

# RAA ELITES SACCO SOCIETY LTD.

To promote the economic & social status of our customers in Kenya.

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## **LOAN APPLICATION AND AGREEMENT FORM**

NOTE: THIS APPLICATION FORM SHOULD BE SUBMITTED TOGETHER WITH THE MOST RECENT CERTIFIED COPIES OF MEMBERS SHARES REGISTER, COLOR PASSPORT AND NATIONAL ID.

## A. APPLICANT'S DETAILS

1.	NAME	M/NO
2.	ADDRESS POSTAL CODE	TOWN/CITY
3.	POSITION IN SACCO	Specify if Member, Delegate, Official, Employee
4.	DATE OF BIRTH TEL (Mobile	e) <b>ID NO</b>
5.	AMOUNT APPLIED KSHS	IN WORDS
	REPAYMENT PERIOD (NO. OF a (Development, Top up, Emergency, School	MONTHS). <b>LOAN TYPE</b>
/.	MUST STATE PURPOSE OF THE LOAN E	BELOW (TICK OR ADD)
	<ol> <li>Buy/ Develop Plot or Piece of Land.</li> </ol>	<ol><li>Construction/ Renovation of /House Building.</li></ol>
	<ol><li>Buy Motor Vehicle, Machinery and Equipment.</li></ol>	<ol><li>School/College/University fees and Education expenses.</li></ol>
	<ol><li>Settle Medical Expenses.</li></ol>	8. Burial and benevolent
	4. Start Business/Buy Shares /	expenses.
	Stock Etc.	<ol><li>For Farming Activities.</li></ol>
	5. Buy Household Items.	10. Others

### B. **BORROWING / CREDIT HISTORY**

DATE BORROWED	AMOUNT BORROWED	CLEARANCE DATE	LENDER (Name of - Sacco, Bank, Other)	OUTSTANDING BALANCE

I. Self- Guarantee (Security Pledge)

No	ITEM/ NAME DESCRIPTION	MAKE	SERIAL NUMBER	APPROX. SALE VALUE	SIGNATURE
1					
2					

#### II. External Contact Person (Non-Sacco Member or Sacco Member)

No	NAME	ID NO	PHONE NUMBER	RELATIONSHIP	SIGNATURE
1					
2					

#### C. CONTACT PERSON DETAILS

I hereby declare that the foregoing particulars are true to the best of my knowledge and belief and agree to abide by the Bylaws of the Sacco, Credit policy and any variations by the Board of Directors in respect of items 7 and 8 above. I hereby commit to service the loan according to the terms. I understand that the Sacco is enrolled with the Credit Reference Bureau (CRB) and therefore my credit information in the Sacco is subject to CRB regulations, 2013 either positive or negative. A default or underpayment in loan will result in a negative report being filed at the CRB.

ID No	Signature	Date
10 110		Date

## D. **GUARANTEE** (To be completed by the Applicant and at least Two other Guarantors)

In consideration of the Sacco granting the whole of the above loan or any lesser amount that may be approved, we the undersigned hereby accept liability jointly and severally, liability for its repayment in the event of the borrower's default. We understand that the amount in default may be offset against our deposits in the Sacco or by attachment of our properties or salaries, and that we shall not be eligible for loans unless the amount in default has been cleared in full.

#### E. GUARANTORS

I. Internal guarantors (MUST be Members of the Sacco)

No	M/NUMBER	FULL NAMES	SHARES OR DEPOSITS	MOBILE NO	SIGNATURE
1					
2					
3					
4					
5					

# II. External guarantors (Non-Sacco Members- MUST Pledge Tangible Collateral/Security)

## **COLLATERAL DETAILS**

No	Item/ Name Description	Make	Serial Number	Aprox.Sale Value	Comment
1					
2					

NAME ID NO	SIGN
P.O. BOX POSTAL CODE	TOWN/CITY
PHONE No:	
F. LOAN APPRAISAL - (BY LOANS/O	CREDIT MANAGER)
This application is recommended / NOT refollowing:	
<ol> <li>1) 1/3 Rule (30% NET TAKE HOME)</li> <li>2) Deposit Multiplier/ share capital</li> <li>3) Incomplete details</li> </ol>	
Declaration by	•••••••••••••••••••••••••••••••••••••••
Signature Date	//

## G. RECOMMENDATION FOR APPROVAL/REJECTION

Signature		
Credit Manager		
reducing balance	e or at constant rate	
repayable in	months, at the interest rate of % per month	on
This application	may be granted/rejected for the amount of KES	••••

# G. <u>APPROVAL - BY CREDIT COMMITTEE</u>

I.	Loan approved, KES months,
	at an interest rate of% per month, repayable either on a reducing
	balance or at constant rate
II.	This reschedule is deferred/rejected for the following reasons
CEO	Date/
Credit	Chairman Date Date
Chairm	nan Date/
Н.	DISBURSEMENT/LOAN RECOVERY
Loan	disbursed on/ confirmed by
	by certify that the reschedule has been effected for recovery at the amount of
KES	with effect from the month of
Feedir	ng Confirmed By (Cashier)
Signat	ture
g	
Recov	ery Confirmed By Accountant
Signat	ture
Oigilai	
Witnes	ssed by
Nama	
1401116	•••••••••••••••••••••••••••••••••••••••
Signat	ture Date/
(ADVC	DCATE)