KUSCCO HOUSING FUND

KUSCCO LTD.
Kenya Union of Savings & Credit Co-operatives Ltd.
-The SACCO Family Union-

KUSCCO CENTRE
Kilimanjaro Avenue, Upper Hill
P. O. Box 28403- 00200,
Nairobi Kenya.
Tel: (020) 2730191, 2722927, 2721274
Cell: 0734 699 974, 0722 206 331
E-mail: info@kuscco.com
Website: www.kuscco.com

just a few easy steps and you could be on your way to owning your dream home!

INDIVIDUALS/JOINT BORROWERS

LOAN APPLICATION FORM

1% of Loan Applied Non-refundable Appraisal fee

CONFIDENTIAL

BRANCH/REGION:

DATE OF APPLICATION: (DD) (MM) (YY)

This is the official KUSCCO Housing Fund loan application form, which must be completed in full and all supporting documents attached.

A

PARTICULARS OF THE APPLICANT

(Please attach copy of ID and PIN Certificate)

SURNAME:

OTHER NAMES:

DATE OF BIRTH: (DD) (MM) (YY)

GENDER: (M) (F) *(Please tick as appropriate)*

MARITAL STATUS: SINGLE MARRIED DIVORCED
(Please tick as appropriate)

ID NO:

PASSPORT NO:

PIN NO:

NATIONALITY:

EMPLOYMENT

NAME OF EMPLOYER: DATE EMPLOYED: (DD) (MM) (YY)

DEPARTMENT: STATION: DESIGNATION:

PERSONAL/STAFF NO: BUILDING NAME:

BUILDING BLOCK: STREET:

OFFICE ADDRESS: OFFICE TEL NO:

FAX NO:

TOWN: COUNTY:

POSTAL CODE:

TERMS OF EMPLOYMENT: PERMANENT CONTRACT IF ON CONTRACT DURATION TO EXPIRY OF CONTRACT:

(Please tick as appropriate)

GROSS SALARY (KSHS): NET SALARY (KSHS):

RESIDENCE

RESIDENTIAL STATUS: OWNED RENTED LIVING WITH PARENTS OTHER (state)

(Please tick/state as appropriate)

HOME ADDRESS: HOME TEL NO: CELL:

FAX NO: EMAIL:

TOWN: COUNTY:

POSTAL CODE:

PHYSICAL ADDRESS-ESTATE: HOUSE NO: STREET:

NEXT OF KIN

NAME	AGE	EDUCATION (PRIMARY, SECONDARY, UNIVERSITY)	CONTACTS

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SECOND APPLICANT/PARTNER

SURNAME:

OTHER NAMES:

ID NO:

PASSPORT NO:

PIN NO:

NATIONALITY:

DATE OF BIRTH: (DD) (MM) (YY)

GENDER: (M) (F)

MARITAL STATUS: SINGLE MARRIED DIVORCED

(Please tick as appropriate)

EMPLOYMENT

NAME OF EMPLOYER:

DATE EMPLOYED: (DD) (MM) (YY)

DEPARTMENT:

STATION:

DESIGNATION:

PERSONAL/STAFF NO:

BUILDING NAME:

BUILDING BLOCK:

STREET:

OFFICE ADDRESS:

OFFICE TEL NO:

FAX NO:

TOWN:

COUNTY:

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TERMS OF EMPLOYMENT: PERMANENT CONTRACT

IF ON CONTRACT DURATION TO EXPIRY OF CONTRACT:

(Please tick as appropriate)

GROSS SALARY (KSHS):

NET SALARY (KSHS):

RESIDENTIAL STATUS: OWNED RENTED LIVING WITH PARENTS OTHER (state)

(Please tick/state as appropriate)

HOME ADDRESS:

HOME TEL NO:

CELL:

FAX NO:

EMAIL:

TOWN:

COUNTY:

POSTAL CODE:

PHYSICAL ADDRESS-ESTATE:

HOUSE NO:

STREET:

NEXT OF KIN

NAME	AGE	EDUCATION (PRIMARY, SECONDARY, UNIVERSITY)	CONTACTS

B

LOAN DETAILS

PURCHASE: ☐ CONSTRUCTION: ☐ PLOT BUYING: ☐

EQUITY RELEASE: ☐ PROJECT COMPLETION: ☐

(Please tick as appropriate)

LOAN AMOUNT (KSHS):

PURCHASE PRICE/BQ AMOUNT (KSHS)

