

# IMARISHA SACCO SOCIETY LTD.

P.O. Box 682 Tel: 21028-20200, KERICHO

Computer Loan No. \_\_\_\_\_

Serial No. \_\_\_\_\_

## **FOSA: SALARY ADVANCE APPLICATION FORM**

*(Put a tick against the advance you are applying)*

Short Term Advance

Long Term Advance

### **A) APPLICANTS MUST MEET THE FOLLOWING REQUIREMENTS BEFORE COMPLETING THIS FORM**

1. The applicant must dully fill the application form. Any incomplete/altered form shall be returned unregistered.
2. Applicant must be channeling salary through FOSA
3. For one to guarantee salary advance, he/she must be an active member and channeling salary through FOSA.
4. Interest is charged 10% p.m for short term advance and 14% p.m for long term advance.
5. Applicants for short term advance must get two (2) guarantors and Long Term advance, four (4) guarantors.
6. On signing this application form, you are bound/have consented to the agreement between Imarisha Sacco Society Ltd and Metropol Credit References Bureau Ltd (CRB) or any other Credit Information Provider which the Society may engage in future.

### **B) PERSONAL INFORMATION: (Use Black or Blue Pen)**

Full Name \_\_\_\_\_ TSC No./PN \_\_\_\_\_ M/No. \_\_\_\_\_

ID/No. \_\_\_\_\_ FOSA A/C No. 

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Mobile No. \_\_\_\_\_ Current Station \_\_\_\_\_

Address \_\_\_\_\_ Employer \_\_\_\_\_

C) I apply for a salary advance of Kshs. \_\_\_\_\_ (Shillings in words) \_\_\_\_\_  
\_\_\_\_\_ only

D) Purpose for the advance: \_\_\_\_\_

E) Security offered for the advance: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

F) I hereby declare that the following particulars are true to the best of my knowledge and agree to abide by the laws and the policy of the society.

Signature of the applicant: \_\_\_\_\_ Date \_\_\_\_\_

### **G) REPAYMENT GUARANTEE:**

We the undersigned hereby accept jointly and severally liability for the repayment of the salary advance in the event of the borrower's default. We undertake that the amount in default may be recovered by attachment of our salary, an offset against our shares in the society, or by attachment of our property and that we shall not be eligible for loans unless the amount in default has been cleared in FULL.

## GUARANTOR'S INFORMATION

TSC. No.	NAME	A/C No.	STATION & MOBILE No.	SIGNATURE
			Station: Mobile no.:	ID No. .....
			Station: Mobile no.:	ID No. .....
			Station: Mobile no.:	ID No. .....
			Station: Mobile no.:	ID No. .....

**H) SALARY ADVANCE ACCEPTANCE.**

I, ..... hereby accept an advance of Kshs.....  
 (Amount in words)..... which has been approved.

The advance will be deducted for ..... months or in full for loan advance.

A/C No.: ..... Loanee's signature: ..... Date: .....

**EMPLOYER DETAILS:( FOR NON - TSC EMPLOYEES)**

In the event that this employee is terminated from service I/We shall notify in writing Imarisha Sacco Society of their termination and shall deduct such amount as would offset the loan from the employee's terminal dues and forward the same to Imarisha Sacco Society

Name of institution..... Address:.....

Employee Salary to be remitted at the end of the month Kshs. ....

Terms of Employment: Permanent  Contract  (Attach appointment letter)

Head of Institution: Name ..... Designation: .....

Phone No. .... Sign: ..... Official Stamp .....

Date .....

**I) FOR OFFICIAL USE: FOSA SECTION**

a) Amount of advance applied Kshs. \_\_\_\_\_

b) Savings Account Balances Kshs. \_\_\_\_\_

c) Advance Balance (if any) Kshs. \_\_\_\_\_

d) Is the Clearance form filled Yes  No

e) Advance Recommended Kshs. \_\_\_\_\_

Capturing Officer: (sign) \_\_\_\_\_ Date \_\_\_\_\_

Posting Officer: (sign) \_\_\_\_\_ Date \_\_\_\_\_

Operation manager: (sign) \_\_\_\_\_ Date \_\_\_\_\_

**J) APPROVAL:**

Advance approved Kshs. \_\_\_\_\_

Confirmed by CEO Sign \_\_\_\_\_ Date \_\_\_\_\_