

## MMFB/CRM/01

LOAN APPLICATION FORM		NEW 🗆	EXISTING 🗆	
				PASSPORT
ENTERPRISE LOAN $\square$ MSEF $\square$	PAYEE  OTHERS			
1. APPLICANT'S DETAILS				
FULL NAME				
MEANS OF ID: INT'L PASSPORT	NATIONAL ID	DRIVER'S LICENSE	ОТ	HERS
ID NUMBER	DATE ISSUED		EXPIRY DATE	
TELEPHONE NO	MOBILE NO	<del></del>	BVN	
MARITAL STATUS SINGLE	MARRIED	SEPARATED	ι	DIVORCED
DATE OF BITRH	STATE OF ORIGIN		LGA	
EMAIL ADDRESS				
HOME ADDRESS				<del>-</del>
LANDMARK/NEAREST BUSTOP				
2. SPOUSAL CONSENT				
NAME OF SPOUSE		DEPENDA	ANTS	
NUMBER OF CHILDREN	<del></del>	TEL NO		
SPOUSE BUSINESS ADDRESS	SPOUSE SIGNATURE			
3. GUARANTORS DETAILS				
1				
2				
4. EMPLOYMENT STATUS (PROVIDE PAY	SLIP, ACCOUNT STATEMENT	AND EMPLPOYER	'S CONFRIMATION)	
FULL TIME □ PART-TIME □	CONTRACT STAFF	PUBLIC SI	ERVANT 🗆	SELF EMPLOYED
INDUSTRY/SECTOR	NO YEARS IN EMPLOYMENT_		DATE OF FEMPLOYI	MENT
POSITION/FUNCTION		DEPARTM	1ENT	
MONTHLY SALARY	<del></del>	MONTHL	Y DEDUCTIONS	
CURRENT EMPLOYER NAME				
CURRENT EMPLOYER ADDRESS				
OFFICE TELEPHONE				
WORK EMAIL				
5. BUSINESS DETAILS (PROVIDE ACCOUNT	NT STATEMENT)			
TYPE OF BUSINESS			YEARS IN BUSINESS	
BUSINESS ADDRESS				
ASSOCIATION			ID NO	

AV. MONTHLY SALES\_\_\_

AV. MONTHLY CREDIT T/O\_\_\_

FACILITY WITH OTHER BANKS_		AMOUNT	_	TENOR			
FACILITY WITH OTHER BANKS_		AMOUNT	_	TENOR			
6. EDUCATIONAL STATUS							
PRIMARY 🗆	SECONDARY [		J	POST GRADUATE			
7. LOAN DETAILS							
TYPE OF SECURITY/COLLATERA	.L						
MODE OF REPAYMENT:	CHEQUE	STANDING ORDER □	DIRECT DEBIT □	CASH DEPOSIT □			
8. DISBURSEMENT DETAI	LS						
ACCOUNT NAME							
		SORT CODE	BRANCH				
9. CONSENT TO DISCLOS	EINFORMATION						
I consent that the Bank may collect, use and disclose my transaction/information to any appointed Credit Bureau and that the Credit Bureau may use the information for any approved business purposes as may from time to time be prescribed by the Central Bank of Nigeria (CBN) and/ or any relevant statute.							
I authorize the Bank to conduct previous/current credit information checks on me/us from other financial institutions through any relevant means/ agency.							
In the event of default, I hereby	authorize Mainstreet	Microfinance Bank to fill and pay in my cheq	ue in repayment for the facility gra	anted me by the bank.			
I here execute a GSI Mandate authorizing Mainstreet Microfinance Bank to recover any amount outstanding from the principal and interest from any/all accounts maintained by me across all Financial Institutions.							
Declaration:							
I hereby confirm that the above	information is correct	and I understand the conditions and agree t	o be bound by the Terms and Con	ditions of the loan.			
APPLICANT'S SIGNATURE		DATE		_			
		OFFICIAL USE ONLY					
<u>VISITATION REPORT</u>							
DATE OF VISITATION							
MET WITH							
BRIEF DESCRIPTION OF PREMISES (TYPE OF BUILDING/STORIES, COLOUR, LANDMARK ETC)							
BRIEF DESCRIPTION TO CLIENT FROM THE BRANCH							
NAME OF VISITING OFFICER		NAME OF ACCO	OUNT OFFICER				
SIGNATURE		SIGNATURE					
BRANCH MANAGERS' SIGNOFF	/CONCURRENCE						