

QUICK LOAN APPLICATION FORM

1. APPLICANTS I	DETAILS				
Initials: Mr Ms	Mrs M	Dr 🗌	Miss others:		
Membership No:	First Name:		Surname:		
Omang No:	Gender:	DOB:	DB: Retirement Date:		
Marital Status: Single	Married Div	orced	Windowed		
Postal Address:					
Physical Address:					
			Email:		
Home Village:	Ward:				
Designation:	Workplace:				
Employer:	Depart	ment:	Tel (W):		
Name of Chief/Headman:	n: District:				
Next of Kin (in case of en	nergency)				
Name:	Relationship:				
Tel:	Cell:	Cell:			
2. BANKING DET	AILS				
Bank Name:	Branch: _		Account Number:		
Amount Applied for: P_		Repaymen	nt period:		
Purpose of Loan:					
	ONS HAVE BEEN MAD 101681 BARCLAYS HO	*	NTS CAN BE FORWARDED TO NCH		
ACCOUNT NUMBER 34	Member's Signature:		Date:		



3. OFFICIAL USE ONLY			
Savings Balance: P	Maximum Eligibility: P		
O/Loan Bal: P	Emergency Bal: P		
Q/Loan Bal: P	D/Loan Bal: P		
G/Loan Bal: P	M/Loan Bal: P		
Amount Qualified for: P	Shares Balance: P		
LAF: Quick Loan: 0.8% x P	x Years = P		
	INSTALLMENTS		
Loan Applied for: P	Ordinary Loan: P		
Total O/E/Q/G/M: P	Emergency Loan: P		
Total Loans: P	Q/Loan: P		
	G/Loan: P		
	M/Loan: P		
	LAF: P		
	Total instalment: P		
Name:	Designation:		
Signature:			
4. SUPERVISOR			
Bank TRF/Cheque Amount: Loan:	P		
Less O/Q/E/G/M	P		
Less other Banks	P		
Total	P		
Name:	Designation:		
Signature:	Date:		
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The Accountant General Ministry of Finance and Development Planning Private Bag 008 Gaborone

Commercial Banks Alexander Forbes

Dear Sir/Madam

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PUBLIC OFFICER'S PRIVATE SECTOR AND PENSIONERS STOP ORDER FOR LOAN REPAYMENT TO MOTSWEDI SAVINGS AND CREDIT CO-OPERATIVE LIMITED

I, the undersigned			
Name (Block letters):		of A	ddress:
		Omang No:	
(Tick) Public Officers	Bank Stop Order	BPOPF	
Monthly instalment: P_	Repay	ment period: From	To
salary for any loan repay with Motswedi Savings Government, Commercia the due date. I further at may still be due to the So other obligations attache	yment in the amount and Credit Co-operate al Banks, and Alexand athorize the Governm ociety in the event of a d to the benefits. If the s relevant bank account	of Pive Society. I confirm the forbes for any fails ment to deduct from many cessation of society the monthly instalment	er Forbes to deduct monthly from my until my final loan settlement that I shall have no claim against the ure on their part to make payment on y financial benefits any monies that y's membership, notwithstanding any is not deducted it is my obligation to ll take appropriate action against me



Signature:	Date:	
	ACKNOWLEDGEMENT OF DEBT	
MEMBERSHIP'S NAME:	OMANG:	
MEMBERSHIP NO:	LOAN AMOUNT:	
We are pleased to advise you approved. The approved loa	u that your application for a loan of P un shall be subject to the terms and conditions below;	has been
	e obliged to pay an instalment plus interest of Phe same day of each month) until the final settlement. In	
	balance will become immediately due and payable on de	
	oard Chairperson or any other authorized official show Savings and Credit Cooperative Society LTD under the	· .
.	ch sum is in fact due and owing.	
I	acknowledge receipt of P	as loan
amount and agree to all other	er requirements stipulated in this agreement and the loan	policy.
Signed:	Date:	
(Borrower)		



QUICK LOAN DECISION FORM (OFFICIAL USE ONLY)

1.0 PERSONAL DETAILS	,	
Full Name of Applicant:		
IDRetir		
2.0 LOAN DETAILS		
2.1 Loan Approved/Rejected/Deferred		
2.2 Reasons for rejection/Deffered		
2.3 Amount Approved in figures		
2.4 Amount Approved in words		
3.0 REPAYMENT SCHEDULE		
3.1 Repayment should be In equal instalments in		Months
3.2 Equal instalments of P		
3.3 First instalments to effect on or before		
3.4 Last instalment to effect on or before		
4. AUTHORIZED SIGNATURE		
General Manager:		-
Signature:	Date:	
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