PURPOSE OF LOAN:

REPAYMENT PERIOD: (MONTHS)

MONTHLY PAYMENTS (KSHS): (PER MONTH)

C

OTHER BORROWING

LENDING INSTITUTION	OUTSTANDING LOAN BALANCE	REPAYMENT AMOUNT	COMMENTS
TOTAL:			

D

AUTHORITY TO EMPLOYER TO RECOVER LOAN THROUGH CHECK-OFF SYSTEM

I_____ Whose particulars are as indicated above, do hereby give my employer, of P.O. BOX _____ irrevocable authority to recover from my salary payments of Kshs_____ per month over a period of _____ Months or as the Union may advice from time to time, and remit the same to KUSCCO Housing Fund for the credit of my mortgage loan account in _____ branch. In the event of my termination from employment for any reason whatsoever, I will make alternative arrangements to repay any outstanding loan amounts owing the Union.

E

PARTICULARS OF PROPERTY

LOCATION AND LAND REFERENCE NO. OF THE PROPERTY TO BE MORTGAGED	
IS THE PROPERTY LEASEHOLD OR FREEHOLD?	
IF LEASEHOLD, STATE DATE OF ISSUE OF THE LEASE	
WHERE ARE THE TITLE DOCUMENTS?	
WHAT IS THE PURCHASE PRICE?	
HOW MUCH IS THE RENTAL INCOME, IF ANY?	

IF THE APPLICATION IS IN RESPECT OF A BUILDING UNDER CONSTRUCTION

PURCHASE PRICE OF PLOT/LAND	
ESTIMATED COST OF CONSTRUCTION	
ESTIMATED COST OF WORK DONE	

VALUATION AND VIEWING REQUIREMENTS

WHO SHOULD THE VALUER CONTACT TO VALUE THE PROPERTY?	
DETAILS OF PERSON SELLING PROPERTY (VENDOR)	

F

CONSENT PURSUANT TO CREDIT REFERENCE BUREAU (CRB) REGULATIONS

I/We hereby authorize KUSCCO Housing Fund to disclose and or obtain information relating to my/our account(s) to and or from any credit reference or any other institution or third party as it deems necessary.

I/We declare we have not been adjudged bankrupt.

I/We understand that you may in your sole discretion reject this application without having to provide any reasons.

G

CUSTOMER DECLARATION AND SIGNATURES

1. I/We authorize you to obtain any information you may require relating to this application from my/our employer(s), if any and from any other source to which you may apply, each source being hereby authorized by me/us to provide you with such information. I/We undertake to notify KUSCCO Housing Fund immediately of any situation, which materially changes the representation of this application.
2. I/We confirm that KUSCCO Housing Fund has not offered any other advice regarding suitability of the property or mortgage and that I/We shall obtain independent legal advice with regard thereto.

SIGNED _____ DATE _____

SIGNED _____ DATE _____

FOR OFFICIAL USE ONLY

BRANCH MANAGER

DATE RECEIVED SIGNED

REGION MANAGER

DATE RECEIVED SIGNED

BRANCH/REGION

I confirm that I have checked and verified that the application meets the minimum requirements for KHF as indicated in the checklist below:

(Please tick as appropriate)

MINIMUM REQUIREMENTS	YES	NO
1. The application has been properly completed and no blank spaces have been left. In spaces where the information called for is not applicable, the applicant has clearly indicated N/A.		
2. Total deductions (including repayment of the requested loan) will not exceed 75% of the applicants total net incomes if the requested loan is granted/or go against the terms of the specific scheme agreement.		
3. Applicants accounts have been well conducted (if maintained within the KHF). The account is active (not dormant) and we have not had to dishonor more than two cheques in the last 6 months for lack of adequate funds in the members bank account.		
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4. Income(S) indicated in the application are correct and agree with account statement (if any) and pay slips submitted, which I have perused and consider to be satisfactory documentary evidence of such income(s)		
5. Other supporting documents (e.g. ID card, pay slips) have been submitted and I am able to verify all the key details in the application form.		
6. The applicant is over 18 years of age (not under-age).		
7. Previous loan (if any) granted to the applicant or associates have been well serviced and the account(s) has been trouble-free.		
8. Indicate current outstanding loan balances below (if any).		

BRANCH / REGION MANAGER NAME

DATE SIGNED

MORTGAGE OFFICER NAME

DATE SIGNED