



# MAGADI SACCO SOCIETY LTD

PAM View Building, P.O Box 13 00205 Magadi

Tel: 020-6999258/350 Fax 020-6999258

Mobile: 0722272252 /0714961101

Email: [info@magadisacco.co.ke](mailto:info@magadisacco.co.ke), [ideas@magadisacco.co.ke](mailto:ideas@magadisacco.co.ke),

Website: [www.magadisacco.co.ke](http://www.magadisacco.co.ke),

## DIVIDEND ADVANCE FORM

SERIAL NO.....

DATE.....

### APPLICANT'S PARTICULARS

1. Full Name.....ID No.....  
(As in National ID card)

2. Account No.....Payroll No.....

Tel No.....Mobile NO:.....E-Mail Address.....

Home Address.....Department/Business.....

County .....

i) Terms of service (for employee of Tata Chemicals Magadi Co. Ltd and Magadi Sacco Society Ltd) or state otherwise

.....

(Specify: contract, Temporary, Permanent & pension able or business/contract employment).

### ADVANCE PARTICULARS

a) Advance applied for (Kshs) .....recoverable during dividend/rebates payout

(Amount in words).....

.....

### SECURITIES SUBMITTED AS GUARANTEE FOR THE LOAN

1. Dividend/rebates payout for the year ended 2019

### APPLICANT'S DECLARATION

a) I ..... hereby declare that the foregoing particulars are true to the best of my knowledge and on personal behalf agree to abide by the society's advance policy and any variation by the committee in respect of the above items. I, therefore authorize the necessary deduction to be made from my account until full repayment of this advance.

b) I pledge to notify the society in writing of any changes in my address and any other personal particulars that are likely to affect the repayment of this advance

c) I understand that dividend advance interest of 10% is recovered upfront on the amount disbursable.

d) I understand that the society may take any appropriate action against me if I default in repaying this advance.

Signature..... Date.....



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## BORROWER

I .....of Box..... Declare that, I have read and understood the lending conditions set above and hereby agree to be bound by all provisions of lending conditions.

Signed.....Date.....

Witness Name:.....Account No.....

Signature:.....Date:.....Tel No:.....

## ADVANCE APPRAISAL (FOR OFFICIAL USE ONLY)

### Other Sacco Liabilities recoverable

FOSA ADVANCE Kshs.....

BOSA LOANS Kshs.....

Advance recommended (Kshs) .....Repayable during dividend payout at 10% interest

Principle repayment (Kshs) .....Interest.....Total repayment.....

I certify that the information given above is correct. Comments: .....

Credit Officer.....Signature.....Date.....

## CREDIT TEAM LEADER'S COMMENTS

Signature .....Date.....

## CHIEF EXECUTIVE OFFICERS COMMENTS

Signature .....Date.....