



## ADVANCE APPLICATION FORM FOR NEW MEMBERS

DATE OF APPLICATION .....

### A: PERSONAL DETAILS

I ..... Of payroll no..... of ID.....

do hereby receive from Walinzi Sacco Ltd an amount of Kshs .....

(In Words) \_\_\_\_\_ to be deducted from my salary

Name of the bank/Mpesa No. (choose any) .....

Branch.....Account no /Mpesa no. ....

### B: PERSONAL CONSENT CLAUSE

I authorize Walinzi Sacco Limited to access and query my credit information from any of the licensed Credit Reference Bureau (CRB) and to receive credit reports/scores from any of the licensed Credit Reference Bureau (CRB) on behalf of myself in order to assess my credit worthiness, wherever and whenever I apply for a new credit facility and during the persistence of such facilities in order to assist Walinzi Sacco Limited to accomplish its objectives and to enforce its rights under this agreement. I further consent to my credit information, both positive and negative, being shared with a Licensed Credit Reference Bureau (CRB). I release the CRB and Walinzi Sacco Society Ltd and its officers, employees and agents from all claims, actions or proceedings of whatsoever nature and howsoever arising, suffered or incurred in connection with the CRB sending/delivering/mailling my credit report to the addresses that I have provided.

Name.....ID..... Signature .....

Mobile phone: 1) ..... 2).....

Email address ..... (in clear letters)

Date .....

Advance Guarantor (s) .....

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### C: OFFICIAL USE

Amount Approved: Kshs: \_\_\_\_\_ (In Words) \_\_\_\_\_

Committee Approval: 1) ..... 2) ..... 3) .....