

LOAN APPLICATION FORM

FIRST NAME(S)	<input type="text"/>														
SURNAME	<input type="text"/>														
PASSPORT NUMBER/IDENTITY NUMBER	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	GENDER	<input type="checkbox"/> M	<input type="checkbox"/> F
DATE OF BIRTH	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
TEL. NO. (M-PESA)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
ALTERNATIVE TEL.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
POSTAL ADDRESS	<input type="text"/>														
E-MAIL ADDRESS	<input type="text"/>														
PHYSICAL ADDRESS	<input type="text"/>														
CURRENT EMPLOYER NAME AND PHONE NUMBER	<input type="text"/>														
TOTAL INCOME PER MONTH	<input type="text"/>	KSHS.													
TOTAL EXPENSES PER MONTH	<input type="text"/>	KSHS.													
VEHICLE YEAR OF MANUFACTURE, MAKE AND MODEL	<input type="text"/>														
VEHICLE PRICE	<input type="text"/>														
AMOUNT & MONTHS APPLIED FOR	<input type="text"/>														
FOR PRIVATE OR COMMERCIAL USE	<input type="text"/>														

Referee 1:

NAMES

RELATION

TELEPHONE NUMBER.....

PHYSICAL ADDRESS

E-MAIL ADDRESS

Referee 2:

NAMES

RELATION

TELEPHONE NUMBER.....

PHYSICAL ADDRESS

E-MAIL ADDRESS

DATA COLLECTION CONSENT:

I/we hereby consent to data collection from other sources, in particular licensed Credit reference bureaus, state institutions, integrated population registry system, other registries, referees and other persons, Such Data is necessary for execution of pre-contractual measures and performance of the agreement. I further release the CRB and Watu Gari Limited and its officers, employees and agents from all claims, actions or proceedings of whatsoever nature and howsoever arising, suffered or incurred in connection with this sharing and access for the purpose afore stated.

Client's Name

Signature

 DATE

Documents required: ID copy, KRA PIN copy, 6 Months Bank statements, 6 Months M-Pesa statements, passport photo, dully completed application form.

OFFICIAL USE:

NAME OF CERTIFYING OFFICER	<input type="text"/>	SIGNATURE	<input type="text"/>	DATE	<input type="text"/>
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