Saphumula Savings & Credit Cooperative Society Ltd.

P.O.Box A278. Swazi Plaza
Lot 362, Mission Street,
Mbabane
Tel: +268 2404 7447
+268 2404 8715
Fax: +268 2404 9358
E-mail: applications@saphumula.co.sz

LOAN APPLICATION FORM

LONG TERM ☐ SCHOOL ☐ EMERGENCY ☐

PART 1:- MEMBER'S DETAILS:

NAME: …… SURNAME: ……

RESIDENTIAL ADDRESS: ……

POSTAL ADRESS: ……

TEL :…….. CELL:…….. OTHER: ……..

ID NUMBER :…… EMPLOYMENT No:……..

MEMBERSHIP No: …… SECTION:……

PART II:- LOAN AND PURPOSE:

LOAN AMOUNT REQUESTED E……

AMOUNT IN WORDS: ……..

PURPOSE OF LOAN: ……..

REPAYMENT PERIOD IN MONTHS ……..

PART III:- BANKING DETAILS:

NAME OF BANK: …… ACCOUNT N0: ……..

PART IV:- LOAN REPAYMENT SYSTEM DECLARARTION:

I DECLARE AND AUTHORIZE MY EMPLOYER OR BANK TO DEDUCT A SUM OF E…… …… MONTHLY FROM MY SALARY, AS A MEANS OF REPAYMENT OF THE ABOVE LOAN UNTILL IT IS PAID IN FULL. I HEREBY ATTACH MY PAY ADVICE SLIP FOR PURPOSES OF CREDIT ASSESMENT.

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PART V:- SECURITY:

IN THE EVENT THAT I FAIL TO HONOR MY LOAN PAYMENT TERMS, I HEREBY AUTHORIZE THE SAPHUMULA SAVINGS AND CREDIT CO-OPERATIVE SOCIETY TO USE MY SAVINGS TO OFFSET THE LOAN.

PRODUCT **VALUE (E)**

ORDINARYL SAVINGS E……

OTHER (SPECIFY): …… E……

PART VI:- DECLARATION BY APPLICANT:

I, THE UNDERSIGNED, ……., DO HEREBY COMMIT MYSELF THAT I APPLIED FOR THE ABOVE LOAN, AND I ALSO CONFIRM THAT I DULLY UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS THAT GOES WITH IT, PARTICULARLY AS LAID DOWN IN THIS LOAN AGREEMENT.

I HEREBY WARRANT THE CORRECTNESS OF THE INFORMATION PROVIDED IN THIS APPLICATION FORM, THUS THE SAPHUMULA SAVINGS AND CREDIT CO-OPERATIVE SOCIETY CAN GO AHEAD AND USE THE INFORMATION AS TRUE AND CORRECT.

APPLICANT'S SIGNATURE:…… DATE:……

PART VII :- MANAGEMENT RECOMMENDATION:

WE HAVE ASSESED THE MEMBER'S LOAN REQUEST AND IN OUR VIEW THE LOAN SHOULD BE:

APPROVED/DEFFERED/REJECTED: ……

REASONS FOR DEFERING OR REJECTIONS: ……

……

……

IF APPROVED, AMOUNT TO BE APPROVED: E……

MANAGER:…… DATE:……

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PART VIII:- CREDIT/SUPERVISORY COMMITTEE:

AT THE MEETING OF THE CREDIT COMMITTEE HELD ON THIS DATE OF ……,

IT WAS RSOLVED THAT THIS APPLICATION BE:

APPROVED/DEFFERED/REJECTED:……

COMMENTS……

AMOUNT APPROVED: E …… PAYABLE IN …… MONTHS.

CHAIRPERSON: …… SIGNATURE:……

SECRETARY: …… SIGNATURE:……

MEMBER…… SIGNATURE:……

PART IX:- LOAN PAYMENT:

EFT/CHEQUE NO…… AMOUNT E……

SIGNED BY TREASURER…… DATE……

PART X:- OFFICE USE:

ORDINARY SAVINGS BALANCE: E……

LONG TERM LOAN BALANCE: E……

PAID UP SHARE CAPITAL : E……

SCHOOL LOAN BALANCE: E……