

TAITA TAVETA COUNTY GOVERNMENT



DAWIDA TUWETA SAWAZISHA FUND APPLICATION FORM

Application No:.....Date received:

SECTION 1: Background information

1. Group Data			
Group Name		Sub County	
Reg. No.		Ward	
Date/Year of Registration		Village	
Contact			

(Attach copy of registration certificate)

2. Banking information	
Bank Name:	
Branch:	
Account No.	
Account Signatories	
Name	Signature
1.
2.
3.

Bank: We confirm that the above banking information is correct.

Signature..... Stamp.....

4. Membership profile		
Gender	No of Members	Members with disability
Male		
Female		
Total		

(Attach a list of group members clearly indicating their names as they appear on their National ID and signature of each member)

5. LOCATION OF BUSINESS

Township/Estate/VillagePlot No./Street
 Nearest Church/Mosque/Primary School to the business.....

6. BRIEF BACKGROUND OF THE GROUP

(i) Purpose/Objective (reasons for forming group)

(ii) Activities undertaken

(iii) Group's achievements

7. AMOUNT OF LOAN APPLIED FOR

Loan Applied for Kshs.....

8. STATE THE TYPE OF PROPOSED BUSINESS. Is it start up or expansion?

a. Does the group have or want to start a joint/common business? **(Tick one)**

Yes.....No.....

b. If **YES** state Business type (Tick)

(i) Start up (New)..... ii) Expansion.....

c. If **NO**, state each individual business or project in section 9.

9. BUSINESSES INDIVIDUAL MEMBERS PROPOSE TO UNDERTAKE. Complete table.

No.	Name of owner	ID No.	Nature of Business	Start up or expansion	Mobile
1					
2					
3					
4					
5					
6					
7					

8					
9					
10					
11					
12					
13					
14					
15					

(Attach additional list for more members)

10. LOAN CONDITIONS

Proposed repayment periodMonths (max 12 months)

(Please attach 2 current signed minutes of group meeting(s) showing members monthly contributions and attendance)

11. OTHER MEMBERS GUARANTEE AND COMMITMENT TO LOAN REPAYMENT

We, the undersigned are jointly and severally liable for repayment of loan in the event of default and shall not be eligible for additional loans unless the amount in default has been cleared in full.

No	Name	ID No	Telephone	Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

12. Has your group received funding from the following sources before?

(Tick one)

i. Uwezo Fund Yes No

ii. Women Enterprise Fund Yes No

- iii. Youth Enterprise Development Fund Yes No
- iv. National Development Fund for Persons With Disability Yes No

If applicable, please list the source(s) of funding and project(s) funded

Source(s) of funding	Project(s) funded	Amount (Ksh)
1.		
2.		
3.		

13. LOAN TERMS & CONDITIONS BEFORE DISBURSEMENT

We, the undersigned, being the validly elected leaders of the group hereby commit the group individually and jointly to repay the loan amount disbursed in.....equal installments after the.....month’s grace period. We also confirm that the above information is true and authorize the Fund to:

- i) Share information of our credit history with Credit Reference Bureaus
- ii) Confirm bank details with our bankers as and when necessary
 - a) Chairperson:.....ID.No.....Tel No.....
Signature.....date.....
 - b) Secretary:.....ID.No.....Tel No.....
Signature.....date.....
 - c) Treasurer:.....ID.No.....Tel No.....
Signature.....date.....

NB: Please attach 2 current signed minutes of group meeting(s) that agreed to the terms and conditions of the borrowing.

14. I certify that I know the members of the group and that they are of good conduct to access public funds.

Name of Ward Administrator/Chief/Asst. Chief/:Tel:

Signature Official stamp & date.....

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15. Recommendation from Sub County DATU Fund Committee

Reasons for recommending approval/decline.....

1. Chairman.....Signature.....Date.....

2. Secretary.....Signature.....Date.....

Minute No.:..... Date:.....

We have validated and technically assessed the proposal and we recommend as follows:

Approved:

i) Amount Kshs (in words).....

ii)Administration Fee (4% of loan disbursed)

Approved repayment period:Months

Deferred: Reasons.....

Rejected: Reasons.....

Signed by Chairperson:.....

Witnessed by Secretary:.....

Date//20...../place.....

16. Check list of copies of documents attached (√)

- Certified copy of Registration Certificate
- Certified Bank A/C statements
- Certified Copies of IDs
- PIN of All members
- Minutes of group meetings authorising the loan
- List of members with IDs, & Tel Nos. (Attach copies of IDs of all members)
- Sketch of business location
- Copy of organization's constitution