KENCREAM SAVINGS & CREDIT CO-OPER ATIVE SOCIETY LIMITED

Creamery House Dakar Road Industrial Area P.O Box 30131- 00100 NAIROBI



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Email: info@kencreamsacco.co.ke
Or kencreamsacco@newkcc.co.ke

LOAN APPLICATION FORM

INSTRUCTIONS TO APPLICANTS

- 1. Complete this loan application form (PARTA-G) in CAPITAL LETTERS. Any alteration MUST be countersigned.
- 2. Members must have been regular contributors for a minimum period of six months.
- 3. Guarantors must be members of Kencream SACCO who have un guaranteed deposits to avail. The total guarantor's shares together with that of the applicant's must be equal or more than the loan applied for. All loans must be adequately secured.
- 4. The guarantors must be ready to assist the society to ensure that the borrower repays all the money given to him/her within the specific period and a reliable for monies outstanding in the event of failure by a member to repay loans advanced. The SACCO will however turn to this as a last resort after all efforts to recover the money including and not limited to legal steps have been exhausted.
- 5. The total development loan granted shall not exceed three times of the applicant's deposits and is payable within a stipulated period.
- 6. Emergency and School fees loans will only be granted within a maximum repayment period of 12 months.
- 7. Attach TWO recent pay slips and copy of ID/Passport for purpose of appraising this application.
- 8. No Member will be allowed to withdraw from the society unless the Member's loan is repaid in full or the loan balance can be fully offset by the Member's deposits after 60 days' notice.
- 9. Any member who desires to offset the loan balance against the deposits in clause (8) above is in breach of this loan contract and will be subjected to 10% offset fee based on the outstanding balance provided no other liability is attached to the deposits.

A: PERSONAL DETAILS

	FULL NAME (as per the I.D)								
	SACCO MEMBERSHIP NO:		_ID/PASSPORT NO:						
	PLACE OF PRACTICE/ EMPLOYER		STATION						
			PAYROLL No:						
	Temporary/Contract/Permanent/Others – if contract attach contract letter								
В	B: FULL MAILING ADDRESS & CONTACT DETAILS								
	P.O BOXCC	DDE	TOWN/CITY						
	Home address TELEPHONE NO:								
	EMAIL ADDRESS:								
C	C: APPLICATIONDETAILS								
	AMOUNT OF LOAN APPLIED FOR:								
	AMOUNT (KSHS)	IN WORDS							
			(Development,Upesi, Emergency, School fees etc)						
	LOAN CATEGORY		(New/ Top-up)						
	REPAYMENT PERIOD_	MONTHS							

Kencream SACCO Member's Loan application form

Save regularly, Borrow wisely& Repay promptly

NAMI	1		_M/No:_	P(OSTION/		SIG	GN
	E OF BRANCH:					DATE	:	
GUARAN	NTEE							
(To be com	pleted by guarantors who are m	nember of KENC	REAM SAC	CCO. Please read	the following sta	tement careful	lly)	
d severally fset against	ion of the society granting the liability for repayment to our shares in KENCREAM fault has been cleared in ful	in the event of the SACCO or by	the borrov	wer default. W	e understand th	nat the amou	nt in default may	be recovered by
	Name	M/No.	P/No.	ID No	SIGNATURE	LOCATION	AMOUNT GUARANTEED (IN FIGURES)	AMOUNT GUARANTEE IN WORDS
<u> </u>		!						
		!						
		!						
		!						
		!						
		!						
		!						
		!						
The								
	nts of deposits available to be guarant t they guaranteed.	iteed are those that	are not yet co	ommitted to any ot	her TC)TAL		

That I give authority to my current and future employers that in case I leave that common bond due to resignations, termination or otherwise when the loan is still outstanding to make such deductions from my salary/ wages or benefits other than those safeguarded by the retirement benefits authority and submit on my behalf to Kencream SACCO Ltd to repay my balance

DATE:

d) I further declare that I have understood all instructions on this application form.

Save regulary, Borrow wisely & Repay Promptly

SIGNATURE OF APPLICANT:

	CIAL USE (Appraisal)		
тот	TAL MEMBERS DEPOSITS:	MAX LOAN (3 Times	s of deposits):
AM	OUNT APPLIED(Kshs)	TOTAL OUTSTAND	ING LOANS (Kshs)
NEV	W TOTAL LOAN WOULD BE (Outstanding +loan	applied) Kshs	
	T.,		REMARKS
1.	Member Present Basic Monthly Salary (Kshs.)		·
2.	Members 2/3 of Basic Salary (Kshs)		
3.	Total Montly Deductions (Kshs)		
	(must not exceed amount in item 2 above)		
AM	OUNT RECOMMENDED (Kshs)		OVER A PERIOD OF MONTHS
	tify that the above guarantor's details are correct and the	same are existsting me	embers of the society. The guarantors'
	e/ deposit fully cover the loan amount applied. raised By:	_Signature:	Date:
	oan my be granted/ rejected for the amount of Ksl		repayable inmont
lame:		ignature	repayable inmont
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K: DISBURSEMENT DETAILS

Issued with Cheque No: Date Prepared By Name: Designation: Sign:	OFFICIAL PAYMENT STAMP
Date:	

