

VIHIGA COUNTY GOVERNMENT



DEPARTMENT OF TRADE, INDUSTRY, TOURISM & ENTREPRENEURSHIP VIHIGA COUNTY  
TRADE AND ENTERPRISE FUND

**LOAN APPLICATION FORM (FOR INDIVIDUALS)**

**A. PERSONAL PARTICULARS**

1. Full name of applicant/s  
(BLOCK LETTERS)

.....

2. ID Number/s.....

3. Sub County..... Ward..... Sub-location.....

Village.....

4. Postal address..... email address.....

5. Name of spouse .....mobile no.....ID. No.....

Signature .....

6. Next of kin

Name .....Mobile Number .....

Signature .....Relationship.....  
(Attach copy of ID/passport).

7. Level of education.....

8. Have you received any business or technical training? Give details.

.....

9. Are you employed? If yes please specify.....

10. Other sources of income.....

**B. BUSINESS DETAILS**

1. Name of business

.....  
.....

2. Physical address of business

.....

Plot number .....

Market or Road.....

3. Legal status (registered or unregistered).....

*(If registered attach copy of the registration certificate)*

4. Form of business (Sole Proprietor, Partnership or Limited Company

.....

Name, address and occupation of each partner

.....

.....

.....

.....

.....

5. Nature of business carried on by applicant.

.....

.....

6. How long has the business been in operation?

.....

7. Number of employees regularly engaged by the business.

.....

8. Annual Turn Over.

.....

9. Average business expenses per month.

.....

10. What is the business's monthly profit?

.....

11. What is the value of the saleable stock

.....

12. Do you own the building in which you conduct the business or is it rented?

.....

13. If the business premises are rented, state the name and address of the owner of the premises.

.....

Monthly rent payable

.....

14. What books of account do you keep?

.....

Do you keep the books yourself?

.....

15. Do you have a business bank account?

.....

Preferred disbursement mode Cheque				
Bank	Branch		Account Name	Account Number

16. Total debts:-

Private .....

Business .....

### C.LOAN DETAILS

1. Amount of loan required Ksh.

.....

2. What is the purpose of the loan if granted? (Give full details)

.....

.....

3. What security will you offer?

.....

4. Have you applied for or received a loan from any other source during the past two years? Are you a beneficiary of Vihiga County Community Empowerment Fund? If yes, Have you cleared?

.....

.....

5. Names, addresses and signatures of two referees

Name	Id. No	Cell phone	email	occupation	Sign

6. Name, address and signatures of at least three guarantors

Name	Id. No	Cell phone	Amount guaranteed	occupation	sign

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**CERTIFICATE**

- a) If granted a loan, I must continue to maintain acceptable books of account; and
- b) That all the facts given above will be verified at my place of business and that my application will be rejected outright if I have given any false information.

Date .....

Signature of Applicant.....

N.B – If there is insufficient space on this form to answer all the questions fully, an additional plain sheet should be used.

*Attach (where applicable)*

- 1. *Applicants copy of ID /Passport No.*
- 2. *Business plan,*
- 3. *KRA PIN certificate,*
- 4. *Bank Account statement for the last three to six months,*
- 5. *Records of income and expenditure and any other relevant books of accounts,*
- 6. *Copies of IDs for guarantors.*
- 7. *Guarantors KRA passport photos and PIN*

*For official use only.*

**FUND ADMINISTRATOR**

Date Received-----

Recommended/Not Recommended-----

**CREDIT COMMITTEE (CHAIR)**

Date received .....

Remarks.....

Approved/Not approved-----

**CHAIRMAN VIHIGA COUNTY TRADE AND ENTERPRISE FUND BOARD**

Date received .....

Remarks .....

Chairman signature.....

VIHIGA COUNTY GOVERNMENT



DEPARTMENT OF TRADE, INDUSTRY, TOURISM & ENTREPRENEURSHIP

VIHIGA COUNTY TRADE AND ENTERPRISE FUND

**GROUP LOAN APPLICATION**

*(To be completed by group officials applying for individuals within a group or when applying for a group loan in CAPITAL LETTERS)*

A.BACKGROUND INFORMATION: APPLICATION

DATE \_\_\_\_\_

Name of Group / CBO/SACCO:		
Registration Number:		Date of Registration:
Physical Address:		
Sub-county:	Ward:	Village:
Chair Person Name:	Secretary Name:	Treasurer Name:
ID No.:	ID No.:	ID No.:
Signature:	Signature:	Signature:
_____	_____	_____
<p>a) Have you applied for or received a loan from any other source during the past two years.....</p> <p>b) If yes how much?.....</p> <p>c) Did you clear the loan?.....If yes, when .....</p> <p>b) Did you as a group or any member of the group receive Vihiga County Community Empowerment Fund loan.....</p> <p>c) If so, how much?.....</p> <p>d)</p> <p>e) Did you clear the loan?.....If yes when.....</p>		

**GROUP MEMBERSHIP PROFILE**

Gender	Number of Members:			
	Below 18Yrs	18 –35 yrs	With Disabilities	Total No
Male				
Female				
Total				

State any other sources of income / Revenue for the group/SACCO/Company

No.	Description (e.g. members subscription, table banking e.t.c,	Approximate Income	Monthly
1.			
2.			
3.			
	TOTAL		

*(Attach copies of VALID Registration Certificates)*

**B.LOAN REQUEST/ DETAILS: (BLOCK LETTERS)**

We \_\_\_\_\_

Who are Chairperson, Secretary and Treasurer of the above group, do hereby apply and guarantee to Vihiga County Trade and Enterprise Development Fund for a loan of (shillings \_\_\_\_\_ (amount in words \_\_\_\_\_) for the purpose

of;.....

*(Attach minutes of the General Meeting which approved the loan request)*

**C. LOAN SECURITY:**

Tick where applicable

Loan Below Ksh. 500,000/-	Loan Above Ksh. 500,000/-
Provide at least five (5) guarantors, who should sign an agreement to guarantee your loan. Stock chattels, title deeds, log books, machinery(Attached form should be used)	Provide a land title deed of value not less than the amount requested and log book machinery/stock. (Attach a copy of the title deed, log book and receipt of machinery)

D.BANKING INFORMATION:

Bank Name:	Branch Name:
Account Name:	Account Signatories: ( Name & Signature) 1..... 2..... 3..... 4. ....
Account No:	

We confirm that the above banking information is correct.

Signature \_\_\_\_\_  
 (secretary)

Stamp \_\_\_\_\_

*(Attach the Latest Three Months Certified Bank Statement)*

Preferred disbursement mode Cheque

Bank	Branch	Account Name	Account Number

- NB: Attach a list of group members, ID Numbers, contacts, signatures  
 Copy of ID for each member  
 Copy of updated registration certificate duly stamped.  
 Approved minutes for the group indicating intentions to borrow  
 Copy of three months bank/Mpesa statements  
 Copy of KRA Pin certificate.  
 Business plan  
 Books of accounts/Business records***

***6. Name, address and signatures of at least five guarantors***

<b><i>Name</i></b>	<b><i>Id No</i></b>	<b><i>Tel No</i></b>	<b><i>Amount Guaranteed</i></b>	<b><i>Occupation</i></b>	<b><i>Sign</i></b>

*For official use only.*

**FUND ADMINISTRATOR**

Date Received-----

Recommended/Not Recommended-----

**CREDIT COMMITTEE (CHAIR)**

Date received .....

Remarks.....

Approved/Not approved-----

**CHAIRMAN VIHIGA COUNTY TRADE AND ENTERPRISE FUND BOARD**

Date received .....

Remarks .....

Chairman signature.....