Credit Application Form (new applicant)

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| **Branch Office** |  | | | | | |
| **Credit Officer** |  | | | | | |
| **Date** |  | | | | | |
| **Where did you learn about the KIMS’s Financing Products:**  □ Credit Officer/KIMS staff  □ Friends/Neighbors  □ Relatives  □ KIMS borrowers/depositors  □ Posters  □ Radio  □ Other: | | | | | | Photo |
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| PERSONAL INFORMATION | | | | | | |
| Name of Applicant: | | | | | | |
| ID Type: | | | ID Number: | | | |
| Nickname: | | | | | Age: | |
| Place of Birth: | |  | | | | |
| Home address: | | | | Number of years at address: | | |
| Phone Number: | |  | | | | |
| Applicant occupation: | | | | Level of Education: | | |
| Name of Spouse: | | | | Occupation: | | |
| House: □ Owned □ Rented □ Mortgaged | | | | | | |
| Marital Status: □ Married □ Divorced □ Widowed □ Single | | | | | | |
| Gender: □ Male □ Female | | | | | | |
| No. of family members: Adult [ ] Minor [ ] No of Dependents: | | | | | | |

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| 1. **BUSINESS INFORMATION** | |
| Type of Business (Retail, wholesale, service, manufacturing etc.): | |
| Business Name: | Business Address: |
| Business Telephone: | No. of Years in The Business: |
| Business Partner (If Any) and ownership %: | No. of Employees: |
| Estimated Business Assets: | Estimated Monthly Sales: |
| Who looks after the business when you’re sick or away? | |

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| **3. HOUSEHOLD AND BUSINESS SOURCES OF INCOME**  *(Write down all sources of income including income from main and other businesses, salary, remittances, etc., use separate sheet if necessary)* | | | | | | | | | | | | |
| **SOURCES OF INCOME** | | | | | **Estimated Gross Income and Expenses** | | | | | | | |
| ***Business*** | | *Number of Yrs. in Business* | | | Estimated Gross Sales | | | Estimated Gross Expenses | | | Estimated Net Income | |
| Main | |  | | |  | | |  | | |  | |
| Secondary | |  | | |  | | |  | | |  | |
| Secondary | |  | | |  | | |  | | |  | |
| Who among the family members usually assist the applicant in running the business? | | | | | | | | | | | | |
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| ***Income from Salaries*** | ***Partner*** | | ***Current Position*** | | | ***Number of Years in the Job*** | | | ***Name and Address of Company*** | | | ***Estimated Take Home Pay*** |
| Household Member 1 |  | |  | | |  | | |  | | |  |
| Household Member 2 |  | |  | | |  | | |  | | |  |
| Household Member 3 |  | |  | | |  | | |  | | |  |
| **Estimated Net Income** | ***Regular Average Amount*** | | | ***How Frequent*** | | | | | | | | |
| **Weekly** | | | **Semi-Monthly** | | | **Monthly** | | **Irregular** |
| Remittances | $ | | |  | | |  | | |  | |  |
| Others (specify) | $ | | |  | | |  | | |  | |  |

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| **4.**  **INVESTMENT INFORMATION** | |
| How much do you want to borrow from KIMS? |  |
| For how many months? |  |
| What is the purpose of this investment? |  |
| How much can you afford to pay monthly? |  |

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| 5. PRESENT OBLIGATIONS*(including those from KIMS and others like NGO, Traders, banks, Suppliers, Landlord)* | | |
| Do you have any outstanding financing?  *□* Yes, how much is your outstanding financing?  *□* No | | |
| Name Of Creditor/Supplier: | 1. | Amount: |
| 2. | Amount: |
| Name at least one creditor/supplier that you have borrowed from in the past (this will help you get financing): | | |
| Do you have current, savings accounts or deposits?  □No  □Yes, Amount? Name of bank or financial institution? | | |
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| **6. AUTHORIZATION** | | |
| I declare that the information given herein is true to the best of my knowledge and belief: I further authorise the Institution to verify the information given herein and obtain a reference from any person(s)/institution(s) as required in the review of this financing application. This authorisation includes obtaining information from suppliers, commercial banks, and all other creditors while releasing these institutions from liability under any and all bank secrecy laws.  Name Applicant:  Signature Applicant:  Date: | | |

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| **7. GUARANTOR** |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  , hereby certify that all the information stated in this INDIVIDUAL FINANCING APPLICATION FORM is true and correct and that I shall be held responsible in case the applicant fails in meeting his/her obligations in this matter.  Telephone Number Guarantor:  Signature of Guarantor:  Date:  Witnessed by (full name):  Signature of Witness:  Date: |
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| *[To be completed by KIMS]*  Does the applicant pass all eligibility criteria?  □ Yes  □ No, reason:  Loan Officer’s Name:  Signature:  Date: |

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| **INVESTMENT COMMITTEE** | | | | | | |
| **Approval:** | | | **Reject** | | **Defer** | |
| Financed amount: | | |  | | | |
| Term: | Profit Rate: | |
| Installment: | | |
| Repayment Frequency [*Monthly, bi-weekly ,weekly]* | | |
| **Name** | | **Title** | | **Signature** | | **Date** |
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| Accountant:  Signature:  Date: | | | | | | |