CORPORATE LOAN APPLICATION FORM





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| 1. BUSINESS DETA | ILS | | | |
|---|--|--|---|--|
| Type of Loan | Working Capital | LPO Financing | Bridge Finance | |
| Business Name | | | · · · • | Business Tel Number |
| Physical Address | | | | |
| Postal Address | | | | |
| Website Address | | Certificate Of Inco | rporation | Number of Employees |
| Email Address | | Date Of Incorpora | ation TIN | |
| Type of Business: Current Bankers: 2. CURRENT DIREC | Sole Propreitor Li Bank Bank Bank | mited Liability Partners | ship Other (Please Specif Branch Branch Branch | fy) Authorised Signatory Authorised Signatory Authorised Signatory |
| Name | | | ame | |
| Name | | N; | ame | |
| 3. DETAILS OF KEY | DIRECTORS | | | |
| (A) Mr. Surname Date of Birth D D M M Spouse Name | ☐ Mrs. ☐ Ms. ☐ Age | Miss. Dr. Prof. First Name(s) and Marital Status Single | d Other Name(s) | fy) |
| Spouse Place of W | ′ork | Social Club (If Any | L Dependents | Contact Number - Mobile |
| Email Address | | Accommodation | is: Owned Re | ented Mortgaged |
| Postal Address | | Religion: |]IslamTraditionalOt | ther (Please Specify) |
| Length of stay at C | urrent Address Place | of Worship | | |
| Length of stay at P | revious Address Branc | h/location | TIN | |
| Type of ID Card: | Passport Voter | ID Driver's License | Date of Issue | Date of Expiry |

| (B) Mr. Mrs. Ms. Miss. | Dr. Prof. Other (Please Specify) |
|--|---|
| Surname | First Name(s) and Other Name(s) |
| Date of Birth Age D Image: Market | Marital Status |
| Spouse Name | Number of Number of Contact Number - Office Children Dependents Image: Contact Number - Office |
| Spouse Place of Work | Social Club (If Any) Contact Number – Mobile |
| Email Address | Accommodation is: Owned Rented Mortgaged |
| Postal Address | Religion: |
| Length of stay at Current Address Place of Worship | |
| Length of stay at Previous Address Branch/location | TIN |
| Type of ID Card: Passport Voter ID | Date of Issue Date of Expiry Driver's License D / M / Y Y |

4. FACILITY DETAILS

| Loan Amount Requested (GHS) | | | | |
|--|-------------------|--|--|--|
| Proposed Installment (GHS) | | | | |
| Proposed Collateral | | | | |
| Purpose | | | | |
| Brief Description of Source of Repayment | | | | |
| Net Monthly Income | Tenor (in months) | | | |

5. COLLATERAL TYPE

| | Purchase Price (GHS, USD) | Market Value | Force Sale Value |
|------------------------|---------------------------|--------------|------------------|
| Land | | | |
| Building | | | |
| Machinery/Equipment | | | |
| Accounts Receivable | | | |
| Inventory | | | |
| Vehicle (Type) | | | |
| Other (Please Specify) | | | |

6. EXISTING LOAN DETAILS

Collateral Documentation

| Name of Lending Institution | Total Outstanding Balance | Total Monthly Commitment |
|-----------------------------|---------------------------|--------------------------|
| | | |
| | | |
| | | |
| | | |

7. APPLICANT / BORROWER DECLARATION

We certify that to the best of our knowledge this company has not been involved in any fraud case and that there are no legal proceedings against the company for fraud (this portion should be signed by at least two directors)

| Director | | | Director | | |
|--|----------------------|-----------------------------------|-----------------------|------------------------|-------------------------------------|
| Signature | | | Signature | | |
| | | | | | |
| | | | | | |
| We | | | a customer of Form | ns Capital Ltd hereby | authorize Forms Capital to |
| a. Submit Act 726 | | company's credit transaction wi | ith Forms Capital L | td. to a credit bureau | ı licensed under Credit Report Act, |
| b. Obtain c | redit reports on the | e company from a credit bureau | licensed under this | s act for the purpose | of credit Management. |
| The appl | | the above information is true ar | nd valid. Any false i | information can and | will bring legal sanctions against |
| Name of M | lanaging Director | | | Signature | |
| | | | | Date D | |
| 8. REQUIR | EMENTS | | | | |
| | | | | Yes / No | Comment |
| Completed | Standard Application | on Form A (with KYC requiremen | its) | | |
| Board Reso | olution | | | | |
| Certificate | of Incorporation | | | | |
| Certificate | to Commence Busii | ness | | | |
| Regulation | s of Company | | | | |
| Manageme | ent/Audited Accoun | ts (if any) | | | |
| Bank State | ments (the last six | months) | | | |
| Company p | rofile with key mar | agement | | | |
| Passport p | ictures of key Direc | tors who signed Board Resolutio | on | | |
| ID cards of | key Directors who | signed Board Resolution | | | |
| Utility bills of key Directors who signed Board Resolution | | | | | |
| Directions t | to Office (Sketch Ma | ap) | | | |
| Copy of /In | voices | | | | |
| Letter of Jo | int Payment (Unde | rtaking) from Employer (If applic | able) | | |
| | Award Letter /Con | | | | |

