



This Section To be Completed by WWBG staff				
WWBG Branch:	Type of Client: <input type="checkbox"/> New <input type="checkbox"/> Repeat	Loan Cycle:	Account Type <input type="checkbox"/> Savings <input type="checkbox"/> Current	Date:/...../.....
1. PERSONAL INFORMATION				
Client Name:		Date of Birth:	Telephone/mobile No:	
Occupation:	Gender <input type="checkbox"/> M <input type="checkbox"/> F/...../.....		
Marital Status <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> widowed		Nationality:	Home Town:	
Type of ID <input type="checkbox"/> passport <input type="checkbox"/> voters ID <input type="checkbox"/> driver's license <input type="checkbox"/> Others	ID No: date issued: expiry date: e-mail address:	Name of next of Kin : Address of next of Kin: Relationship to client: Occupation: Mobile No:		
Postal Address:		Are you interested in any of the following services and benefit? <input type="checkbox"/> SMS alert <input type="checkbox"/> ATM Card <input type="checkbox"/> Savings linked insurance <input type="checkbox"/> Mobile banking services		
Residential address(Nearest landmark)				
Are you politically exposed (PEP) <input type="checkbox"/> Yes <input type="checkbox"/> No				
Source of income /funds <input type="checkbox"/> Salary <input type="checkbox"/> Allowances <input type="checkbox"/> Pension <input type="checkbox"/> Others.....				
CLIENT SPOUSE INFORMATION				
Name		Date of Birth:	Telephone/mobile No:	
Occupation:	/...../.....		
ACCOUNTS WITH OTHER BANKS				
A/C No: Name of Bank Branch:				
A/C No: Name of Bank Branch:				
2. EMPLOYMENT/BUSINESS DETAILS				
Employer's / Business Name :				
Employer's / Business Address:				
Telephone No:		e-mail:	fax:	
3. LOAN DETAILS				
Loan amount requested:GH¢		Mode of payment :		
Purpose of loan:		<input type="checkbox"/> Standing Or Direct Debit	<input type="checkbox"/> -Post Dated Cheques	
		<input type="checkbox"/> Direct cash to A/C	<input type="checkbox"/> Others (specify):.....	
4. COLLATERAL DETAILS				
Name of Investment : Tier 3 Provident Fund				
Scheme ID:				
Other Security:				

Total Investment GH¢:

Amount to be used as collateral GH¢:

5. CHARGE OVER CONTRIBUTIONS:

I hereby grant a charge in favour of WWBG over my Provident Fund / Pension- Scheme contributions held by Enterprise Trustees Limited in Scheme ID No: (“My Contributions”) as collateral for the loan from WWBG together with interest thereon and all related costs, charges and expenses (the “Loan”).

I agree that:

My Contributions shall be used to repay the Loan in the event of my default; (Default means Two (2) months in arrears)

WWBG shall, in the event of my default, be entitled to request Enterprise Trustees to release My Contributions to WWBG to repay the Loan without any further notice to or consent from me;

I shall not have access to My Contributions or any part thereof until the Loan has been fully repaid;

Enterprise Trustees may provide any information regarding my contributions to WWBG or my employer as either of them may request without further notice to or consent from me; and

WWBG may register this charge in any register required by law.

6. DECLARATION:

I (we) certify that the information provided is true and accurate; any falsification renders my application null and void.

I further certify that my contributions are my sole property and that no other party has a claim over them.

I (we) hereby declare that by endorsing this form I(we) transfer all right of ownership of the collateral listed above to Women`s World Banking Ghana. WWBG

I/We authorize in express form WWBG to request information about my business relationship, credit antecedents and or financial indebtedness with any financial institution or other entity while my contractual relationship with WWB Ghana last.

Name of Client:

Date :

Signature of Client:

EMPLOYER’S DECLARATION:
We certify that client has no obligation with any institution or with us in which his/her provident fund is collateral. Therefore approve of being used to secure a loan facility from WWBG.

Employer’s Fund Employee’s Fund

Tick if two funds could be used

7. EMPLOYERS INFORMATION:

Name of Employer:

Name of employer representative:

Phone Number

Signature and Stamp:

8. LOAN AGREEMENT

WWBG Savings and Loans Limited, a Limited Liability Company duly licensed as a Non-Bank Financial Institution under the Financial Institution Non-Banking Act, 2008, (Act 774) whose registered office is at Global Office Complex, Tesano, (Adjacent to the Tesano Police Station), P. O. Box GP 2989, Accra-Ghana, represented by its Branch manager, hereinafter referred to as **(The Lender)** on the one part andof Hereinafter referred to as **(the Borrower)** of the other part.

The Lender is a registered and licensed Non-Banking Financial institution whose business includes advancing loans to businesses, individuals, and groups.

The Borrower is desirous of borrowing money from the Lender under the terms and conditions stated below.

The Lender in response to the Borrower's application dated , hereby advances and the Borrower hereby acknowledge receipt of the principal amount of GH¢..... (**"The Facility"**) for a duration ofmonths for the purpose stated. The Borrower undertakes that the Facility will not be lent to any other person or body under any circumstances and that the Borrower shall use the loan solely for the purpose.

Fees and Interest:

The Borrower shall pay upfront processing fees of 4.5. %, and interest at the rate of 33% per annum and this is renewable from time to time

Repayment:

The Borrower shall repay the Facility, plus interest of GH¢..... through a fortnightly/monthly repayment of GH¢.....in accordance with the Repayment Schedule hereto attached.

Borrower's Provident Fund:

Provident Fund / Personal Pension Scheme contributions with Enterprise Trustees Limited in Scheme ID No:

DEFAULT:

The Borrower agrees to immediately inform the Lender of any delays or default in repayment installments and when there are repayments arrears of at least two months, WWBG shall request Enterprise Trustees to transfer the Borrower's contributions to WWBG in settlement of all amounts owed under the Facility.

CHANGE AND TERMINATION OF AGREEMENT:

The Borrower declares that in case of breach of any of the terms and conditions of this Agreement the entire Facility amount up to the date of the breach together with the accrued interest and late fees shall become immediately repayable to the Lender.

The terms of this Agreement can be varied only by the mutual consent of the parties hereto in writing.

GOVERNING LAW:

The laws of Ghana shall govern this Agreement and all disputes arising here under shall be subject to the jurisdiction of the Courts of Ghana.

Signed on (date) by the borrower

Signed on (date)..... stamped on behalf of WWBG

I hereby accept the offer as well as the terms and conditions of this facility. I will ensure that I comply with the contractual obligations that are applicable in Ghana

I, hereby declare that all terms and conditions related to the lender's products, I subscribe to have been fully explained to me in the language I speak by an officer of the Lender and I have perfectly understood same before appending my signature/thumbprint.

.....
Signature /Thumbprint

.....
Credit Relationship Manager (Name)

9. WWBG USE ONLY

Approved Loan amount: GH¢	Interest Rate:
Total Interest: GH¢	Loan Tenure:
Fees & Charges	Total Loan Outstanding (PRIN+INT):GH¢
Client ID Number:	Loan A/C Number:

COMMENTS AND RECOMMENDATION:

Name of Client's Relation Manager:	Signature of Relationship Manager:	Date:
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10. BRANCH USE ONLY

Designated Officer	Customer Service	Branch Manager	AMLO*	
Name				
Date				
Signature				
Comments				

**Completed Application Form should be scanned and e-mailed to credit@wwbg.com.gh
Contact: 0263011318**