THE COUNTY GOVERNMENT OF TAITA TAVETA

Telephone: 0788186436/0718988717



P O Box 1066-80304 WUNDANYI

APPLICATION FORM FOR TAITA TAVETA COUNTY EXECUTIVE STAFF CAR LOAN

PART 1

TO: OFFICER ADMINISTERING CAR LOAN FUND COUNTY GOVERNMENT OF TAITA TAVETA

	A.	PERSONAL DETAILS
	1.	Name
	2.	ID No.
	3.	PIN No.
	4.	Personal No.
	5.	Date of birth
	6.	Address
	7.	Physical Address
	8.	Telephone/Mobile No.
В.	NI	EXT OF KIN PERSONAL DETAILS
	9.	Name
	10	. ID No
	11	PIN No.
	12	Date of birth
	13	Address
	14	Physical Address
	15	Telephone/Mobile No
	16	. Relationship

C.	[V]	IOTOR VEHICLE DESCRIPTION						
	M	Iake	Model	Type of Body				
	E	ngine No	Chassis No	Registration				
	Y	ear of Manufacture	New or Seco	nd Hand (if the vehicle	is			
sec	on	d hand- report by a registered	valuer should be	e attached).				
D.		RICING articulars of accessories and valu	ue if included in th	e cost price of vehicle:-				
	C	ost price of vehicle		Kshs				
	T	racking/Alarm System Cost		Kshs				
	C	ost price of Vehicle		Kshs				
	A	dd Insurance Premium (If to be	Paid by the Fund).					
T	ota	l Loan Amount applied for		Kshs				
	N	ame of Insurance Company						
	N	ame of Supplier						
	A	ddress of Supplier						
	(In the event of supplier not being a recognized Motor Vehicle Dealer, vendor must produce proof that he is the owner of the Motor Vehicle AND a Valuation Report. This should be original Log Book, Sales Agreement or other such evidence of ownership as may satisfy the Fund).							
		Approximate date of delivery						
E.	A	ACKNOWLEDGEMENT						
	1.	I undertake to have the car reg	istered in the nam	e of County Government of				
		TAITA TAVETA and myself.						
	2.	I undertake to register a charge	e in favour of Coun	nty Government of TAITA TAVETA				
		entitling County Government	of TAITA TAVETA	A to sell the Motor Vehicle in the				
		event of breach of the terms and	d condition of the l	Loan Agreement.				
	3.	I wish to pay the amount due un	der that Purchase	Agreement by Monthly Installment				
		recoverable from my salary an	d any other allowa	ances of Kshs				
	4.	I agree to cover the vehicle Cor	nprehensively and	l provide prove of				
		the same immediately.						
	5.	In the event of my leaving the c Loan amount be recovered from		ng the Loan. I agree to have the outstanding lother accrued Benefits.				
Da	te	SIGNATURI	3					

PART II

RECOMMENDATION BY THE OFFICER ADMINISTERING THE FUND

1. I certify that Hon./Staff	is eligible for a motor
Vehicle Loan and has a current	net salary of Kshs
2. I certify that payment of the m	onthly installments will not cause financial embarrassment and
3. I recommend that Hon./Staff	application be approved
in full subject to his/her ability	to service the loan.
A limit of Kshs	payable in months.
DATE	SIGNATURE
OFFICER ADMINISTERING THE F	UND
	PART III
APPROVAL BY LOANS MANAGEM	IENT COMMITTEE
TO: TAITA TAVETA COUNTY EXI	ECUTIVE EMPLOYEES CAR LOAN AND MORTGAGE REVOLVING
FUND	
The Loan Management Committee	e in their meeting of (date)via Minute
No a	approved Hon./Staff
Application of Kshs	in respect of the Vehicle Loan to be repaid
over a period of 12 months for each	h year of the loan.
DATE	
SIGNA	TURE
CHAIR	RMAN OF LOANDS MANAGEMENT COMMITTEE
VIII. FINANCIAL APPRA	AISAL
1. A third of Net salary/	House Allowance Kshs.month
2. Monthly Deductions i	including interest and cost of mortgage insurance
3. I certify that after the	monthly installments there will remain a net salary of
Kshs	which is more/less than one third of total earnings.
I recommend Mr./Hon./Mrs./Mis	sproposal
Datesigned	

Director Human resources /Payroll manager