

Email: info@tnsacco.co.ke

TRANS NATION SACCO LTD

MKULIMA LOAN PRODUCTS APPLICATION FORM

A: NAME OF APPLICANT
ID NO MEMBER NO:DAIRY CO-OP/GROWER NO
CO-OPERATIVE/ COMPANY NAME
MOBILE NOSPECIFIC LOAN PURPOSE
Type of the loan/Advance applied (Tick loan applicable)
1. MKULIMA LOAN: 2. MKULIMA ADVANCE:
B: APPLICATION AND REPAYMENT:
I (Full Name)
apply for the above loan/advance of Kshs (In figures) (In words)
only, recoverable in months
at a repayment of Ksh
C: SECURITY OFFERED FOR THE LOAN (Tick the security where applicable)
SALARY SHARES GUARANTORS ANY OTHER (Specify)
D: DECLARATION
I hereby declare that the foregoing particulars are true to the best of my knowledge and agree to abide by the bylaws and the policies of the society. I hereby authorize the necessary deduction, including interest in respect of the loan/ advance I have applied: 14.5% fixed interest for Mkulima advance and 1.2083 interest per month for Mkulima Loan amortized. I also hereby give my consent to allow the SACCO to share my credit information with the Credit Reference Bureau (CRB) and to use my Credit Report for Credit Assessment. In case I change my pay point, I authorize the society to recover my loan/advance directly from my employer or from my guarantors. I understand that I will be charged a penalty of 10% of any unpaid installment(s) incase of default. I'm also aware that I shall be contributing shares deposits of at least Ksh 500 and risk fund of Ksh 200 monthly.
SIGNATURE OF THE APPLICANT DATE:
Please attach the two <u>Latest produce payment slip</u> , I/D photocopy and certified II photocopies of guarantors.

E: LOAN APPRAISAL (OFFICIAL USE)
Type of Farming EnterpriseLocationSub-
location
Farm Income for last three months Month 1Month 2Month 3
Average Income for the three months
Production per day in KgsPrice per Kg
Source of Animal feeds other than dairy mealLand Area owned
Land Area Rented
No of Dairy Cows Lactating
For Tea: Size of Land
No of Kgs per MonthKgs in the last one year
F: MARKETING AGENCY/COMPANY/CO-OPERATIVE SOCIETY (COMPLETED BY MANAGEMENT)
On behalf of the management, we undertake to channel ALL his/her produce payments through Trans nation Sacco until the loan applied is paid in full. We further undertake to effect deductions against his/her income/dues if required by the SACCO. We hereby confirm that we will not consider or approve any further credit in kind or cash that would affect his/her loan repayment in Trans Nation Sacco Ltd
Approved by :
NameDesignationSignPhone No
NameSignPhone No

Name......Designation.....Sign.....Phone No....

Name......Designation.....Sign.....Phone No....

REPUBLIC OF KENYA OATHS AND STATUTORY DECLARATION ACT (CAP 15, LAWS OF KENYA)

AFFIDAVIT OF SPOUSAL CONSENT

	by solemnly make oath and states as follows:-					
1.	THAT I am an adult of sound mind and the holder of Kenyan National Identity Card Number					
2.	THAT I am the spouse to					
3.	THAT I confirm that my spouse has notified me that he/she is the process of securing a credit facility with the SACCO under the Account number mentioned in 2 above.					
4.	THAT the Lender has not used any compulsion or threat or exercised undue influence on me to induce me to execute this Affidavit.					
5.	THAT I acknowledge that I have been advised to take and have taken independently legal advice regarding the nature, remedies and effect of this affidavit.					
6.	THAT I understand the nature and effect of this loan application to our agricultural income.					
7.	THAT I have no objection to and hereby give my consent to this loan application with TRANSNATION SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LIMITED.					
8.	THAT I make this Affidavit in accordance with the Oaths and Statutory Declarations Act (Chapter 15 of the Laws of Kenya).					
9.	THAT what is deposed to herein is true to the best of my knowledge, information and belief save and except a hereinabove deposed information and sources whereof are wholly disclosed.					
SWOR	N ATDAY OF202					
By the	said					
)					
Before	me:					
Comm	issioner for Oaths					

GUARANTOR'S INFORMATION

FOR ONE TO GUARANTEE FOSA LOAN AND SALARY ADVANCE; HE/SHE SHOULD BE AN ACTIVE MEMBER OF THE BOSA. HE/SHE SHOULD GIVE A CERTIFIED PHOTOCOPY OF HIS/HER IDENTITY CARD (Both sides) WHICH SHOULD BE ATTACHED ON THIS FORM.

REPAYMENT GUARANTEE

We, the undersigned, hereby accept jointly and severally liabilities for the repayment of the loan/advance in the event of borrowers' default. We understand that the amount in default may be recovered by attachment of our salary, an offset against our deposit in the society or by attachment of our property immediately the loan falls into default and that we shall not be eligible for loans unless the amount in default has been cleared in **FULL**.

	A/C NO/M NO	NAME	ID & PHONE NO	ADDRESS	DATE	SIGN
1.			ID. NO.			
			MOBILE:			
2.			ID. NO.			
			MOBILE:			
3.			ID. NO.			
			MOBILE:			
4.			ID. NO.			
			MOBILE:			
5			ID. NO.			
			MOBILE:			

	MOBILE:
	ID. NO.
	MOBILE:
<u>R</u>]	EQUIRED NUMBER OF GUARANTORS
	1) 0000 - 50,000 – Two guarantors (Checkoff Members)
	2) 50,001-100,000 – Three guarantors (Checkoff Members)
	3) 100,001-300,000 – Four guarantors (Checkoff Members)
FOR C	OFFICIAL USE ONLY
a)	Is the form properly filled
b)	Standing Order Kshs
c)	Shares Balance Kshs
d)	Bosa Loan Balances Kshs
APPR	OVAL:
	ertify that the application is within the loaning policy of the society. N/ADVANCE APPLIED KshAMOUNT APPROVED Ksh
FOR	A PERIOD OFMONTHLY REPAYMENT
CAPT	URED BY IN SYSTEM SIGN/STAMP DATE
CONE	TIRMED BYSIGNATURE