

APPLICATION FORM

No.

APPLICANT PARTICULARS		MODE OF PAYMENT: MPESA <input type="checkbox"/> CHEQUE <input type="checkbox"/> BANK <input type="checkbox"/> POSTA PAY <input type="checkbox"/>			
Employer/ Ministry		Date of Application:			
Name of Applicant:		ID Number:	Date of Birth:		
Employment Number:		Department/Station:	Employment in:		
Mobile:		Postal Address:			
Permanent Address		Physical Address / Current Address			
District		Town			
Location		Street			
Village		Plot Number			
Nearest Landmark		House Number			
Referee 1		Referee 1			
Name_____		Name_____			
Relationship_____		Relationship_____			
Place_____		Place_____			
Tel. No._____		Tel. No._____			
LOAN PARTICULARS		TOP UP <input type="checkbox"/>	DIRECT APPLICATION <input type="checkbox"/>	BUY OFF <input type="checkbox"/>	RELIANCE <input type="checkbox"/>
Loan Applied:	Amount Disbursed:	Amount paid to 3rd party:	Installment:	Term:	
Left Hand Thumb Print:	Client's Signature:	Sales Officer's Signature:	Code:		
EMPLOYERS CONFIRMATION:					
	Basic Pay:	Net Pay:	1/3 Value:	Credit Worthiness:	
Name of the Officer:	Signature:	Stamp:			

TERMS AND CONDITIONS

- i) The borrower accepts that he is lawfully indebted to Longitude Finance for the total amount due and shall be recovered on the basis provided in this agreement or any other means that Longitude Finance shall find it necessary to recover the total outstanding loan amount due or part of the balance due for any reason that are unforeseen when signing the application.
- ii) The salary authorization form instructing the employer to recover monies borrowed as per the agreement is irrevocable and no installment shall be withheld or postponed by the employer for whatever reasons.
- iii) The borrower affirms that Longitude Finance shall disclose information in respect to borrower's application and any non-compliance with the agreement herein to credit bureau or third party in accordance with the law.
- iv) The borrower shall notify Longitude Finance immediately by any means necessary in the event change of address, change of employment, missed deduction, transfer of termination so as to make any necessary arrangement to settle the total outstanding loan balance as at that time.
- v) The borrower affirms to Longitude Finance that in the event of termination or change of employment, the borrower shall either remit the installments in cash or authorize Longitude Finance to submit a debit order instruction on respect to the borrower's bank account for the purpose of recovery of the total outstanding loan amount due.
- vi) The borrower acknowledges that monthly interest will be 5% per month on the principal amount disbursed.
- vii) The borrower acknowledges that a monthly administration fee of Ksh.150 will be charged.
- viii) The borrower acknowledges that in the event of early settlements, penalties on the principal, interest and processing fee shall be applicable subject to the company's policies and procedures. (Available up on request) .
- ix) The borrower acknowledges that they may settle the amount at any time after the first month deduction and I liable to an early settlement fee. The borrower further acknowledges that early settlements fees shall attract 25% penalty on the principal and a monthly interest of 7.5% for the period that the loanee has had the loan.
- x) If the borrower falls in arrears in respect to installments, Longitude Finance is authorized to deduct full outstanding loan amount together with the following month's installments depending on the due date.
- xi) The borrower agrees to supply any other extra documentation that may be required by Longitude Finance should the company find it necessary.

CLIENTS SIGNATURE: _____ **SALES OFFICER SIGNATURE:** _____

CLIENT AND SALES OFFICER DECLARATION CLAUSE

I Mr./ Mrs./Miss _____ confirm that Mr./Mrs./Miss has duly signed the loan agreement form, the check off system authority form, and confirm that the passport size photograph affixed on the front page is the true likeness of the borrower, the copies of the I.D are scanned copies of the original, that the pay slips attached are original, that the borrower has provided two months certified bank statements and the form has been signed by the employer authorized officers. I further confirm that am fully responsible for any anomalies out of my negligence in respect to this application.

SIGNED BY (SALES OFFICER): _____ **CODE:** _____ **DATE:** _____

I Mr./Mrs./Miss _____ confirm I have duly signed the loan agreement form, the check off system authority form, and confirm that the passport size photograph affixed on the front page is the true likeness of me, the copy of the I.D is scanned, that the pay slips attached are original, that the borrower has provided two months certified bank statements and the form has been signed by the employer authorized officers. I further confirm that am fully responsible for any anomalies out of my negligence in respect to this application.

CLIENTS SIGNATURE: _____ **DATE:** _____

FOR OFFICIAL USE ONLY

APPROVED BY

LOAN OFFICER	_____	_____	_____
	NAME	SIGNATURE	DATE
COLLECTION DEPT	_____	_____	_____
	NAME	SIGNATURE	DATE
SALES MANAGER	_____	_____	_____
	NAME	SIGNATURE	DATE
OPERATIONS MANAGER/ ASST. OPERATIONS MANAGER	_____	_____	_____
	NAME	SIGNATURE	DATE

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