

G. DECLARATION (to be filled in by the applicant)

I..... do declare that the information given above about my personal details are true and correct. I also declare that I will abide by the terms and conditions of this loan and that I will honor my obligations as spelt out in this form and failure to which CareCoop will have the right to take necessary measures in order to recover the outstanding loan amount. I hereby authorise monthly principal and interest deductions to be made from my salary as repayment for this loan and through my benefits in the event that I leave employment before paying off the loan.

Signature:

Date:

Approved Amount to be paid to member by
(Tick Appropriate)

Bank Name:

Account No.:

Bank Code:

Branch:

Cheque	
Bank Transfer	

H. REVIEWED BY CARECOOP MANAGEMENT

First Review

Name:

Signature:

Date:

Second Review

Name:

Signature:

Date:

I. APPROVAL STAGE 1

Approved for payment

Not approved

Name

Signature

Date

General Manager:

Comments:

J. APPROVAL STAGE 2

Decision (circle):

Approved

Not Approved

Name

Signature

Date

1

2

3

4