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**APPLICATION FOR LOAN AND AGREEMENT FORM**

**CUSTOMER CARE STAMP**

**INSTRUCTIONS:**

- The loan application form **MUST** be signed by the Applicant, Guarantors, OCPD/OC/CO/CCO/Departmental Head or Authorized Employee Representative.
- The OCPD/OC/CO/CCO/Departmental Head or Authorized Employee Representative **MUST** be from the station where the applicant is serving.
- ANY ALTERATIONS made on the loan application form shall automatically disqualify the applicant.
- Any loan that requires bridging/clearance **MUST** be indicated on the section provided (**LOANS TO BE CLEARED BY THE SACCO**).
- Any member whose loan fall into arrears within 90 days **SHALL** be listed to the **Credit Reference Bureau (CRB)**.
- All the applicants **MUST** attach their latest two pay slips and a copy of their ID/Passport.
- All applicants are required to provide their passwords/ (access identification) to GHRIS for pay slip verification.
- Any member requesting for loan clearance by the SACCO and deposits boosting will be charged a 10% bridging commission which might be changed from time to time as determined by the board of directors.

**PART A** - *To be fully filled by the applicant before being signed by the OCPD/OC/CO/CCO/Departmental Head or Authorized Employee Representative.*

**A. APPLICANT'S PERSONAL INFORMATION**

Applicant's Name: \_\_\_\_\_ Payroll Number: \_\_\_\_\_  
 Service Number: \_\_\_\_\_ Membership Number: \_\_\_\_\_  
 National ID Number: \_\_\_\_\_ (Attach Copy) Age: \_\_\_\_\_  
 Mobile Phone Number: \_\_\_\_\_ Present Address: \_\_\_\_\_  
 Ghris Password: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**EMPLOYMENT DETAILS:**

County/Formation: \_\_\_\_\_ Division: \_\_\_\_\_  
 Station: \_\_\_\_\_ Basic Salary: \_\_\_\_\_  
 Other Income: \_\_\_\_\_ (Attach 2 current original pay slips)

**LOAN PARTICULARS/LOAN TYPE (Tick the appropriate box)**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Super Loan 60 Months       | <input type="checkbox"/> Normal Loan 48 Months      | <input type="checkbox"/>                                 |
| <input type="checkbox"/> Refinancing Loan 48 Months | <input type="checkbox"/> Muslim Loan 48 Months      | <input type="checkbox"/> Muslim Emergency Loan 12 Months |
| <input type="checkbox"/> Emergency Loan 12 Months   | <input type="checkbox"/> School Fees Loan 12 Months | <input type="checkbox"/> Asset-Financing Loan 24 Months  |
| <input type="checkbox"/> Others (Specify) _____     |   |  |

Purpose of the Loan: \_\_\_\_\_  
 Amount Applied for in figures: \_\_\_\_\_  
 Amount Applied for in words: \_\_\_\_\_  
 Amount of shares/deposits held (Kes): \_\_\_\_\_ Total shares to be boosted (Kes): \_\_\_\_\_  
 Number of Outstanding Loans: \_\_\_\_\_ Amount: \_\_\_\_\_ Other Liabilities: \_\_\_\_\_

**LOANS TO BE CLEARED BY THE SACCO**

The applicant should specify any loan that he/she wants cleared by the SACCO;

**Mega Loan** \_\_\_\_\_ **Super Loan** \_\_\_\_\_ **Normal Loan** \_\_\_\_\_  
**Refinancing Loan** \_\_\_\_\_ **Emergency Loan** \_\_\_\_\_ **School Fees Loan** \_\_\_\_\_  
**Muslim Loan** \_\_\_\_\_ **Muslim Emergency Loan** \_\_\_\_\_ **Asset Financing Loan** \_\_\_\_\_  
**Others (Specify)** \_\_\_\_\_

**DECLARATION**

I hereby declare that the foregoing particulars are true to the best of my knowledge and belief and agree to abide by the by-laws and loan policy of the society and variation by the Credit Committee in respect of amount of loan applied and repayment period. I hereby authorize the necessary recoveries to be made from my salary/bank as repayment for this loan.

**Applicants Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PART B - MUST** be signed by the guarantor him/herself and should have known the amount being applied. In consideration of granting the above loan or any lesser amount that may be approved, we the undersigned hereby accept jointly and severally the liability for its repayment in the of event of borrower’s default. We understand that the amount in default may be recovered by an offset against our deposits in the society or by attachment to our salary.

**NB: TO BE FILLED IN CAPITAL LETTERS**

S/No.	PF/No.	NAME	HOME ADDRESS	ID No.	SIGNATURE	TEL No.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

**NOTE:** Development Loans must have at least six guarantors, while emergency loans must have at least four guarantors.

**PART C - MUST be signed by the OCPD, OC, CO, Departmental Head or Authorized Employee Representative of the station where the applicant is currently serving.**

Certified that the applicant is still in Employment/Business

Name \_\_\_\_\_ Title/Position \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_ Stamp \_\_\_\_\_

**PART D - RECOMMENDATION BY AUTHORIZED SACCO STAFF**

On \_\_\_\_\_ 20\_\_\_\_\_ we approved the loan for

Kes \_\_\_\_\_ as per our Minute No. \_\_\_\_\_

\_\_\_\_\_ Credit Manager                      \_\_\_\_\_ GM - Operations                      \_\_\_\_\_ Accounts/Finance