



SOS SACCO



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P.O BOX 40653 - 00100



NAIROBI ,KENYA



SOSSACCO.2016@GMAIL.COM

Short-Term Loan Application Form

1. APPLICANT'S PERSONAL INFORMATION

Names (as appearing on ID):

Membership No.

Cell:

Payroll No:

Current Station:

Net monthly income Kshs

Designation

E-mail address:

Terms of Service:

Loan Type (Please Tick)	Salary Advance(1month)		Phone loan (12 months)		
	Instant Loan (3 Months)		Laptop Loan (12 months)		
	Emergency (12 months)		Household loan (12 months)		

Loan amount applied for (figures):

Loan amount applied for (words):

Mode of disbursement: BANK

MPESA

2. DECLARATION

I hereby authorize SOS Sacco Limited to confirm my credit information in any registered Credit Reference bureau before processing this loan and also during repayment. in the event of account going into default, I consent to my name, transaction and default details to be forwarded to credit reference bureau for listing .I acknowledge that this information may be used by banking institutions and other guarantors in assessing application for credit by me, associated companies, and supplementary account holders and for occasional debt tracing and fraud prevention purposes .Further I authorize SOS Sacco Ltd to use any registered Auctioneer and Debt Collector to recover any outstanding liability owed .

I hereby declare that the foregoing particulars are true to the best of my knowledge and belief. I agree to abide by the laws of the Society the loan policy provision and any other variation by the Board of the Society in totality. I will inform the Society whenever I am transferred from my current work station I authorize the necessary deductions, including interest on the loan, to be made from my salary as repayment for this loan.

Signature: _____ ID NO: _____ Date: ____ / ____ / ____

Witness : Name _____ Membership No. _____

Cell: _____ Signature _____ ID No _____ Date: ____ / ____ / ____

Signature and Official Stamp of employer _____ Date: _____

FOR OFFICIAL USE ONLY

3. CREDIT COMMITTEE APPROVAL

We have totally examined the above application and have approved the following:

Loan Type:

Loan Amount:

Number of Installments:

Monthly deductions (plus shares)

Minute number:

Meeting date:

Chairperson: _____ Member: _____ Member: _____ Date _____

PAYBILL 400222 ACCOUNT NUMBER 101730#YOURNAME

BANK DETAILS: SOS SACCO LTD A/C 01120000599400 COOP BANK BURUBURU