



**WANANDEGE SAVINGS & CREDIT CO-OPERATIVE SOCIETY LTD**  
**WANANDEGE PLAZA P.O. BOX 19074-00501 EMBAKASI, NAIROBI**  
**Office cell: 0722 208 577 / 0780 208 558**  
**SALARY ADVANCE LOAN APPLICATION FORM**

**A. TERMS AND CONDITIONS**

1. Interest rate is 10% of the applied amount and repayment period maximum 6 months
2. The loan is guaranteed by either member's deposits or guarantors' deposits
3. Must have a guarantor's minimum of three but the loan is subject to maximum 90% of your Bosa Deposit.
4. Maximum limit of 75% of expected deferred amount after taxation
5. Evidence of expected deferred amount on the pay slip
6. The application Must be duly filled and supporting documents as ID card or copies 2 of latest pay slips attached
7. The borrower will NOT be allowed to suffer deductions including loan repayment in excess of 2/3 of his/her gross salary
8. A member whose outstanding loan is in default shall not be eligible for loan until the arrears are fully repaid.
8. The advance loan will be subjected to full re-payment if the employer remits the total outstanding deferred pay before lapse of stipulated Months.

**B. APPLICANTS PERSONAL & EMPLOYMENT INFORMATION**

SURNAME:	OTHER NAMES:		
STAFF NUMBER:	MEMBER NUMBER:		
DATE OF BIRTH:	ID NUMBER	KRA PIN:	
P.O BOX ADDRESS:	POSTAL CODE:	TOWN:	
MOBILE NUMBER:		EMAIL ADDRESS:	
DESIGNATION:		DATE OF EMPLOYMENT:	
TERMS OF EMPLOYMENT: PERMANENT <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CONTRACT <input type="checkbox"/>			

I wish to apply for a loan of Kshs.....in words.....  
 Repayable in..... months commencing .....Month..... Year.....

**C. LOAN SECURITY**

We, the undersigned have read and understood the conditions for granting the Advance and hereby accept jointly and severally liability for the Advance in the event the borrower defaults in repayment.

NAME	STAFF NO.	I/D NO.	SIGNATURE	DEPOSITS	MOBILE NO.

**Applicant's Declaration**

I have read, understood and agreed to abide by all the conditions governing this advance and any future amendments by the Sacco from time to time.

Name \_\_\_\_\_ ID No \_\_\_\_\_ Signature \_\_\_\_\_

**D. CREDIT APPROVAL**

**I confirm that all terms and conditions have been met and the applicant qualifies for the advance.**

Approved Amount Ksh... ..in words.....