



KENTOURS SACCO SOCIETY LTD

P.O. Box 79333 - 00200 Nairobi, Kenya
Telephone: 0709 309 000, Cell: 0722-968596, 0733667596
Commodore Office Suites, 1st Floor, Kindaruma Road, Kilimani, Nairobi.
Email: info@kentours.co.ke website: www.kentours.co.ke

HOME APPLIANCE LOAN APPLICATION AND AGREEMENT

A. TO BE COMPLETED BY THE APPLICANT

I, Mr./Mrs./Miss I.D/Passport No. (Attach Copy)

Hereby apply for a loan of Kshs Amount in words

to be repaid in.....Months (Maximum 36 Months)

I have identified the item (s) at.....shop.

Items(s) Purchased	Cost Kshs.
1.
2.
3.
Administration fee	200.00
TOTAL AMOUNT	_____

I authorize my employer to recover the loan granted to me from my monthly salary in installments which may be determined by the management committee plus interest at the rate of 1% on the reducing balance. I hereby attach my most current stamped pay slip and a copy of my National Identity Card. For individual member (not in employment), please provide 3 months certified bank statements (management may request for additional information).

Signature (Applicant)..... Date.....

N/B: FORGERY IS A CRIMINAL OFFENCE

B. PERSONAL INFORMATION

Age..... Employer Unit..... M/No.....
Payroll No..... I.D/Passport No..... Present Designation
Position in society Member/Committee Member/Employer
Home Address..... Home/Office Tel No

C. MEMBERS BANK ACCOUNT DETAILS

Account Name:

Account Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Bank Name:Branch

D. ALTERNATIVE CONTACT (should not be a spouse or guarantor(s))

Name: _____ Telephone No: _____

Email: _____ Relationship: _____

E. TO BE COMPLETED BY ACCOUNTS DEPARTMENT (applicant not authorized to sign)

Gross Salary _____ Outstanding Company Loans _____ Net Salary _____

Name _____ Designation _____ Signature _____

Date _____ Official Stamp _____

F. TO BE COMPLETED BY PERSONNEL DEPARTMENT

I, certify that the company has no objection to this loan application and further agrees to effect the requirements of the loan agreement in favour of KENTOURS SACCO SOCIETY LTD

If there is any objection please specify.....

Name _____ Designation _____ Signature _____

Date _____ Official Stamp _____

G. SECURITY OFFERED (Tick where appropriate)

Authority to Deduct My Salary, Hold My Deposit and Terminal Dues and Dispose My Securities

I hereby authorize the Society to deduct my salary to pay the amount of loan granted to me on Monthly basis under the terms which the loan is given until it is cleared in full. Should I leave employment before completion of repayment, or default to pay, I hereby authorize the balance to be deducted from my deposits in the society, my terminal benefits and attaching any other properties that I have given towards the loan, demand savings and guarantors.

Also, should I leave the current employment, I authorize recovery of any outstanding loan from future employment.

H. LOANEE DECLARATION

In connection with the application and/or maintaining a credit facility with Kentours Sacco, I authorize the Sacco to carry out credit checks with or obtain my credit information from, a credit reference bureau. In the event of account going into default, I consent to my name, transaction and default details being forwarded to a credit reference bureau for listing. I acknowledge that this information may be used by banking institutions and other credit grantors in assessing application for credit by name, associated companies, and supplementary account holders and for occasional debt tracing, fraud prevention purposes and for any other lawful purposes.

Loanee's Signature ID No. Date.....

I. GUARANTORS

Repayment Guarantee

- i. We, the undersigned guarantors hereby accept jointly and severally liability for the repayment of the loan in the event of the loanee's default. We understand the amount may be recovered by an offset against our deposits in the society or by attachment of our salaries or properties and that we shall be liable for the defaulted loans to the tune of the amount guaranteed.

- ii. Guarantors are **strongly advised** to read all the information provided in this form and terms and conditions contained herein, so as to understand the full implications of signing this part.

	GUARANTOR NAME (Must be a Member)	EMPLOYER	ID NO.	PHONE NO.	M/NO.	STATE AMOUNT GUARANTEED		DATE	SIGNATURE
						Figures	Words		
1									
2									
3									
4									
5									
6									
7									
8									
9									

Loanee's Signature _____ ID/Passport No. _____ Loan Amount (Kshs) _____ Date _____

Guarantors Verification (Kentours Office): Name _____ Signature _____ Date _____