

MICRO-LOAN CHECKLIST

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CUSTOMER INFORMATION

Name of customer: _____
Home Address: _____
Office/shop Address: _____
Phone Number: _____
Account Number: _____
Nature of Business: _____
Years of Experience in Business: _____
Existing loan with other bank: Bank _____ Amount _____

NEXT OF KIN INFORMATION

Name: _____
Address: _____
Relationship: _____
Phone Number: _____

LOAN INFORMATION

Loan Amount: _____
Purpose: _____
Tenor: _____
Granted date: _____
Maturity date: _____
Repayment method: _____
Projected profit: _____
Bank share: _____ Customer share: _____
Customer Signature & Date: _____

Guarantor Information

Name: _____
Address: _____
Relationship: _____
Phone Number: _____
Nature of Business: _____ Signature & Date _____

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Office Use only

Name of R/O: _____
R/O's recommendation/approval: _____
Credit recommendation/approval: _____
Credit Officer: Name _____ Signature/Date _____
Loan Approval: _____