



MUST SACCO
P.O BOX 972- 60200
MERU
PHONE 0717739612
EMERGENCY LOAN APPLICATION

PART 1 APPLICATION LOAN No _____ Date.....

I..... P/M/No.....
ID/No..... Dept/Section.....
Tel:..... Ext.....
Hereby request for an emergency loan of Ksh.....in words.....
.....
To be recovered from my salary in one/two/three/four/five/six months plus interest
of 3% p.m.
Signed..... Date.....

PART II GUARANTOR

I..... P/F No.....
Sign..... Date.....

Guarantee that in case of default of this loan I will take full responsibility for the
repayment of all the loan plus interest thereon.

PART III LOAN APPRISAL

Qualify Net Pay..... 0.67.....
Checked by..... Sign..... Date.....

PART IV APPROVED

This loan has been accepted/reduced/rejected for the amount
of Ksh..... (In words).....
..... By..... if
reduced/rejected reasons are.....
Sign..... Date.....

Paid Cheque No..... Date..... P.V No.
Collected by.....
Signature.....

.....Name

Payment confirmed by..... Date.....

