

ANNEX 3 YOUTH ENTERPRISE DEVELOPMENT FUND BOARD

VIJANA BAHARIA LOAN APPLICATION FORM

REGION	COUNTY		CONSTITUE	ENCY
Loan Amount:	Repayment period in months		Monthly instalment amount	
Expected Monthly Gross Income				
DESCRIBE PURPOSE OF	THE LOAN			
PERSONAL DETAILS FO	R APPLICANT			GELVE ED
				GENDER
				M F
Surname	First Name	Middle N	lame	
P.O. BoxCODE	TOWN: .	Phone No:		
Applicant's E-mail:				
ID/PP Number:	Occupation:			L STATUS
PIN:	Highest Level of Ed	ucation:	Married Si	ngle Other
Birth Date:	Number of Depende	ents:		
SPOUSE DETAILS	1		I	
Surname	First Name	Middle Name	ID/PP N	umber:
P.O. Box	DDE	ГОWN:	Phone No:	
NEXT OF KIN DETAILS				
Surname	First Name	Middle Name	ID/PP N	umber:
P.O. Box CO	DDE	ГОWN:	Phone No:	•••••
Relationship To The Borro	wer	•••••		



			AMOUNT]
					-
me Academy					
n Fees					
Y					
					11
Date Applied	Amount of Loan	Duration of Loan	Monthly Instalment	Amount outsta	anding
	Y lied for a loan b	DETAILS Branch N Y lied for a loan before? Yes (Date Applied Amount of	DETAILS Branch Name Y lied for a loan before? Yes () No (). If yes, J Date Applied Amount of Duration of	me Academy n Fees DETAILS Branch Name Y lied for a loan before? Yes () No (). If yes, please provide Date Applied Amount of Duration of Monthly	me Academy n Fees DETAILS Branch Name Account Y lied for a loan before? Yes () No (). If yes, please provide details below: Date Applied Amount of Duration of Monthly Amount outsta

(PLEASE PROVIDE A CERTIFIED BANK STATEMENT)

<u>CREDIT REFERENCE AND CONSENT TO SHARE DATA WITH CREDIT REFERENCE</u> BUREAU

In connection with this application and/or maintaining a credit facility with the **Youth Enterprise Development Fund**, I authorize the **Youth Enterprise Development Fund** to carry out credit checks with or obtain my credit information from, a credit reference bureau. In the event of the account going into default, I consent to my name(s), transaction and default details being forwarded to a credit reference bureau for listing. I acknowledge that this information may be used by banking institutions and other credit grantors in assessing applications for credit by me, associated companies, and supplementary account holders and for occasional debt tracing and fraud prevention purposes.

- a) I agree that the **Youth Enterprise Development Fund** may disclose details relating to my loan account to any third party including credit reference bureaus, if in the Lender's opinion such disclosure is necessary for the purposes of evaluating my creditworthiness or any transaction with or credit application made to the Lender or such third party, maintaining my Account with the Lender or for any other lawful purpose.
- **b**) I agree that the Lender may disclose details relating to my loan account including details of my default in

servicing financial obligations on my loan account to any third party including credit reference bureaus for the purpose of evaluating my credit worthiness or for any other lawful purpose



- c) I declare that all information provided as part of this application conforms to reality and assume full responsibility for its accuracy.
- **d)** By my signature, I hereby authorise collection of references, from any source whatsoever, concerning my person, conduct and commercial credit.
- **e**) I further authorise the issuance of reports regarding my credit history to Youth Enterprise Development Fund Board and hereby absolve the reporting party of all responsibility.

TO BE SIGNED BY APPL	ICANT	
Name	Signature	Date
Co-borrowers i.e. spouse		
Name	Signature	Date
GUARANTOR FORM (PA		
GUARANTOR PERSONAL	L DETAILS	
Guarantor Name:		
ID/PP No	Relationship to	Applicant:
Postal Address: C	Code: Town:	Phone No:
Next of Kin Name:	Relationship _	ID No
Draw/Attach Map to Reside	ence and Business	



