

## FOSREALTY MICRO CREDIT

### LOAN APPLICATION FORM INDIVIDUAL

Loc:

Nii Papafio street. Nmai Dzorn Adjiacent melcom and opposite Godbless Plaza - Ashalley Botwe

Applicant's passport-sized photo

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Date\_\_\_\_\_

# FOSREALTY

### Micro Credit

Applicant's Signature: \_\_\_\_\_

#### LOAN APPLICATION FORM- INDIVIDUAL

APPLICANT'S INFORMATION			
First Name	Other Name(s)	Surname	
	Country of Residence		
Valid Photo ID: Voter ID Care	d Passport National ID	Driver's License	
ID Number	Date of Issue	Date of Expiry	
Date of Birth:/	(DD/MM/YYYY) Place of Birth:		
Marital Status: Single	Email Address:  Married Divorced	Widowed	
Contact Information			
Physical Address			
	Notable landmark:		
	Gender :	Male Female	
Mobile Phone No.	Other Phone No.		
Type of residence Owned	Other Phone No Renting Family residence		
Employment Information (Sal			
	ployer's Name		
	Employer's C		
Working SinceMonthly	y Net Salary (GH <b>¢</b> )Po	sition	
Business Information			
Business Name	Nature of busine	ess	
Commencement Date	Equity/Investment in Busi	ness (GH¢)	
Other Income source	Other Income amoun	t (GH¢)	
Business Location:	Notable Landmark_		
Ownership: Sole proprietors	hip Partnership Limited Li	ability	
Guarantor for other loan?	Monthly Sales(GH¢)_		
Monthly Purchases (GH¢)	Loans/Installment (GH¢)		
Occupation / Nature of Busine	ss:Po	sition	
Loan Request			
	:Purpose of Loan		
	FacilityProcessing F		
	)Repayment Frequency: da		ıly
	Cash / Bank Transfer / Mobile Mon	ey Transfer	
	y Financial Institution? Yes/No.		
If yes, which Institution?		n Loan Tenor	
Loan Amount (GHC)			
	nk TransferMobile Money		
Bank Name	Account No	Bank Branch	
0 00	ny knowledge, all of the information sub	3	
-	ion or documentation regarding my appli		-
_	documentation in a timely manner. I un	· ·	
	sing of my request including but not limite		
_	nformation it might require from any othe of Ghana concerning my personal data o		any
	assets and business affairs. I am awar		it
	esidence for the purpose of collecting add	· ·	
	n, I will do all I can to support the RO/RN	-	tion
to determine and verify the facts			

GUARANTOR'S INFORMAT	ION (1)			Guaran passpor sized pl
Title: Prof. Dr. M	fr. Mrs. Miss	Rev.		
First Name			rname	
Residential Address				
Residential Address GPS Address	Notable landm	ark:		
Postal Address:		Gender	Female	
Postal Address:  Mobile Phone No.  Nationality	Oth	ier Phone No		
Nationality	Hometown	Date of Birth:	//	
Relationship to Applicant:	Ho	w long have you know	n applicant	
Relationship to Applicant:_ Marital Status: Singl	e Married	Divorced Widow	red	
Occupation / Nature of Bu	siness:	Posi	tion	
Occupation / Nature of Bu Business Location:	No	able Landmark		
Name & address of place of Valid Photo ID: Voter	f worship:			
Valid Photo ID: Voter	ID Card Passnor	t National ID	Driver's License	
ID Number	Date of Issue	Date	of Evniry	
ID Number Basi	Date of Issue _	inlama I at Dograd	Advenced Dear	ee 🗆
Level of educationbasi	icsecondaryD	ipioinaist Degree	Auvanceu Degr	ee(
Declaration				
I,		unde	erstand that by endors	ing this
application I share full respons	sibility with the applicant,		for the repa	ayment
of this loan as agreed.				
				Guaran
Guarantor's Signature/thum			Date	passpor
<b>GUARANTOR'S INFORMATI</b>	<u>ION (2)</u>			sized pl
Title: Prof. Dr.	Mr. Mrs. Miss	Rev.		-
First Name	Other Name(s)	Su:		
First Name Residential Address	Other Name(s)	Su:	rname	
First Name Residential Address GPS Address	Other Name(s) Notable landma	Su:		
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BRANCH IN	TERNAL CONTROL OFFICER'S REMARKS
CREDIT MA	NAGER'S REMARKS
MANAGING	DIRECTOR'S APPROVAL