



ASILI SACCO SOCIETY LIMITED

P.O BOX 49064 – 00100 NAIROBI

Email: asilisacco@yahoo.com

Website: www.asilisacco.com

DISCOUNTING FORM

Personal information

Surname..... First name Middle Name.....

Fosa A/C No.....

Employee No.....Sacco No.....ID No.....

AddressTelephone..... Employer.....

Terms of employment please tick 1. Permanent 2. Contract 3. commission 4. Pension

LOAN DISCOUNTING APPLICATION

I hereby apply for discounting loan of kshs..... amount in words)

.....to be recovered from

.....Loan.

n/b the discounted loan is 50% of BOSA loan

CUSTOMER DECLARATIONS

I hereby certify that, to the best of my knowledge and belief , all information provided for this application and in the accompanying documents is true , complete and correct . I gave irrevocable authority to FOSA to recover the above amount in full plus interest of 20% from BOSA loan being processed.

Name.....Signature.....Date.....

.....

Security Offer

Loan applied kshs.....

Official Use Only

Credit manager

I have examined the above application and the client qualify for loan type.....

Of kshs.....

NameSignature.....Date.....

Fosa Manager

Loan approved@20%.....Total.....

Name.....Sign Date.....

Internal auditor

I have verified and certified that the member can be granted kshs.....

Name.....SignDate.....