9. TERMS AND CONDITIONS

GRANTING OF CREDIT FACILITIES

Forms Capital Limited (FCL) may approve or decline an application for credit facility at its absolute discretion. FCL is not obliged to disclose any reasons for decline or approval of an application.

PURPOSE: The facility shall not be used for any purpose except that permitted. However, failure to comply shall not prejudice any rights of FCL

INTEREST: Interest on all credit facilities will be charged on a monthly basis, and will be calculated on amortized balance basis. There shall be equal monthly repayment of the loan amount. FCL has the right to change its interest rate applicable on the credit facility to reflect changes in the prevailing base rate; interest will be charged on all outstanding amount owed by the applicant.

CHARGES, FEES AND PENALTY RECOVERY: FCL reserves the right to recover charges and fees payable.

DISBURSEMENT: I understand and agree that the loan arrangement/facility fee will be deducted from the loan and the balance paid to me in the form of bank cheque issued in my name.

DEFAULT CLAUSE: In the event of default in making any one repayment on the due date, the outstanding and principal amount of the loan and the accrued interest shall become immediately due and payable. A statement or demand signed by an authorized officer of the FCL shall be conclusive evidence that a sum is due and owed by you. In the event of default fcl reserves the rights to transfer the defaulting account to our debt recovery agency to recover outstanding debt and negative listing of the applicant with the credit bureau.

INSURANCE: FCL will take insurance to cover death and permanent disability of individual applicants. The insurance premium shall be added onto the repayment amount to be paid over the loan period.

VARIATIONS: FCL will advise the applicant of any change in minimum lending rate, charges, or fees by publication of a notice in a local or national newspaper or by a notice at its branches or by statement messaging. The applicant understands and agrees that FCL is not obliged to obtain the applicant's signature for receipt of such communication.

SET OFF AND CONSOLIDATION RIGHTS

FCL may set off any amount due against any sum owing by the borrower (whether or severally to FCL) and otherwise combine and consolidate all or any of the accounts of the borrower with FCL and whether deposit, loan or any other nature and whether accounts in borrower's name or jointly with others and whether in any other currency. Any currency conversions required to be effected by FCL pursuant to this right shall be effected in accordance with the usual practice of FCL.

NOTICES: The applicant agrees to accept service of all notices and processes at his/her postal or physical addresses and appoint these addresses as the deemed address of service. All notices sent to each party's domicile shall be regarded as having been received seven days after posting or at the time at which they are delivered, if delivered by hand, facsimile or e-mail.

SALARY DIVERSION: For non-scheme applicants the loan is provided on the basis that the applicants shall provide post-dated cheques for monthly repayment until the unsecured loan is fully paid. For scheme loan applications the applicant authorizes present and future employer(s) to deduct loan repayments from the salary and remit

funds to the FCL.

DISCLOSURE: The applicant agrees and authorizes FCL or the approved credit reference bureau to:

- a) Make inquiries from any bank, financial institution or approved credit reference bureau in Ghana to confirm any information provided by the applicant;
- b) Seek information from any bank, financial institution or approved credit reference bureau when assessing the client at any time during the existence of the applicant's account.
- c) Disclose to approve credit reference bureau information relating to the applicant's account maintained at FCL.

INDEMNITY: The applicant agrees to fully indemnify FCL against all costs and expenses (including legal fees) arising in any way in connection with the applicant's accounts, in enforcing these items and conditions or in recovering any amounts due to FCL or incurred by FCL in any legal proceedings of whatever nature.

WAIVER: No forbearance, neglect or waiver by FCL in the enforcement of any of these terms and conditions shall prejudice FCL's right thereafter to strictly enforce the same. No waiver by FCL shall be effective unless it is in writing.

Acceptance of terms and conditions: The applicant understands and agrees that he/she has signed the application form as acceptance of the aforesaid terms and conditions.

Applicant Signature

Date

10. FOR OFFICIAL USE

Date Received

Credit Officer's Comments



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