



LOAN APPLICATION FORM

1. APPLICANT PARTICULARS

Client Name/Name of entity		
Registration No	Vat No	Pin No
Type of Entity	Ltd co <input type="checkbox"/>	Partnership <input type="checkbox"/>
	Club <input type="checkbox"/>	Others <input type="checkbox"/>
Postal Address Current	Permanent	Email
Tel(landline)	Mobile	Physical address(attach sketch map)
Physical location: Town	Street	Building
Business premises :Rented <input type="checkbox"/>	Owned <input type="checkbox"/>	Date business Started
If rented Lease period	Remaining period	(attach copy of lease agreement) Rent payable

2. PARTICULARS OF PROPRIETORS

Name of director(s)/partner(s)/official(s)				
Name	ID NO.	Address	Designation	Nature of ownership
1.				
2.				
3.				

NB: Attach memorandum, Articles of Association, Board of directors' resolution, minutes, etc.

3. LOAN PRODUCT TYPE

School fees loan	Choice micro loan	Check off loan	Emergency loan	Salary advance	Others(specify)
Business loan	Business working capital	Asset Finance loan	Bank guarantee	Bid bonds	
			LPO Finance	*Insurance Premium Finance (IPF)	

4. LOAN PARTICULARS

Amount applied for (ksh)	Purpose
Cost of project(ksh)	Own contribution(ksh)
Repayment period	Monthly repayments(ksh) Loan series

Amount applied in words _____

5. ACCOUNTS IN OTHER BANKS/FINANCIAL INSTITUTION(S)

Bank	Branch	Status(Dr/Cr)
1.		
2.		
3.		

6. LOAN IN OTHER BANK(S)/FINANCIAL INSTITUTION(S)

Name of Bank	Amount Advanced Ksh.	Date advanced	Repayment period (month)	Outstanding amount Ksh.
1.				
2.				
3.				

NB: Attach bank statement(s)

7. SECURITY DETAILS

	Items pledged	Make	Serial No	Year of purchase	Purchase Price Ksh.	Current value Ksh.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

8. NEXT OF KIN (MUST HAVE ID)

Name	Id No.	Telephone Number	Relationship	Confirmation

9. DECLARATION

I/We declare that the information given herein is true to the best of my/our knowledge and belief. I/We further authorize Choice Microfinance Bank to verify the information given herein and make reference from any person(s)/institution(s) named herein.

Name of client/director/partner	Signature	Date

10. WITNESSED BY CREDIT OFFICER:

Name..... Signature..... Date.....

FOR OFFICIAL USE ONLY
LOAN APPRAISAL FORM

1. Applicant's details

Name _____ ID No. _____

2. Occupation:

Business or Employed _____ Period _____

Nature of business _____ Location _____

Name of Employer _____

Loan Purpose (Please Specify) _____

3. Loan details:

Amount of loan _____ other charges _____

Repayment period _____ Interest Rate _____

Repayment installment _____ Existing loan facilities _____

4. Income Details:**Monthly income and expenses (evaluation)**

Salary: Gross Kshs. _____

Income (Kshs)	Expenses (Kshs)
	Rent
Net Salary	Water, electricity, phone Transport
Business	Education/medical
Professional	Food Entertainment
Other activities	Taxes
	Other expenses
	TOTAL (B)
TOTAL (A)	

