



**PETRA MICRO FINANCE BANK  
PERSONAL LOAN APPLICATION FORM**

ACCOUNT OFFICER		A/C NO.		BALANCE:		
<b>PERSONAL DATA</b>						
SURNAME:			OTHER NAMES:			
HOME ADDRESS:				NO OF YEARS AT THIS ADDRESS		
TYPE OF ID:			ID NUMBER:			
TELEPHONE (HOME AND MOBILE):						
DATE OF BIRTH:		AGE:	PLACE OF BIRTH:			
OCCUPATION:			EDUCATIONAL QUALIFICATION:			
SEX:	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE	MARITAL STATUS	<input type="checkbox"/> SINGLE	<input type="checkbox"/> MARRIED	<input type="checkbox"/> OTHERS
NAME OF SPOUSE:			OCCUPATION OF SPOUSE:			
NUMBER OF DEPENDENTS AND NAMES						
HOME OWNERSHIP: <input type="checkbox"/> OWNED <input type="checkbox"/> RENTED <input type="checkbox"/> MORTGAGED <input type="checkbox"/> SHARED/OTHERS						
<b>BUSINESS ACTIVITY:</b>						
TYPE OF BUSINESS (RETAIL, WHOLESALE, SERVICES, MANUFACTURING):						
BUSINESS NAME:			BUSINESS ADDRESS:			
BUSINESS TELEPHONE(S):				NO. OF YEARS IN THE BUSINESS:		
BUSINESS PARTNER (IF ANY) AND OWNERSHIP %:				NO. OF EMPLOYEES:		
ESTIMATES BUSINESS ASSETS:				ESTIMATED MONTHLY SALES:		
IS YOUR BUSINESS REGISTERED/LICENSED? <input type="checkbox"/> YES <input type="checkbox"/> NO				REGISTRATION LICENSE NO:		
SOLE PROPRIETOR/PARTNER/LIMITED COMPANY/COOPERATIVE:						
WHO LOOKS AFTER YOUR BUSINESS WHEN YOU ARE SICK OR AWAY?						
ARE YOU INVOLVED IN ANY OTHER BUSINESS ACTIVITY? <input type="checkbox"/> YES <input type="checkbox"/> NO				IF YES, WHAT TYPE OF BUSINESS?		
ARE YOU EMPLOYED APART FROM OWNING A BUSINESS? <input type="checkbox"/> YES <input type="checkbox"/> NO						
STATUS OF EMPLOYMENT: <input type="checkbox"/> REGULAR <input type="checkbox"/> CONTRACTUAL <input type="checkbox"/> OTHERS			MONTHLY INCOME FROM EMPLOYMENT:			
NAME OF EMPLOYER:			TEL. NO. OF EMPLOYER:			

ADDRESS OF EMPLOYER:		NAME OF MANAGER:	
<b>LOAN INFORMATION</b>			
PURPOSE OF LOAN:		AMOUNT REQUIRED:	
TENURE	REPAYMENT PLAN <input type="checkbox"/> DAILY <input type="checkbox"/> WEEKLY <input type="checkbox"/> MONTHLY		
DO YOU HAVE ANY OUTSTANDING LOAN IN ANY BANK? <input type="checkbox"/> YES <input type="checkbox"/> NO		DOES YOUR SPOUSE HAVE ANY OUTSTANDING LOAN IN ANY BANK? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, HOW MUCH IS YOUR OUTSTANDING LOAN? _____		IF YES, HOW MUCH IS HIS/HER OUTSTANDING LOAN? _____	
NAME OF CREDITOR/SUPPLIER		NAME OF CREDITOR/SUPPLIER:	
NAME OF AT LEAST ONE CREDITOR/SUPPLIER THAT YOU HAVE BORROWED FROM , IN THE PAST ( <i>THIS IS AN ADDED ADVANTAGE</i> )			
1. 2.			
ANY CURRENT, SAVINGS OR DEPOSITS ACCOUNTS? YES                      NO		IF YES, AMOUNT? NAME OF BANK OR INSTTUION?	
SOURCE OF REPAYMENT		SECURITY OFFERED	
<b>AUTHPRIZATION</b>			
<p>I confirm that the above information is true and correct to the best of my knowledge. I am aware that any false statement may be an immediate cause for denial of this loan. In concession with this application, I authorize the MFI to obtain such other information as may be required. This authorized includes obtaining information from suppliers, commercial Banks, rural Banks and other creditors while releasing these institutions from liability under any Bank secrecy laws. Also I agree to abide by MFI's policies, rule and regulations. Please debit my account with the appropriate Bank charges.</p> <p>Signature of Applicant _____ Date/Place _____</p>			

**FOR OFFICE USE ONLY**

<b>ELIGIBILITY CRITRIA VERIFICATION</b>				
Client >18 Year < 60	Nigerian citizen	Valid means of Identification with correct name and spelling	Permanent Business Location	In same business as that of the loan request for at 6 months.
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>ACCOUNT OFFICER NAME:</b>				
<b>SIGNATURE:</b>			<b>DATE:</b>	