LAIKA SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LTD. (LOAN APPLICATION AND LOAN AGREEMENT FORM) LAICARE LOAN FORM MAXIMUM LOAN AMOUNT IS KSHS.40,000.00

PLEASE ATTACH A COPY OF YOUR IDENTITY CARD

A: PERSONAL & EMPLOY	YMENT INFORMATION	ON:			
1. Membership No	2. Work No	3.Payroll Group			
4. Name	5. ID No	Mob. No			
6. Position in Society: Comr	nittee:-Member: - Other	rs:-Specify			
7.EmployersName	Address				
9. Terms of employment: (T	ick the appropriate box	()			
Permanent/Seasonal					
B: LOAN APPLICATION	AND REPAYMENT:				
I	(Full names <i>a</i>	s they appear on ID card)			
Hereby apply for a loan of l					
For a period of					
Per month. Commencing fr			.1		
Interest of 2.5% fixed rate co	ommencing from		month.		
C: LOAN PURPOSE:					
1:					
2:					
D: SECURITY WHICH I O					
1:2:	<u></u>	3:			
E: AUTHORITY FOR DE	DUCTIONS FROM SAL	ARY:			
I hereby authorize	my salary to be	deducted with the	e loan's		
monthly installment					
with the terms of t	the loan. Additi	onally I undertake	e that these		
instructions shall remain in force until the loan is repaid in					
full. I also authorize my employer to attach my future dues and					
benefits and remit to the Sacco if I cease to be an employee					
of the above named employer towards the loan repayment if					
the loan has not be	en repaid in fu	11.			
Loanee Signature: _		Date			
					
Witnessed by: Name:	ID:	Signature:			

F: REPAYMENT GUARANTEE:

We the undersigned hereby accept to be jointly and severally liability for the repayment of this loan, interest and charges thereof in the event of borrowers default. We understand that the amounts in default may be recovered by an offset against our Deposits in the Society or by attachment of our property or salary, and that we shall not be eligible for loan unless the amount in default has been cleared in full.

<u> </u>	OT:	T A T	A 76.	DC.
(1:	(ıL	ΙAΚ	AN	RS:

Payroll	Employer	Name	Deposits	Loan	I D No.	Signature
Payroll No/M/No			Deposits Kshs	Kshs		<u> </u>

Deposits	_x3	_Minus loan	Minus
Guarantees	Loan applied	= Kshs	

(RESULT MUST BE MORE THAN ZERO)

Consent Clause:-

- 1. a). I/We warrant that the information given in this application form is true and complete and authorize you to make any enquires necessary in connection with this application.
 - b). I hereby confirm that I have authorized Laika Sacco Society to share my credit information/access my credit profile and those of the Directors/Guarantors for credit appraisal with licensed Credit Reference Bureaus (CRBs).
 - c). I further release CRB and Laika Sacco and its officers, employees and agents from all claims, actions or proceedings of whatsoever nature and howsoever arising, suffered or incurred in connection with this sharing and access for the purpose afore stated.
 - d). I/We confirm that we have read and understood the standard trading terms and conditions (as amended time to time) and agree to bound by them. I/We agree that am/are jointly/severally reliable for amount outstanding at any time in the account.

FULL NAME	ID/NO.
SIGNED.	DATE.

H: FOR OFFICIAL USE ONLY:

Total Deposits Ksl	shs: Total loan Outstanding Kshs					
Amount currently requested Kshs: New Total loans Kshs						
Deposits Kshs.	X 3	= Kshs_				
Members present net monthly income Kshs: x 0.66 = Kshs						
Total monthly pay	ment to society includ	ling above lc	oan Kshs			
(Amount must no	t exceed 66% rule)					
Does the guarantors' cover the loan amount? Yes/No						
	oplication is/is not wit					
(If not specify:						
Official name:	Signatui	·e:	Date:	- 		
	ITTEE: shsR _Monthly and Interest					
Credit Committee	Minutes No:	Dated				
Chairman:	Secretary		Member			
J: OTHERS: Cheque No	for Kshs		Date:			
Received by (Name):	Sign	nature:	Date:_			