LAW SOCIETY OF KENYA SACCO SOCIETY LTD

Crawford Business Park, 3rd Flr, Office Suite 23, State House Rd, Opp. State House Girls, Nairobi.



P.O.Box 6740-00100, Nairobi.

Signature.....

LOAN NO.

Tel: 020 -514 6300 Cell 0728 788 092

LOAN APPLICATION FORM (Fill online, print & sign)

A. Instructions to the Applicant

- Complete part A-L of this loan application form in CAPITAL LETTERS. Any alteration MUST be countersigned. **Don't use white-out.** INCOMPLETE FORMS WILL BE REJECTED.
- Members applying for any loan must have been regular contributors for a minimum period of six months. Exemption will only be given to new members applying for Flexi-Cheti loans.
- No other loan will be issued until the existing loan is repaid in full unless it is of a different type or is being refinanced.
- Where another loan is to be issued or refinanced, the existing loan(s) should not be in arrears.
- The total loan(s) balance issued by the society at any time will not exceed three times the deposits held by the member.
- No member shall be allowed a loan of which his/her total deductions will leave him with a salary that is less than 30% of his/her basic pay.
- 7. Loan repayment period will be as follows: -

	Loan Type	Amount (Kshs.)	Repayment Period (months)
i.	Emergency Loan	Maximum 200,000	12
ii.	Education Loan	Maximum 500,000	24
iii	Flexi-Cheti Loan	Maximum 27,660	12
iv.	Development Loan	Up to 500,000	36
		500,001-1,000,000	48
		1,000,001-3,000,000	60
		3,000,001-5,000,000	72
		5,000,001-7,500,000	84
		7,500,001-10,000,000	96
		10,000,001-15,000,000	108
		15,000,001-35,000,000	120

 A loan must be secured by own and/or at least 2 guarantors deposits and/or real property with titles (land/house) (70% of forced sale value) and/or m/ vehicles with logbooks (up to 2000cc at 70% of forced sale value and 50% of forced sale value for vehicles above 2000CC).

Γhe	total	guarantors	deposits	or	loan	security	togeth	er with
hat	of the	e applicant's	s deposits	mu	st be	equal of	more th	an the
	11	1.0	4 C D1		1 . 1			

- loan applied for except for Flexi- Cheti loans.

 9. No member shall guarantee more than three loans at any given time.
- 10. A guarantor's loan and deposit account must be up to date to be eligible to guarantee.
- 11. No member may withdraw his/her deposits unless all loans are repaid and all loans guaranteed by him/her are cleared.
- 12. In case of default, I understand that:
 - a) The unpaid installment (s) attracts a penalty of 10% per month,
 - b) A 10% offsetting charge of the loan balance or deposits used whichever is lower shall be charged in case deposits are used to offset the loan, either due to default or upon member's request.
 - c) After offset from own deposits, the Sacco will recover any outstanding balance from guarantors where they exist and I will not access any other credit facility until I save for a period of not less than 6 months or more.
 - d) The Sacco will negatively list me with the Credit Reference Bureau(CRB).
 - e) In the event of default on this loan account, all costs associated with the recovery of the defaulted amount, all expenses and costs will be held to my account.
- 13. Loan fees and charges are as per the Credit Policy and as follows:
 - An insurance fee of 1.5% (Minimum Kshs. 2,000) of the loan issued will be deducted from the loan before disbursement.
 - b) No loan application fee.
 - c) Monthly contribution of Kshs.1000 for Non-advocates and Flexi-Cheti applicants and Kshs. 2000 for Advocates or 0.20% of the loan (Maximum 20,000/=) whichever is higher will be added to your monthly loan repayment.
 - d) Interest rate is 1% per month on a reducing balance
- Documents required: Copies of ID card/Passport, PIN certificate, current professional practicing certificate, Loan acceptance & repayment commitment letter and two recent passport size photographs.

NB: The above are brief excerpts of the Credit Policy and may change from time to time. For the full and currently applicable information, terms and conditions, kindly refer to the prevailing rules, by-laws, Credit policy and AGM resolutions.

B. Applicant's Details

Member No ID/P	assport No:	P.O. Box .	Code
Town Tel. No	:	. Mobile No:	
Email			•••••
Residential Physical Address:	Str	eet:	House No:
Position in Society: Member:	Committee member:	Employee:	
Loan Type: Development: 🗌	Emergency:	Education:	Flexi- Cheti:
Amount Applied (Figures)	Amount in words .		

