

# GOD'S TREASURY COOPERATIVE, THRIFT AND CREDIT SOCIETY 11, Ogunmefun Street, Off Bawala Street, Pedro, Somolu, Lagos State, Nigeria.

11, Ogunmefun Street, Off Bawala Street, Pedro, Somolu, Lagos State, Nigeria. +2347011871220, +2347066658427 info@godstreasury.com

### **MEMBERSHIP LOAN FORM**

PERSONAL DATA (CONFIDENTIAL)(PLEASE FILL IN BLOCK LETTERS)
Bank Verification No. (BVN): NIN: NIN:
Personal Information
Title: Surname: Surname:
First Name: Other Name(s):
Marital Status: Single Married Others Gender: Male Female
Country of Birth:  Date of Birth  Day  Month  year
Mother's Maiden Name:
Tax Identification Number:
Nationality: Nigeria Others (Please specify)
L.G.A of Origin:  (Nigerians Only)  State of Origin: (Nigerians Only)
Do you have Residency or are you a citizen of any other country other than Nigeria:  Yes No if yes, country:
Type of Identification: Identification Number:
Occupation:
Office Address:
Social Media: Facebook Twitter Instagram Others Specify:
Social Media Handle:
Contact Details
Residential Address:
House/Plot Number: Street Name: Street Name:
Nearest Bus Stop/Landmark:
City/Town: L.G.A:
State: Cooperative
Mailing Address:
(if different from the Residential Address)
Mobile No.:
E-mail Address:

Employment Details
Employment Status: Employed Self-Employed Self-Employed unemployed Retired Student
Others  (Please specify)  Date of employment:  Day  Month  year
employment: <sub>Day Month</sub> year  Business/Employer's Name:
Business/Employer's Address:
State:
Business/Occupation:
Sources of Fund to the Account:
Details of Next of Kin/NOMINEE. must be 18 years and Above
Title: Surname: Surname:
First Name:
Other Name(s):
Date of Birth: Gender: Male Female
Relationship: Mobile No.:
Email Address:
Contact Details
House/Plot Number: Street Name:
Nearest Bus Stop/Landmark:
City/Town: L.G.A:
State: Country: Country:
Loan Details
DATE OF ADMISSION INTO THE COOPERATIVE:
Day Month year
FORM OF LOAN: (SOFT LOAN) (REGULAR LOAN) (SPECIAL LOAN)
(COMMODITY LOAN) (CAR ACQUISITON LOAN) (HOME ACQUISITION LOAN)
(HOUSE RENT LOAN)
INTENDED LOAN AMOUNT: N
DURATION OF PAYMENT: FROM: 20 TO 20
ARE YOU ON ANY LOAN AS AT PRESENT (YES NO ).
IF YES, STATE THE KIND OF LOAN:
TOTAL AMOUNT LOANED:

## **GUARANTORS:** ( PLEASE FILL IN EVERY DETAIL BY YOURSELF AS A GUARANTOR)

<b>1.</b>	
Title: Surname: Surname:	
First Name:	
Other Name(s):	
TELEPHONE NUMBER(S)	
EMAIL ADDRESS:	
I HEREBY GUARANTEE THAT:	
(PLEASE FILL THE APPLICANT'S NAME)	
BE PAID THE SUM OF: (AMOUNT IN FIGURES)	
(AMOUNT IN WORDS)	
PLEASE NOTE THAT GUARANTORS ARE BOUND BY THE TERMS AND CONDITIONS OF	
GUARATORSHIP, ACCORDING TO THE BYLAWS OF GTCS.	
I AGREE TO THE TERMS AND CONDITION OF GUARANTORSHIP IN CASE OF ANY DEFAULT.	
GUARANTOR'S NAME	
GUARANTOR'S SIGNATURE	
DATE Day Month Year	
Z. Title:	
Title: Surname: Surname:	
First Name:	
Other Name(s):	
TELEPHONE NUMBER(S)	
EMAIL ADDRESS:	
I HEREBY GUARANTEE THAT: (PLEASE FILL THE APPLICANT'S NAME)	
BE PAID THE SUM OF: (AMOUNT IN FIGURES)	
(AMOUNT IN WORDS)	
PLEASE NOTE THAT GUARANTORS ARE BOUND BY THE TERMS AND CONDITIONS OF	
GUARATORSHIP, ACCORDING TO THE BYLAWS OF GTCS.	
I AGREE TO THE TERMS AND CONDITION OF GUARANTORSHIP IN CASE OF ANY DEFAULT.	
GUARANTOR'S NAME	
GUARANTOR'S SIGNATURE	
God's Ireasury Cooperative	
DATE DATE	
Day Month Year Co III CO O C C C C C C C C C C C C C C C	

#### **REFUND SCHEDULE:**

MONTH:	MONTH:	MONTH:
LOAN REFUND:	LOAN REFUND:	LOAN REFUND:
INTEREST:	INTEREST:	INTEREST:
SAVINGS:	SAVINGS:	SAVINGS:
TOTAL:	TOTAL:	TOTAL:
MONTH:	MONTH:	MONTH:
LOAN REFUND:	LOAN REFUND:	LOAN REFUND:
INTEREST:	INTEREST:	INTEREST:
SAVINGS:	SAVINGS:	SAVINGS:
TOTAL:	TOTAL:	TOTAL:
( MONTH:	( MONTH:	MONTH:
LOAN REFUND:	LOAN REFUND:	LOAN REFUND:
INTEREST:	INTEREST:	INTEREST:
SAVINGS:	SAVINGS:	SAVINGS:
TOTAL:	TOTAL:	TOTAL:
MONTH:	MONTH:	MONTH:
LOAN REFUND:	LOAN REFUND:	LOAN REFUND:
INTEREST:	INTEREST:	INTEREST:
SAVINGS:	SAVINGS:	SAVINGS:
TOTAL:	TOTAL:	TOTAL:

Please attach a copy of your most recent utility bill as proof of Address, a copy of your recent passport photo and a valid ID

#### **NOTICE:** (Please read and sign)

An additional **one thousand naira** shall be added to the first instalment as the cost for loan form and loan transfer (bank charges)

All instalments are written as post-dated cheques at the point of accessing loan. It is a legal offence for any cheque to bounce and we always frown at it. If a cheque bounces, we shall file a lawsuit with the drawer.

Anyone who defaults/delay payment in any way will pay a fine of five thousand naira flat in addition to the interest on the total loan which will be paid differently apart from the already calculated interest.

When a member defaults payment, he has forfeited the right to loan until three months after the loan has been cleared. Any member who has defaulted more than once for any reason, will not access his/her savings immediately they terminate their membership, until six months after they have terminated their membership.

I agree to all terms and conditions of loaning as a member of The God's Treasury Coop

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APPLICANT'S NAME																						
APPLICANT'S SIGNATURE									DA	ΛTΕ	[	Day	/		Mon	th			 Year	I		

# **FOR OFFICE USE ONLY**

Account Officer's Comm	ent:		
			Signature
Head of Operation's Comm	ent:		
			/
			Signature
Low Risk	Medium Risk	High Risk	
Account Officer's Name:		Signature & Date:	
Head of Operations' Name:		Signature & Date:	
God'	s Treasur	y Cooperd	ıtive,
Thri	ft and Cred	dit Cooperat	ive.
	info@godstreasury.com	www.godstreasury.com	
		Acres	