

Application Ref	
Region (Zone)	
Branch	
Branch Code	
BOC	
Zonal Sales Manager	

## CONSUMER LOAN

### Application Form

Please complete this form in block letters and return to the sales officer of your local branch.

#### PERSONAL INFORMATION

Title  Surname  First Name  Middle Name   
 Sex  Marital Status (Married, Single  Widowed, Divorced)  Date of Birth

No. Of Dependents   
*(Children, relatives, those you are financially responsible for)*  
 Average monthly expenses  Highest Educational level   
 Total monthly payment to creditors

Residential Address   
*(Not P. O. Box Address)*

Is residence: Owned  Rented

Years at current address  Years at previous address

Postal address *(if different from current residential address)*  Home phone

Mobile phone  Fax  Email

Number of cars owned  Age of oldest car

Nature of investments held  Property  Shares/Stocks  Cash deposit  Total value of investments

International passport number  Drive's licence number

CBN requirements for applications of N1 million & above. If applicant does not own an International Passport Drivers licence, please attach recent passport photograph)

Name of Spouse  Spouse's place of employment

Spouse's length of Employment  Annual income of spouse

**EMPLOYMENT INFORMATION**

Job title  Employment Classification  *Jnr Staff*  *Snr Staff*  *Mgt*  *Exec.*

Employment status  *Permanent*  *Contract* Name of current Employer

Occupation  Industry

Business Address  Office phone

Date of employment  Age of business in years (*if self employed*)

Number of years to retirement  Expected terminal benefits

After-tax annual income  Basic monthly salary

Application ref:

**TOTAL OTHER PAYMENTS**

Month	Payments	Month	Payments	Month	Payments
January		February		March	
April		May		June	
July		August		September	
October		November		December	

Loan deductions (If any) currently taken out of salary  Day of month salary is paid

Name of previous employer (*if less than 3 years in current employment*)

Length of service in previous employment  Number of years of total work experience

**BANKING DETAILS**

Date account was opened at UBA

UBA branch where income is held

Account held: i. Current  Savings  Term Deposit  Account Number

ii. Current  Savings  Term Deposit  Account Number

iii. Current  Savings  Term Deposit  Account Number

**LOANS OUTSTANDING**

S/N	Type of loan (e.g. Share, loan Car loan, overdraft, staff loan etc)	Amount outstanding	Collateral	Expiry Date
1.				
2.				
3.				

**OTHER BNKS**

S/N	Name of other Bank	Type of account (e.g. Current, Savings, Deposit)	Time at bank	Turnover (Total over last 6 months)
1.				
2.				
3.				

Please attach photocopy of bank statement from other banks (if any) for the last 6 months

**DETAILS OF LOAN REQUEST**

Loan type    Asset Finance     No Wahala     Executive     Student     Home     Personal revolving     Salary direct Credit

Amount required     Contribution     Tenure in months

proposed method of principal repayment:    Monthly payments     Quarterly payments

*I hereby confirm that I am applying for the above credit facility and certify that all the information provided by me above and attached hereto is true, correct and complete. I authorise you to make any enquiries you consider necessary and appropriate for the purpose of evaluating this application.*

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sales Officer: \_\_\_\_\_ Signature & Date: \_\_\_\_\_

## Employee Status Inquiry Form - Employee Salaries paid through UBA

Dear Sir or Madam:

An employee of your organisation has requested for a consumer loan from the bank. Kindly confirm by signing on the spaces provided below the following information provided by him/her to enable us to promptly process his/her request.

Employee Name	<input type="text"/>				
Employee Number	<input type="text"/>	Job Position	<input type="text"/>		
Employment Classification	<input type="text"/>	Jnr. Staff	<input type="text"/>	Snr. Staff	<input type="text"/>
		Mgt	<input type="text"/>	Exec.	<input type="text"/>
Date of Birth	<input type="text"/>	Date of Employment	<input type="text"/>		
After-tax annual income	<input type="text"/>		Basic monthly salary	<input type="text"/>	
Expected Terminal benefits	<input type="text"/>		Loan amount deducted at source(monthly)	<input type="text"/>	

## TOTAL OTHER PAYMENTS

Month	Payment	Month	Payment	Month	Payment
January		February		March	
April		May		June	
July		August		September	
October		November		December	

Please be assured that confirmation given by you will be treated in strict confidence and without prejudice to your organisation.

Thank you.

Yours faithfully,

Zonal Sales Manager  
United Bank for Africa Plc.

I hereby confirm that United Bank for Africa Plc is authorised to obtain verification of the information provided by me in respect of my consumer loan application.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**TO BE COMPLETED BY APPLICANT'S EMPLOYER**

A. We confirm that the above information as provided by our employee is accurate

B. If the application is considered and a loan is granted, we certify as follows:

1. We shall continue to pay his/her salary into his/her account No: \_\_\_\_\_ with your \_\_\_\_\_ branch.
2. No change of bank account will be effected without a written confirmation from UBA of due liquidation of the loan.
3. In the event of his/her separation from the company before the liquidation of the loan, his/her terminal benefits will be paid through the same account.

This information is given in good faith and without prejudice to the organisation. Please note that this does not constitute a guarantee on this loan on the part of the organisation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date & Official Stamp

\_\_\_\_\_  
Designation.