7A 7		
Namo.	'	

11	A 7	TC
Member	No.	LS-

	Signature.																		
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	Purpose	

LOAN	NO.	•••••
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	SELEC	PURPOSE OF THE LOAN	
	SECT	OR	Tick Suitable loan purpose
1000	AGRICULTURE	(1100) Crop Farming (1200) Animal Production (1300) Agricultural supporting services	
2000	TRADE	(1400) Agribusiness (2100) Wholesale and Retail (2200) Transport- Purchase of motor vehicle	
3000	MANUFACTURING AND	(2300) Hospitality (2400) Foreign Trade (3100) Cottage Industry	
	SERVICING INDUSTRIES	(3200) Servicing Industry (3300) Information, Communication and Technology	
4000	EDUCATION	(4100) Education and related services	
5000	HUMAN HEALTH	(5100) Human health and related services	
6000	LAND AND HOUSING	(6100) Land (6200) Housing	
7000	FINANCE, INVESTMENTS AND INSURANCE	(7100) Mortgage Finance	
		(7200) Insurance	
		(7300) Investments	
8000	CONSUMPTION AND SOCIAL SERVICES	(8100) Utilities	
		(8200) Consumer Durables	
		(8300) Social and communal expenses	

D. Loan Refinance Details

Refinance: Yes No	If YES State Loan(s) being refinanced below:
Loan Type	Outstanding Loan Balance
Loan Type	Outstanding Loan Balance
Loan Type	Outstanding Loan Balance
Total Outstanding Loan(s) Balan	ce
Loan Clearance fee	Lump sum charges if any
N. d O S	n clearance fee amount with the loan officer or your Customer Relationshin Officer

E. Employment/Business/Law firm

tation/Branch		Position	
Building	Floor	Street	
erms of employment (te	mporary, permanent & pensior	nable, contract any other)	If o
ontract, indicate expiry	date of contract		
resent Salary in Kshs:			
	Add: Allowances	Less: Deductions	Net Pay:
Basic Salary:			
•	on and will inform the society sh	ould circumstance change or t	the loanee be dismissed or

Name:	Men	ıber No. LS	Signature
F. Loan Guarantors & Security Detai	ls		LOAN NO

Loan Guarantors:

We, the undersigned **Guarantors**, having read and understood the instructions on part A of this loan application form, authorize you to deduct any defaulted portion of the loan plus due charges from any deposit owned by us, or to cause deductions to be made from our salaries in respect of such default. The liability of the Loanee and guarantors is personal and shall extend beyond the deposits held by each of us in the Sacco in case of default.

To Be Filled By Guarantors			Official Use			
Member Name	Member No.	ID. NO.	Amount Guaranteed	Mobile No & Email address	Signature	
					-	
					•	
					-	
					<u> </u>	
Collateral (Please deliver or			Title/Registr	ation No		
2. Security Name		Title/Registration No				
3. Security Name		Title/Registration No.				
. Security Name						
. Security Name	••••••	•••••	Title/Registration No.			
	ehicle, I will keep i	t comprehensi	ively insured durin	g the loan repayment p	eriod until the lo	an fully paid.
Where security is motor ve	. In case of default the assets placed as loan security can be sold to recover the outstanding loan amount.					
_	ets placed as loar	security car	n be sold to recov	er the outstanding lo	oan amount.	

G. CRB Consent

I confirm that I have authorized LSK SACCO Ltd to access my credit information and hereby authorize CRB(s) to mail/deliver/send my credit report to LSK Sacco Society Ltd. I release CRB Ltd and LSK Sacco Ltd and its officers, employees and agents from all claims, actions or proceedings of whatsoever nature and howsoever arising, suffered or incurred in connection with CRB Ltd sending/ delivering/mailing my credit report to LSK Sacco Ltd.

I further confirm that, in case I default in repaying my loan, my loan defaults status and data will be shared with CRB(s) without prior written consent.

