

SALARY ADVANCE APPLICATION FORM

CLIENT DETAILS

Full name: _____
P. O. Box _____ District/Municipal council _____
Physical residence (Village/Street) _____ Gender- Male/Female
Mobile No. _____ Office Tel No. _____ Age _____
A/C Number _____ Branch _____ Date ____/____/____

APPLICATION FOR SALARY ADVANCE

I request for salary advance of TZS _____ to be paid within one month of _____ and agree to be charged upfront commission of 5% of the amount requested that is TZS. _____.

EMPLOYMENT DETAILS

Name of the Employer _____ Tel. _____
Address/Location _____
Terms of Employment (Permanent/Contract) _____
Employment Contract expiring date ____/____/____

MANDATE

I authorise Mwalimu Commercial Bank PLC to deduct repayment of this salary advance from my account mentioned above through my next salary payment or any of my deposit (s) with the bank.

I authorise the bank to take any legal action to recover the Outstanding balance in case of Default.

REFEREE

Full Name _____ Mobile No. _____
Relationship _____ Physical Residence _____

DECLARATION

I declare that the information given above are true and correct to the best of my knowledge and belief, and further authorise Mwalimu Commercial Bank PLC to verify the information given herein and may use this information in future.

Name of applicant _____ Signature _____ Date ____/____/____

FOR OFFICIAL USE ONLY

Approved/Declined _____ Reason _____

Recommended by;

Credit Officer _____ Signature _____ Date ____/____/____

Approved by;

Branch Manager _____ Signature _____ Date ____/____/____