agree to abide by the laws of the society, the loan policy and any variations thereon.
- ii) I hereby authorize the necessary deductions including the applicable interest to be made on monthly basis from my salary as repayment of this loan.

- iii) I hereby request and irrevocably authorize my employer to deduct on monthly basis from my salary the principle interest and costs as shall be advised by the Sacco and remit the same to the Sacco for such period as the Sacco shall advise from time to time.
- iv) I hereby agree that I will personally remain liable to pay any installments of the loan and the entire loan not withstanding any delay or failure by my employer to deduct and /or remit the payments of the Sacco or any insufficiency therefore.
- v) As long as any such loans shall be outstanding, I hereby assign all dues to the Sacco as additional security for the payment of the loan, and any balance upon such payment to be credited to my account with the Sacco and I hereby request and authorize my said employer to pay out the said dues to the Sacco upon whenever they become due and payable unless otherwise advised by the Sacco

b) Loan Disclosu	ıre
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I hereby authorize the sacco to disclose and /or obtain any information relating to my credit status to and /or
from any Credit Reference Bureau or any other institution or third party as it deems necessary
Signature of the applicant

#### F) GUARANTORS' DECLARATION

I/We the undersigned agree to be jointly and severally liable for the repayment of the total amount due to Ollin Sacco Ltd by the borrower if and when he/she fails to repay the same within the time indicated above for the repayment of the loan and at any particular time there is default or payment due or when the entire loan becomes due and repayable and the same is not promptly honored to be offset against our deposits. We also confirm that the content of this loan agreement has been explained to us in a clear, simple and understandable language and that we have understood it's full meaning, purpose and agreed to the same.

#### **GUARANTORS:**

TSC P/No. Ac No.	Guarantor's Name	ID No.	Mobile No.	Place of Work	Signature	Address
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	4 x x ), ((4 x x ), ((4	(*))((*)	(*))((* * *	)) ((****)) ((*	(**)/(2	* * ) ((* *)

Scanned by	Signature	Date
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#### PART 2

#### FOR OFFICIAL USE ONLY

#### Loan Appraisal

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a) Net salary (Kshs)	.Loan Balance (Kshs)	
Amount of Loan applied (Kshs)	.Amount qualified	,,
b) Appraisal by : Loan Officer	Signature	.Date
c) Sanctioned by: Credit Manager	.Signature	.Date
d) Verified by: Internal Auditor	Signature	.Date
e) Disbursed by	Signature	Date

**NB: ANY ALTERATIONS OR CANCELLATIONS WILL NOT BE ACCEPTED**