Name	ID
Signature	Date

Name:	Member No. LS	Signature		
H. Consent to share personal Data		LOAN NO		
I hereby permit LSK SACCO Ltd to;				
(i) Disclose my data and information relating to any transaction, documents, assets, business or affairs outside LSK SACCO Ltd whether such data and or information is obtained after I cease to be a member or during the subsistence of my membership				
(ii) Share my personal data and/ or information with CRBs, SASRA and any other relevant bodies/institutions and/or persons. LSK SACCO Ltd shares all loans details with CRBs and SASRA.				
(iii) All non-performing loans will be shared and list default shall be shared with members at the AGMs.		nd also the list of loans in		
NameSignature				
I. Loan repayment				
	heck-Off: Post-dated Che	eques:		
Note: i. If you select direct debit, then you must fill a direct debit form and submit it together with your loan application form. ii. Standing order instructions received and stamped by your bank should be submitted before disbursement of the loan. iii. Checkoff instructions will be sent directly to your employer immediately the loan is disbursed. iv. Posted dated Cheques must be presented before disbursement of the loan.				
Signature	Date			
J. Loan disbursement				
I authorize the Sacco to disburse my loan funds as a 1. Flexi-Cheti Loans are paid directly to Law Society of Preferred mode of disbursement: RTGS: (RTG	f Kenya 2. Payment to a third party m	nust have supporting documents		
PAYEE ACCOUNT NAME (CAPITAL LETTERS)				
ACCOUNT NUMBER:BANK				
Any other disbursement instructions or details:				
Signature				
K. Declaration				
I hereby declare that the information given above is By-laws of the society, rules and the loaning policy. I this application form.				
Signature of applicant	Date			
L. Witness (Must be an LSK Sacco member)				
Full Name	ID N	ło		
Member Number Mobile No	Signatur	e & Date		

Name:	Member No. LS
INUME	Michibel No. Lo

ember No. LS	Signature
C.1101 ES	2.5

FOR	OFFICIAL	USE

LOAN	NO.	

M. Loan Appraisal & Recommendation

Loans Officer's Appraisal		
Total Deposits	Maximum Loan	
Existing Loan(s) repayment is up to da	ate Yes 🗌 No 🔲	
If NO give your comments		
I confirm that I have verified the applic	cant's personal & employment details.	
Appraised by	Signature	Date
	· ·	
Loans Manager		
I confirm that I have verified the inform	nation given in this form. CRB rating is	
Amount applied: Kshs	Own deposits plus security: K	shs
I confirm that the applicant is/is not w	within the rules of the society. If not, give rea	sons
Name	Signature	Date
<u>C.E.O</u>		
This application should be accepted or	r rejected for the amount of Kshs	Repayable in
Monthly installments.		
Comments:		
Name	Signature	Date
i. Approved for Kshs	on it was resolved the samount in words	
Approved by:		
Chairman Secre	etary Member	
Date Date	Date	
240		
O. Loan Disbursement		
Application received on	Loan Disbursed on	
	Batch No.	
Cheque No Dateu	Datcii ivo.	
Repayment start Date min	nimum monthly installment of Kshs	monthly.
Posted by:	Confirmed by:	
•	•	
Date:	Date:	•••••

Name: Member No. LS Signature	Name:	Member No. LS	Signature
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P.O.Box 6740-00100, Nairobi.

Tel: 020 -514 6300 Cell 0728 788 092

MEMBERS DETAIL Bank:	BENEFICIARY DETAILS Name: LSK SACCO LIMITED			
Bank Code:	Bank Name: Co-operative Bank of Kenya Ltd Branch: Kimathi Branch			
BRANCH:	Branch Code: 11045 Savings A/C No. : 01100001711200			
A/c No	Originators Code: 1258			
Member NO:				
Account Name:	ID No			
Email Address:	IVIODITE INO			
	y/ our account with the above mentioned bank or any other bank of Kshs (Amount in figures)			
the amounts necessary for payment of the monthly installment/ premium due in respect of the above mentioned agreement/ Sacco on the 1 st [], 5 th [], 10 th [], 15 th [] 20 th [], 25 th [], 30 th [](<i>Tick as appropriate</i>) day of each and every month commencing in(Month & Year) and continuing (as the case may be). All such withdrawals from my/ our account by you shall be treated as though they have been signed by me/ us personally.				
The amounts are variable and may be debited on various dates. I/ We understand that you may change the amount and dates only after giving me/ us prior notice.				
I/ We understand that the withdrawals hereby authorized will be processed by Direct Debit transfers and I/ we also understand that details of each withdrawal will be printed on my bank statement or an accompanying voucher. I/ We agree to pay any bank charges relating to this authority.				
This authority may be cancelled by me/ us giving you 30 (<i>thirty</i>) days notice in writing, sent by prepaid registered post or delivered to the offices of the above mentioned company/ association but I/ We understand that I/ We shall not be entitled to any amounts which you have already withdrawn while this authority was in force if such amounts were legally owing to you.				
Receipt of this Authority by you shall be regarded as receipt thereof by my/ our bank (whichever it is or will be). I/ We understand that if any Direct Debit Transfer is paid which breaks the terms of this authority, you will make a refund upon application.				
Signed aton thisday of	20			
(Members Signature	as used for signing cheques)			
Witnessed By LSK SACCO OFFICIAL (FULL NAME)	Sign			
For Bank Use Only:				
Confirm Bank Details & Signature:	Approved By:			

Date Stamp: