

INSPIRATION TRUST FUND (I T F)

*3, IBUAMSTARDAM LANE OFF ERHUNSE STREET,
IYANOMO COMMUNITY, SAPELE ROAD, BENIN CI*

APPLICATION FORM

NAME: _____
DATE OF BIRTH: _____
MARITAL STATUS: _____
GENDER: _____
TELEPHONE NUMBER: _____
RESIDENTIAL ADDRESS: _____
BUSINESS ADDRESS: _____

NEXT OF KIN

NAME OF THE NEXT OF KIN: _____
RELATIONSHIP: _____
RELIGION: _____
ADDRESS: _____
PHONE NUMBER: _____

CREDIT FACILITY

LOAN TYPE: _____
LOAN AMOUNT: _____
DURATION: _____
PURPOSE OF LOAN _____

OFFICAL USE

Manager

HR

GUARANTORS FORM

NAME: _____

DATE OF BIRTH: _____

MARITAL STATUS: _____

GENDER: _____

OCUPATION: _____

RELIGION: _____

TELEPHONE NUMBER: _____

RESIDENTIAL ADDRESS: _____

BUSINESS ADDRESS: _____

NAME: _____

DATE OF BIRTH: _____

MARITAL STATUS: _____

GENDER: _____

OCUPATION: _____

RELIGION: _____

TELEPHONE NUMBER: _____

RESIDENTIAL ADDRESS: _____

BUSINESS ADDRESS: _____

OFFICAL USE

Manager

HR

(INSPIRATION TRUST FUND) ITF CONSTITUTION

1. Compulsory registration fee of five thousand Naira (#5,000)
2. Customer verification
3. Customer training
4. Ten percent (10%) charges on default of payment in a month.

CUSTOMER

I ----- Promise to pay this Loan-----
----- at the speculated time and failure to do so
the management (ITF) has the right to hold my guarantor responsible
and use all available means to recover the collected Loan with
interest.

NAME: _____

ADRESS: _____

PHONE: _____

SIGNATURE: _____ DATE _____

GUARANTOR

I _____ guarantees that I am fully
aware of the loan collected by _____ at
your establishment and promise to take responsibility when the
said customer refuses to or cannot pay up.

NAME: _____

ADRESS: _____

PHONE: _____

SIGNATURE: _____ DATE _____