Location:	Sub-Location:	Village:			
Employment:	Employers Nar	ne:			
Business:	Business Nam	e:			
Physical Location of Emplo	oyment/Business:				
Signature of Guarantor _		Date:			
SEAFARERS UNION OF	KENYA (SUK) GUARA	ANTEE AND UNDERTAKING			
conditions of the letter of or	ffer. We undertake to discl	offer to guarantee this loan as per the terms and ose any information regarding the applicant which irm that the applicant is a member of our union and			
Kindly confirm to the Youth Enterprise Development Fund by signing and stamping this letter that the applicant has been fully vetted by the union and in case of default, the amounts owed to the applicant in terms of benefits shall be used to offset any outstanding loan balance. Seafarers Union of Kenya (SUK) also undertakes to assist the Youth Enterprise Development Fund Board in recovery efforts in case of default.					
Name of Officer:					
ID/PP No	Designation:	PF NO			
Postal Address:	Code: Town:	Phone No:			
Street/Estate:	Building	Floor No:			
Signature	Date & Stan	np:			
In the presence of Practicing Advocate / Company Secretary	} Date				



KENYA MARITIME AUTHORITY(KMA) GUARANTEE AND UNDERTAKING

We, **KENYA MARITIME AUTHORITY** (**KMA**) offer to guarantee this loan as per the terms and conditions of the letter of offer. We undertake to disclose any information regarding the applicant which may affect the performance of this loan to Youth Enterprise Development Fund Board

Kindly confirm to the Youth Enterprise Development Fund by signing and stamping this letter that the applicant has been fully vetted by the Authority and has met all the requirements deemed necessary to access this loan. **Kenya Maritime Authority (KMA)** also undertakes to assist the Youth Enterprise Development Fund Board in recovery efforts in case of default.

Name of Officer:				
ID/PP No	Designation:		PF NO	_
Postal Address:	Code:	Town:	Phone No:	_
Street/Estate:	Building		Floor No:	_
Signature	Date & Stamp:			
In the presence of Practicing Advocate				
/ Company Secretary	} Name .			
	} Date			
	} Signatur	e and Stamp		



MAPS FOR DIRECTIONS DRAW A MAP SHOWING DIRECTION TO RESIDENCE OF APPLICANT APPLICANT SIGNATURE DATE: DATE:



FOR OFFICIAL USE ONLY	
COUNTY VETTING COMMITTEE DECISION:	CREDIT VETTING COMMITTEE
	DECISION:
Decision date and stamp:	Decision date and stamp:
Recommended Pended Declined	Approved Pended Declined
Remarks	Remarks
Name: Signature:	Name:Signature:
Date	Date
N	Name of the state
Name: Signature:	Name:Signature:
Date	Date
Dute	Dute
Name:Signature:	Name:Signature:
Date	Date
Name: Signature:	Name: Signature:
	D
Date	Date
LENDING AND INVESTMENT MANAGER	
LENDING AND INVESTMENT MANAGER	
Approved Pended P	Declined
Tended (Decimed
Remarks	
NameSignat	ure Date



July 22, 2021

THE CHIEF EXECUTIVE OFFICER, YOUTH ENTERPRISE DEVELOPMENWT FUND P O BOX 48610 00100 NAIROBI.

Dear Sir/ Madam,

Account Name

RE: BANK ACCOUNT DETAILS FOR THE APPLICANT

I advise you to use the below account details for any payment or settlement of funds. (Customer to open an account with a Commercial Bank for purpose of disbursement of Loan)

Account Number		
Bank Name		
Bank Code		
Branch Name		
Swift Code		
Yours Faithfully, Name	Signature	Date
Name	Signature	Date
Name	Signature	Date

July 22, 2021

THE CHIEF EXECUTIVE OFFICER,



YOUTH ENTERPRISE DEVELOPMENWT FUND P O BOX 48610-00100 NAIROBI.

Dear Sir/ Madam,

RE: <u>BANK ACCOUNT DETAILS FOR MEDICAL SERVICES PROVIDER (TO BE FILLED BY THE DOCTOR)</u>

I advise you to use the below account details for any payment or settlement of funds. (Doctor to provide an account for a Commercial Bank for purpose of disbursement of Medical Examination Fees)

Account Name		
Account Number		
Amount		
Bank Name		
Bank Code		
Branch Name		
Swift Code		
Yours Faithfully, Doctor's Name		
TO BE FILLED BY LOAD	N APPLICANT	
ENTERPRISE DEVELOPN	the undersigned request and authorize the YOMENT FUND BOARD to remit the stated amount being charges for meter whose account details have been provided above.	
Name		••••