



## CREDIT FACILITY APPLICATION FORM

(PLEASE FILL IN DETAILS IN CAPITAL LETTERS)

The Manager  
**Paramount Bank Limited**  
 Nairobi

Date: \_\_\_\_\_

Branch: \_\_\_\_\_

Dear Manager,  
 I/We wish to apply for credit facilities and give full information about my/our Business position for your consideration.

**CONSTITUTION/LEGAL STATUS** **CREDIT FACILITY TYPE**

- Individual
- Sole Proprietorship
- Unlimited Partnership
- Limited Partnership
- Society/Association/Club/  
Religious Organization
- Other (Please Specify)

- Overdraft
- Loan/Term Loan
- Bill Disc. /Others (Please Specify)

\_\_\_\_\_

(Please attach certified copy of appropriate evidence of Official Registration)

**BORROWER INFORMATION**

**SECTION 1: INDIVIDUAL**

Name of Applicant (Individual):  
 \_\_\_\_\_

Name & Address of Employer:  
 \_\_\_\_\_

Residential/Physical Address:  
 \_\_\_\_\_

Investments:  
 \_\_\_\_\_

Postal Code:  
 \_\_\_\_\_

Average monthly turnover (In Thousands Only):  
 \_\_\_\_\_

Registered Office Address:  
 \_\_\_\_\_

Particulars of Assets:  
 \_\_\_\_\_

Office Telephone Number:  
 \_\_\_\_\_

\_\_\_\_\_

Residential Phone Number:  
 \_\_\_\_\_

\_\_\_\_\_

If self-employed, Name of Propriety Concern/Firm:  
 \_\_\_\_\_

**SECTION II: LIMITED COMPANIES**

Name of Applicant/Entity (Company/Business):

\_\_\_\_\_

Business/Company Registration Number:

\_\_\_\_\_

Registered Business Address/Residential Address:

\_\_\_\_\_

Date of Incorporation/Registration (dd/mm/yyyy):

\_\_\_\_\_

Postal Code:

\_\_\_\_\_

Branches:

\_\_\_\_\_

Registered Office/Physical Address:

\_\_\_\_\_

Number of Employees (Including Owners):

\_\_\_\_\_

Office Telephone Number:

\_\_\_\_\_

Tax Certificate/KRA PIN (Company & Directors):

\_\_\_\_\_

Residential Phone Number:

\_\_\_\_\_

- I. Borrowing Powers of the Company:
- II. Borrowing Powers of the Directors:
- III. Details of Charges Registered with Registrar of Companies:  
(State if None)

\_\_\_\_\_

- IV. Copies of Audited/Unaudited Balance sheets for the last three years attached.
- V. Authorised Share Capital and Paid-up Capital of the Company.
- VI. List of present shareholders, with details of shareholding.

<b>NAMES OF DIRECTORS/ SHAREHOLDERS/ PARTNERS/PROPRIETORS</b>	<b>ADDRESS</b>	<b>PHONE</b>	<b>NATIONALITY</b>	<b>%SHARE IN BUSINESS</b>

Nature of Business:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION III: INVESTMENT IN BUSINESS**

Please give full details of your facilities with other banks/financial institutions  
(To provide with statement of accounts for last one year – If facility exists.)

<b>NAME OF BANK/ FINANCIAL INST.</b>	<b>BRANCH</b>	<b>ADDRESS</b>	<b>PHONE</b>	<b>NATURE OF FACILITY</b>	<b>SECURITY</b>	<b>O/STDG</b>	<b>AMOUNT IN KES.</b>

**OTHER ASSETS/REAL ESTATE ETC.**

<b>DESCRIPTION</b>	<b>LOCATION</b>	<b>VALUE</b>	<b>DATE OF LAST VALUATION</b>	<b>WHETHER ALREADY CHARGED</b>

**ALLIED FIRMS/COMPANIES**

<b>NAME &amp; ADDRESS</b>	<b>BANKERS/BRANCH</b>

**BUSINESS TURNOVER**

<b>1. LOCAL TRADE</b>			
<b>2. FOREIGN TRADE</b>			
<b>3. TOTAL TRADE</b>			
<b>4. NO. OF EMPLOYEES</b>			
<b>5. ANNUAL PROFIT</b>			

TOTAL AMOUNT OF LOAN/FACILITIES AND PERIOD WITH PARAMOUNT UNIVERSAL BANK KSHS.

\_\_\_\_\_ FOR \_\_\_\_\_ MONTHS

PURPOSE OF BORROWING:

SCHEDULE AND MODE OF REPAYMENT:

REFERENCE: \_\_\_\_\_

**GUARANTOR (S)**

NAME	ADDRESS	ID CARD/NATURE OF BUSINESS	PHONE

- Guarantor to provide the Bank with background information
- I/We hereby declare that whatever stated above is true and correct.

**REFERENCE**

NAME	ADDRESS	PHONE NUMBER

**FACILITY/IES REQUIRED**

NATURE OF FACILITY	AMOUNT	PERIOD

**SECURITIES OFFERED**

TYPES OF SECURITY (Give details)	VALUE

**PURPOSE OF WHICH FACILITIES REQUIRED:**

**THE FOLLOWING DOCUMENTS TO BE ATTACHED WITH THIS APPLICATION**  
(TICK WHERE APPLICABLE)

**LIMITED COMPANIES APPLICATION**

- Certified Copy of M/A & Certificate of Incorporation
- Last 3 years Balance Sheet
- Latest Management Accounts
- Cash Flow reflecting payments
- Feasibility Report of the Project
- Copies of the Title Deed and Site Plan
- Valuation Report
- Bank Statements for six months
- Copy of Trade License
- Copy of ID. Card/Passport of Director
- 2 Passport size photographs of each Director and Guarantor
- Insurance Policy
- Map/Location- Physical Address
- Road License (s)
- Log Book (s)
- Blank Transfer forms (3 per vehicle)
- Copy of PIN Certificate
- Duplicate Key (s)
- Invoice/Sale Agreement
- Other Security Documents

**FOR PARTNERSHIPS/INDIVIDUALS**

- Copy of ID Card/Passport of Borrower/Guarantor
- Copy of Entry Permit
- Copy of Trade License
- Copy of Business Registration
- Last 3 years Balance Sheets
- Cash Flow
- Copies of Title Deed
- Valuation Report
- 2 Passport size Photographs of Borrower and Guarantor
- Invoice/Sale Agreement
- Insurance Policy
- Copy of ID Card/Passport of Directors
- Map/Location – Physical Address
- Road License (s)
- Log Book (s)
- Blank Transfer forms (3 per vehicle)
- Copy of PIN Certificate
- Duplicate Key (s)
- Other Security Documents
- 12 Month Bank Statements

**REPAYMENT:**

I/We hereby declare that the particulars stated above are true and correct to the best of my/our knowledge.

**NAME & SIGNATURE OF APPLICANT (S)**

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_