

CUSTOMER LOAN REQUEST FORM



Guaranty Trust Bank (Ghana) Limited

PERSONAL INFORMATION

Name of Applicant:

Title Last Name Middle Name First Name Maiden Name

Current Residential Address:

Residential Status: Owner Tenant Employer Provided Mortgaged Family House

Time at Current Address: From _____ to date E-mail address: _____

Telephone Numbers:

Home Office Mobile

Gender M F Date of Birth Marital Status: Single Married Divorced Widowed

PROFESSIONAL INFORMATION

Job Position: Snr. Staff Jnr. Mgt. Snr. Mgt. Exec. Mgt. Others If others specify

Name of Current Employer: Business Telephone:

Business Address:

Length of Service: Annual Income (GHS):

First time request? (Please tick here) Yes No Purpose of Loan:

Loan Amount (GHS): Proposed Tenor:

Kindly state all existing credit obligations

BANK NAME	BRANCH	ACCOUNT NUMBER	MONTHLY REPAYMENT	MATURITY DATE	BALANCE OUTSTANDING (GHS)

Applicant Signature _____ Date:

FOR OFFICIAL USE ONLY

Branch: Account Number:

Loan Amount (GHS): Fees (GHS):

Loan Tenor (Months): Monthly Repayment (GHS):

Insurance Company: Insurance Premium (GHS):

(Name/Signature/Date)

Account Officer

(Name/Signature/Date)

Relationship Manager

(Name/Signature/Date)

Group Head

(Name/Signature/Date)

Divisional Head (MARKETING)

(Name/Signature/Date)

Divisional Head (EWRMG)

(Name/Signature/Date)

Divisional Head (GIS)

Disbursement:

CAD: _____ Prepared by: (Name/Signature/Date) _____ Authorised by: (Name/Signature/Date) _____

DOMOPS: _____ (Name/Signature/Date) _____ (Name/Signature/Date) _____

PRIVATE AND CONFIDENTIAL

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Guaranty Trust Bank (Ghana) Limited

DECLARATION AND ACCEPTANCE

I hereby declare that all the information given by me is true and complete.

I understand that this application will go through a vetting process and should my loan be approved, a loan account for the amount requested will be created in my name.

I understand that interests on this facility will be based on the prevailing variable interest rate for the entire period.

I agree to inform Guaranty Trust Bank (Ghana) Limited should my residential address and/or employment status change and I further undertake that I shall NOT change my salary pay point or stop sending my repayment through Guaranty Trust Bank (Ghana) Limited, until I have paid off the loan in full.

I also agree to be bound by the Terms and Conditions attached.

Applicant Signature _____

Date:

D	D	M	M	Y	Y
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AUTHORITY TO EMPLOYER

I authorize you to pay all my terminal benefits and/or gratuity which I may be entitled to towards the payment of my outstanding loan, should my employment cease for any reason.

This arrangement will remain in force until the loan granted me is paid in full.

Applicant Signature _____

Date:

D	D	M	M	Y	Y
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EMPLOYER'S UNDERTAKING



Guaranty Trust Bank (Ghana) Limited

The Head,
Human Resources
Accra.

Dear Sir/Madam

Consumer Loan Application for..... (Employee Name).....

We have received a request for a consumer loan from the above named employee of your organization.
In order to process the request, we require confirmation of certain information provided by him/her as follows:

You are assured that information provided will be treated in strict confidence and without prejudice to your organization.

INFORMATION TO BE CONFIRMED

Job position: _____ Length of service: _____

Annual Compensation Package (GHS): _____

List Existing credit obligation/s deducted at source

BANK NAME	BRANCH	ACCOUNT NUMBER	MONTHLY REPAYMENT	MATURITY DATE	BALANCE OUTSTANDING (GHS)

TO BE COMPLETED BY EMPLOYER

We confirm that the above is a full time employee of this organization and that we shall act in consonance with the written instructions above. In addition, we shall notify you within three (3) working days should this employee's service be terminated by this organization for any reason or should the employee resign from his/her employment.

We affirm that the above stated information as provided and attested to by the applicant is true and the applicant's terminal benefit accrued as at today is GHS.....

This confirmation is given in good faith and without prejudice to the organization.

We also confirm that we will not accept any instruction to discontinue salary or loan payments to Guaranty Trust Bank (Ghana) Limited without prior written confirmation from Guaranty Trust Bank (Ghana) Limited.

We hereby covenant to:

1. To continue to pay all the applicant's salaries, benefits, emoluments, and in case of exit from our organization, terminal benefits, into GTBank account number.....belonging to the applicant.
This shall continue until we receive written confirmation from GTBank stating that the loan sum has been fully liquidated.
2. Inform you of any loan applied for by the applicant subsequent to the above
3. Notify you of the exit of the applicant from the company with immediate effect, and subsequently
4. Apply net terminal benefits accruing to the above named employee to his/her account with you in order to discharge whatever obligation owed to you under the above scheme.

Organization: _____

Name of Company Official & Position: _____

Signature: _____ Date:

D	D	M	M	Y	Y
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Please affix
Official stamp

Applicant Name and Signature

Date

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