



WANANDEGE SACCO SOCIETY

WANANDEGE PLAZA
P.O BOX 19074-00501
EMBAKASI
NAIROBI
TEL: +254111044900

REQUIREMENTS:

- 1.A commission of Ksh 500.00 to be charged
- 2.A copy of your ID (Identity Card) /Passport is required
- 3.Attach your Fosa card /ATM Card

SEC 1. CLOSING OF AN ACCOUNT (PERSONAL ACCOUNT)

I Mr/Mrs /MissID NO:
Hereby wish to close my FOSA account immediately. I agree with the terms and conditions of the SACCO for closing account and the relevant charges.

ACCOUNT NUMBER:

BOSA MEMBER NO/STAFF NO:

MOBILE:

SEC 2. DORMANT ACCOUNT ACTIVATION FORM

NAME.....

A/C NUMBER.....STAFF NO.....

ID/PP NO.....

REASONS FOR ACCOUNT TO BE DORMANT

.....
SIGNATURE:

DATE:

FOR OFFICIAL USE ONLY

REASON FOR ACTIVATION.....

RECEIVED BY: SIGNATURE..... DATE.....

CLOSED BY: SIGNATURE..... DATE: