



UWEZO FUND LOAN APPLICATION FORM

This form is to be completed in Triplicate (original to be sent to Constituency Uwezo Fund Committee, a copy for the group and a processed copy to be sent to the National Secretariat)

1. GROUP DATA

Group Name.....P. O. Box.....Code.....Town.....
 Date Group Formed.....Date of Registration.....
 Reg.No./SerialNo.....Bank.....Branch.....
 Date opened Bank AccountBank Account No.....

2. LOCATION OF THE GROUP

County.....Sub-County/Constituency.....
 Ward.....Location.....Sub-location.....
 Name of Chief/Asst. Chief.....Telephone No.....

I certify that I know the members of the group and they are of good conduct to access public funds. I therefore recommend them for Uwezo Fund.

Signature.....Official Chiefs' Stamp..... *(Mandatory)*

ii) LOCATION OF BUSINESS

Township/Estate/Village.....Plot No./Street.....
 Nearest Church/Mosque/Primary School to the business from CDF offices.....

3. MEMBERSHIP PROFILE

Gender	No. of Members	Members with Disability
Male		
Female		
Total		

4. BRIEF BACKGROUND OF THE GROUP

- (i) Purpose/Objectives (e.g. improve economic well-being of members).....
- (ii) Key Activities.....
- (iii) Achievements.....
- (iv) Challenges.....

5. AMOUNT OF THE LOAN APPLIED FOR

Loan applied for Kshs.....
 (Amounts)..... (in words)
NB (Refinancing is subject to repayment of the first loan)

Loan Purpose.....Proposed repayment period..... (months)

GROUP CREDIT HISTORY (including loans with other financial/bank/ institutions/government)

Name of the Institution	Date loan granted	Amount granted	Payment frequency	Period (months)	Status (Loan Balance)
1.					
2.					
3.					

6. PROPOSED BUSINESS INFORMATION

- a. Business Type (Tick): Trade..... Service..... Manufacturing..... Agriculture..... Others.....
 If others please describe.....
- b. Is the business (Tick) (i) Start up (New)..... (ii) Expansion.....
- c. If expansion number of years in operation.....
- d. How is the business performance?

INCOME	AMOUNT Kshs.	EXPENSES (Kshs.)	AMOUNT
Average Business sales per month		Average Purchases per month	
		Rents for your business premises	
		Salaries/Wages for your workers	
		Transport for business stock	
		Utilities (Water, phone, electricity at the business premises)	
		Others expenses e.g. license	
Total Income		Total Expenses	
		Net surplus/Deficit (Kshs)	

- a. Does the group have a joint/common business? (Tick one) Yes.....No.....
 - b. If NO, state whether you want to start one jointly or each individual will own his or business.....
- Business Location.....

7. INDIVIDUAL MEMBERS UNDERTAKING THE BUSINESS

S/No	Name of Owner	ID No.	Mobile Number	Next of Kin	Relationship	Mobile Number	Sub-location
	E.g. Jane Okumu	xxxxxx	0721xxxx	John Okumu	Husband	0722xxxx	
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

8. LOAN CONDITIONS

i) Repayment period.....Months (Maximum 24 months)

Please attach 3 current signed minutes of group meeting(s) showing members monthly contributions and attendance

9. MEMBERS GUARANTEE AND COMMITMENT TO LOAN REPAYMENT (MANDATORY)

We, the undersigned hereby:

- (i) Confirm that we are member ofGroup.
- (ii) Declare that the information provided herein is true to the best of our knowledge. We further authorize Uwezo Fund to verify the information given herein and make reference provided here in.
- (iii) We agree that we are jointly and severally liable for repayment of loan in the event of default and
- (iv) We shall not be eligible for additional loans unless the amount in default has been cleared in full.

S/No	Name	ID No.	Telephone No	Signature
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				

12.				
13.				
14.				
15.				

(‘Default’ shall be defined as (a.) missing a single loan payment or any part of such payment or (b.) the use of loan proceeds for any purpose other than those as described in the loan Application)

10. LOAN TERMS AND CONDITIONS BEFORE DISBURSEMENT

We, the undersigned, being the validly elected leaders of the group hereby commit the group individually and jointly to repay the loan amount disbursed to the Uwezo Fund appointed Account in.....equal installments after themonth’s grace period.

We also confirm that the above information is true and authorize the Fund to:

- i) Share information of our credit history with Credit Reference Bureaus
- ii) Confirm bank details with our bankers as and when necessary
- a) Chairperson.....ID No.....Tel No.....Signature.....Date.....
- b) Secretary.....ID No.....Tel No.....Signature.....Date.....
- c) Treasurer.....ID No.....Tel No.....Signature.....Date.....

NB: Please attach 3 current signed minutes of group meeting(s) that agreed to the terms and conditions of the borrowing

FOR OFFICIAL USE UWEZO FUND

11. RECOMMENDATIONS FROM CONSTITUENCY UWEZO FUND COMMITTEE

(Tick) Approved..... Declined..... Deferred

Reasons for recommending approval/decline/pending

.....

- 1. Chairperson.....Signature.....Date.....
- 2. Secretary.....Signature.....Date.....
- Minute No.....Date.....

We have validated and technically assessed the proposal. We recommend as follows:

Approved: Amount Ksh..... (in words).....
 Repayment period.....Months

Signed by Chairperson.....

Witnessed by Secretary.....

Minutes signed by all CUFC members sitting on date...../...../20...../place.....

12. CHECKLIST OF DOCUMENTS ATTACHED

1. A duly filled in application form
2. A signed guarantee form executed by each member of the group individually committing to repay the loan requested by the group.
3. Copy of registration certificate from the department of social services, Cooperatives or the Registrar of Societies
4. Duly signed list of members with ID and telephone numbers
5. Evidence that group/institution is based and operational at the constituency it seeks to apply for funding.
6. Evidence table banking structure or any other group fund structure where members make monthly contributions according to the groups’ internal guidelines (evidence of monthly contributions shall be a requirement), including:
 7. Evidence on the length of time the group has been in existence.
 8. Evidence on the total amount contributed by the group
 9. Evidence of the current status of contribution; and
 10. Bank account statement in the name of the group.
 11. Evidence of table banking or any other group savings structure
 12. Proposed business plan
13. Groups will be required to sign an agreement with the Constituency Uwezo Fund Management Committee on the terms of the loan repayment prior to release of funds.

I, Mr./Mrs./Ms..... (Secretary CUFC).....Constituency

Confirm that all the documents are attached and the relevant information is captured.

Signed.....Date...../...../20.....

Application No.....

Date Recommended.....

Date Received.....

Date sent to Nairobi.....

This form is not for sale but can be copied, printed and photocopied

Ahadi Yetu – Kazi Kwako

.....*Tear off*
Only applies if there is no integrated MIS system

Disbursement Voucher *(to be forwarded to the disbursing office)*

Group Name.....Constituency.....

Amount Disbursed: Ksh.....(in words).....

Repayment period.....Months; Grace period.....Months;1ST installment date.....

Installment Amount Ksh.....Disbarment mode (Tick) Mpesa.....Cheque.....No.....

Disbursing officer Name.....Sign.....Date.....

Should have official stamp the disbursing office