

CORPORATE LOAN APPLICATION FORM



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CORPORATE LOAN APPLICATION FORM

1. BUSINESS DETAILS

Type of Loan Working Capital LPO Financing Bridge Finance
 Import Financing Invoice Discounting Other (Please Specify) _____

Business Name _____ Business Tel Number _____

Physical Address _____

Postal Address _____

Website Address _____ Certificate Of Incorporation _____ Number of Employees _____

Email Address _____ Date Of Incorporation _____ TIN _____

Type of Business: Sole Propreitor Limited Liability Partnership Other (Please Specify) _____

Current Bankers: Bank _____ Branch _____ Authorised Signatory _____
 Bank _____ Branch _____ Authorised Signatory _____

2. CURRENT DIRECTORS

Name _____ Name _____

Name _____ Name _____

3. DETAILS OF KEY DIRECTORS

(A) Mr. Mrs. Ms. Miss. Dr. Prof. Other (Please Specify) _____

Surname _____ First Name(s) and Other Name(s) _____

Date of Birth _____ Age _____ Marital Status _____
 _____ Single Divorced Widowed Married

Spouse Name _____ Number of Children _____ Number of Dependents _____ Contact Number - Office _____

Spouse Place of Work _____ Social Club (If Any) _____ Contact Number - Mobile _____

Email Address _____ Accommodation is: Owned Rented Mortgaged

Postal Address _____ Religion: _____
 _____ Christian Islam Traditional Other (Please Specify) _____

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 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

Marital Status Single Divorced Widowed Married

Spouse Name

Number of Children Number of Dependents

Contact Number - Office

Spouse Place of Work

Social Club (If Any)

Contact Number - Mobile

Email Address

Accommodation is: Owned Rented Mortgaged

Postal Address

Religion: Christian Islam Traditional Other (Please Specify)

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 Driver's License

Date of Issue

Date of Expiry

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	<input type="text"/>	<input type="text"/>	<input type="text"/>
Building	<input type="text"/>	<input type="text"/>	<input type="text"/>
Machinery/Equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>
Accounts Receivable	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inventory	<input type="text"/>	<input type="text"/>	<input type="text"/>
Vehicle (Type)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (Please Specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>

6. EXISTING LOAN DETAILS

Name of Lending Institution	Total Outstanding Balance	Total Monthly Commitment
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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	<input type="text"/>	Director	<input type="text"/>
Signature	<input type="text"/>	Signature	<input type="text"/>

We _____ a customer of Forms Capital Ltd hereby authorize Forms Capital to

- Submit information on the company's credit transaction with Forms Capital Ltd. to a credit bureau licensed under Credit Report Act, Act 726, 2007
- Obtain credit reports on the company from a credit bureau licensed under this act for the purpose of credit Management.

The applicant declares that the above information is true and valid. Any false information can and will bring legal sanctions against the applicant.

Name of Managing Director

Signature

Date / /

8. REQUIREMENTS

	Yes / No	Comment
Completed Standard Application Form A (with KYC requirements)	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Board Resolution	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Certificate of Incorporation	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Certificate to Commence Business	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Regulations of Company	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Management/Audited Accounts (if any)	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Bank Statements (the last six months)	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Company profile with key management	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Passport pictures of key Directors who signed Board Resolution	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
ID cards of key Directors who signed Board Resolution	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Utility bills of key Directors who signed Board Resolution	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Directions to Office (Sketch Map)	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Copy of /Invoices	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Letter of Joint Payment (Undertaking) from Employer (If applicable)	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Copy of the Award Letter /Contract Document	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
Collateral Documentation	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>
	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>

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:

- Make inquiries from any bank, financial institution or approved credit reference bureau in Ghana to confirm any information provided by the applicant;
- 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.
- 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

D	D	/	M	M	/	Y	Y
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Credit Officer's Comments

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