

INDIVIDUAL LOAN APPLICATION FORM

Payroll Loan: ☐ Bus Loan: ☐ Loan Type:

INDIVIDUAL LOAN APPLICATION FORM

Title (Mr./Mrs./Dr/Prof): First Name: Surname:
Maiden Name: Gender: Date Of Birth:
Marital Status: Nationality: ID Number:
Cell Number: WhatsApp: Highest Educational Qualification:
Citizenship: Email Address:
Residential Address: Permanent Address:
Period at Current Address: Years: Months:
Period at Previous Address: Years: Months:

SPOUSE AND NEXT OF KIN DETAILS

SPOUSE DETAILS

Full Name:
Phone Number:
Email Address:
Address:

NEXT OF KIN 1

Full Name:
Relationship:
Phone Number:
Email Address:
Address:

NEXT OF KIN 2

Full Name:
Relationship:
Phone Number:
Email Address:
Address:

EMPLOYMENT DETAILS

Business/Employer's Name: _____ Job Title: _____
Business/Employer's Address: _____ Date of Employment: _____
Name of Immediate Manager: _____ Phone Number of Immediate Manager: _____
Status of Employment: Permanent: ☐ Contract: ☐ Part time: ☐ Self Employed: ☐
Gross Salary: Net Salary: Employee Number:

OTHER SOURCES OF INCOME

SOURCE	GROSS	NET	INTERVALS

Are you related to any Qupa MFI employees or directors? Yes: ☐ No: ☐

If YES state the name and relationship: _____

PROPERTY OWNERSHIP

Rented: ☐ Employer Owned: ☐ Mortgaged: ☐ Owned Without Mortgage: ☐ Parents owned: ☐

LIST OF PLEDGED ASSETS

1: _____ 1: _____

2: _____ 2: _____

BANK/MOBILE ACCOUNT DETAILS

BANK	BRANCH	ACCOUNT NUMBER

LOAN WITH OTHER INSTITUTION (ALSO INCLUDE QUPA LOAN)

INSTITUTION	MONTHLY INSTALLMENT	CURRENT LOAN BALANCE	MATURITY DATE

LOAN APPLICATION DETAILS

Loan Amount: Loan Purpose:

LOAN TENURE ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 12 Others (Specify):

Would you like the following ZB life Cover? 6 Months: ☐ 12 months: ☐ 18 months: ☐ Other (Specify)

DECLARATION

I declare that the information given above is accurate and correct. I am aware that falsifying information automatically leads to decline of my loan application. I authorise Qupa Microfinance to obtain and use the information obtained for the purposes of this application from the recognised credit bureau. I authorise Qupa Microfinance to obtain references from friends, relatives, neighbors and business partners including visits to my home and verification of my assets. I undertake to provide all documents required by Qupa Microfinance and to update all records in the event of change of any personal details.

Full Name: Signature and Date:

FOR OFFICIAL USE ONLY

Received & Checked by: Name: Signature: Date:

Approved by: Name: Signature: Date:

KYC CHECKLIST

Copy of ID, Licence, Valid Passport ☐
Current Pay Slip ☐
Stamped 3 Months' Bank Statement ☐
Mobile Statements ☐
Proof of Residence/Confirmation Letter ☐

Qupa Date Stamp: