

For Queries/feedback

- ◆ Call Customer Care Line 0211292995/89.
- ◆ If not resolved, call Customer Relations Manager 0763055292/0975423338.
- ◆ If still not resolved, call General Manager 0763055341.



Attach the following:

- ◆ Latest Copy of Pay slip.
- ◆ Salary Adjustment Letter (if applicable).
- ◆ Copy of Valid Contract of Employment.
- ◆ Organization Clearance Form.
- ◆ Copy of NRC or Valid ID.
- ◆ Proforma Invoice (for Commodity Loan).

For General Members, attach the following:

- ◆ Copy of Mandate Form.
- ◆ 6 Months Bank Statement.
- ◆ ZRA Tax Clearance.
- ◆ Cash-flow projection (In Business).

LOAN APPLICATION FORM

A. TERMS AND CONDITIONS

1. A Member is eligible for an Emergency loan after saving with the CareCoop for One (1) month.
2. A Member is eligible to access full loan benefits from CareCoop after saving for at least Three (3) months or within their savings for the first Three (3) months.
3. Deductions shall be effected within Thirty (30) days of the loan being granted.
4. Loan Repayment Period cannot exceed end of contract date.
5. This loan cannot be granted if net pay is less than 20% of applicants' income after Tax & NAPSA, but not less than K500.00 after deductions- which ever one is higher.
6. Unpaid loan balances shall be deducted from the Member's savings with full interest.
7. Members applying for Land, CareCoop Land as well as Building Loans will have to provide Title Deed as security & CareCoop interest shall be noted, with all security perfection costs borne by the Member/Applicant.
8. Security provided for Building and Non CareCoop Land Loans shall require valuation by a CareCoop approved Evaluator, with costs borne by the Member/Applicant.
9. A Member must have a minimum of 20% in savings calculated on the total outstanding loan balances including the new amount applied for except for Emergency and Share Purchase loans.
10. A Member who has missed any monthly repayments on a running loan will have to clear all outstanding arrears and make consistent repayments for at least 3 months before being allowed to access a new loan.
11. Only Members from Member Organisations that have gratuity schemes with CareCoop shall be eligible to use their earned gratuity that has been received by CareCoop as security against their loan(s).
12. CareCoop reserves the right to approve or reject any Member loan application.
13. Ordinary Loans should be fully secured; 50% by accrued gratuity kept at CareCoop and 50% by accumulated savings.

B. PERSONAL INFORMATION: (to be filled by the loan applicant)

Member's Name:	Physical Address:
NRC or Valid ID No.:	Postal Address:
Membership No.:	Member's Organization:
Contact Telephone No.:	Length of Membership:
Email Address:	Alternative Email Address (Personal):

C. LOAN LIST/PRICE GUIDE (Member to select type of loan)

TYPE OF LOAN	TICK	MAXIMUM LOAN AMOUNT	MONTHLY INTEREST RATE	INSURANCE	MAXIMUM LOAN TENURE
1. Premium		Twice member savings	2.0%	1%	18 Months
2. Ordinary		Twice member savings	1.0%	1%	36 Months
3. Rental Plus		Three times basic pay	1.5%	1%	12 Months
4. Education		ZMW30,000	1.5%	1%	8 Months
5. Emergency		ZMW15,000	2.0%	1%	5 Months
6. Family Holiday		ZMW20,000	1.25%	1%	8 Months
7. Commodity		ZMW250,000	1.25%	1%	36 Months
8. Building		ZMW300,000	1.0%	1%	36 Months
9. Land Purchase		ZMW250,000	1.0%	1%	36 Months
10. Care Coop Land		Care Coop market value	1.0%	1%	36 Months
11. Vehicle		ZMW250,000	1.25%	1%	36 Months
12. Vehicle Insurance		5% of motor vehicle price	1.0%	1%	12 Months
13. Share Financing		Care Coop share value	1.0%	1%	12 Months
14. Home Improvement		ZMW20,000	1.0%	1%	8 Months
15. Water Solution		ZMW20,000	0.0%	1%	12 Months
16. Consolidation Product		Total loans consolidated	1.5%	1%	36 Months
17. Insurance Premium		ZMW50,000	1.0%	1%	12 Months

D. LOAN APPLICATION: (to be filled by the loan applicant)

Loan Amount Applied: ZMW _____	Amount in Words: Kwacha _____
Period of Repayment: (Months) _____	Purpose of the Loan: _____

E. HUMAN RESOURCES/PAYROLL ACCOUNTANT (where applicable)

Terminal Benefits accrued to date: ZMW _____

 HR Manager/ PR Accountant (Sign)

 Date

F. DECLARATION BY APPLICANT:

I..... do declare that the information given above is true and correct to the best of my knowledge. I also declare that I will abide by the terms and conditions of this loan and that I will honour my obligations as spelled 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/Bank Account (as per DDACC Mandate submitted to CareCoop - for General Members) as repayment for this loan. My payroll/Bank Account deductions will also include my monthly savings contribution as per mandate already given to Care Coop by myself.

Approved amount to be paid to member by: <i>(Tick where applicable)</i>	Cheque: (ZMW10.00 fee will apply, maximum limit of K25,000.00 per leaf)	<input type="checkbox"/>
	Bank Transfer: (ZMW55.00 fee will apply)	<input type="checkbox"/>

Bank Account Details

Bank Name:	Bank Branch:
Account Holder Full Name:	Account No.:

Signature

Date

G. OFFICIAL USE ONLY

CREDIT REVIEW

Member Name:	Member Number:
Amount Approved: ZMW:	Period of Repayment: (Months)
Monthly Principal Deduction: ZMW:	Monthly Interest Deduction ZMW:
Total Care Coop Deduction: ZMW:	Length of Membership:

H. CURRENT OUTSTANDING LOANS

Loan Type	Loan Amount (ZMW)	Balance (ZMW)	Monthly Repayment (ZMW)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
TOTAL			

I. SECURITY

Total Savings: ZMW	Savings to Total Loan Balance (%)	
_____	_____	
Name _____	Signature _____	Date _____

J. REVIEWED BY:

_____	_____	_____
Name	Signature	Date

APPROVAL (PART A)

_____	_____	_____
Name	Signature	Date

APPROVAL (PART B)

1	_____	_____	_____
	Name	Signature	Date
2	_____	_____	_____
	Name	Signature	Date
3	_____	_____	_____
	Name	Signature	Date
4	_____	_____	_____
	Name	Signature	Date
5	_____	_____	_____
	Name	Signature	Date
6	_____	_____	_____
	Name	Signature	Date