

MICRO-FINANCING SOLUTIONS (MFS) LIMITED
2 Trafalgar Road, SBAJ Complex
Kingston 5

LOAN APPLICATION FORM

Micro- Financing Solutions (MFS) Limited at no time holds itself to be in the business of giving advice, but will from time to time express opinions and recommendations as it sees fit, and where this is the case, any opinions and recommendations (if any) made pursuant to the above, are given in good faith but without legal responsibility, and without any intention to create a partnership, joint venture, agency or employment relationship and are subject to change without notice.

PERSONAL INFORMATION

Name of Applicant: _____
First Middle Surname

Date of Birth: _____ Sex: Male Female TRN: _____
(DD/MM/YY)

I.D. Details: _____ Email: _____

Home Address: _____

a. Do you: Own home Rent Home How long? _____ Other _____

b. If at present address less than 1 year, please state previous address: _____

Contact Nos.: Work _____ Home _____ Cell _____

Marital Status: Married Divorced Widow/Widower Single Common-Law

Name of spouse/common-law _____ Occupation of Spouse _____

Work Address of Spouse/common-law: _____

Contact Tel. No. for Spouse/common-law: Business: _____ Home: _____ Cell: _____

Number of dependents: _____ Ages: _____

EMPLOYMENT AND FINANCIAL INFORMATION

Present Employer: _____ Employer's Address: _____

Occupation: _____ Length of current employment: _____

Annual Income: _____ Net Take Home Pay: _____:

Previous Employer: _____ Address: _____

Where do you transact your banking business? _____

Do you presently have a loan at any other financial institution? Yes no

If yes, please state: where _____ Balance on account \$ _____

Are you a guarantor on another person's loan? Yes no

If yes, please state: Where _____ Amount \$ _____

REFERENCE INFORMATION

**NAME AND ADDRESS OF CLOSEST RELATIVE OR FRIEND NOT LIVING WITH YOU
(One must be a relative)**

1. Name: _____ Phone Numbers: _____
Address: _____ Relationship: _____

2. Name: _____ Phone Numbers: _____
Address: _____ Relationship: _____

3. Name: _____ Phone Numbers: _____
Address: _____ Relationship: _____

SELF-EMPLOYED/BUSINESS OWNERS

Name of Business: _____

Address of Business: _____

Business ownership: self family partnership other _____

How would you describe your business? Buying & Selling Personal Services Light Manufacturing Production
 Agriculture Other (please specify): _____

Is your Business Premises? Owned? Rented? Other? _____

Period of operation? _____ Full-time? Part-time? Seasonal? Other? _____

Describe your products and services: _____

No. of Employees? (if any) _____

Any other source of income? _____ (amount and frequency) _____

LOAN REQUEST

Total amount requested? _____ Interest Rate: _____

What is the purpose of the loan? _____

Weekly/fortnightly/monthly/balloon payment Installment? _____

LOAN AGREEMENT

By signing below, I/We understand that:

I/am/ We/are responsible for the payment of all or any principal, interest, late fees and service charge owed by the Borrower/s to **MFS**.

I/We agree that in the case of default of payment and it is deemed necessary to use an outside Collector, Bailiff, Attorney or any other Legal alternative in recovery of the said amount, all fees will be paid by us/me.

If any installment is not paid on the due date, the whole balance of the amount loaned then unpaid, shall become due and payable, with interest charge agreed on from the date of default until payment.

I/We hereby authorize **MFS** to obtain any information required relative to my/our credit history or application for credit and any such is hereby authorized to provide the requested information. **MFS** is further authorized to disclose to any credit bureau, reporting agency business or person such information regarding my/our credit history as is appropriate and lawful in the circumstances. I/we jointly and severely agree to indemnify and save **MFS** from any and all claims in damages or otherwise arising from any disclosure.

I/We hereby declare that the above information is true and complete. I/We agree to read and be bound by **MFS** Agreement.

Applicant's Signature

Date

SECTION F: OFFICE USE ONLY

Repayment Capacity Ratio (Total Debt Service Ratio not to exceed 60%):

Present Monthly Loan & Interest Payments	
Proposed Monthly MFS loan & Interest Payments	
Total Monthly Loan & Interest Payments	
Total Debt Service Ratio (%) (T.D.S.R.)	
$\text{Total Debt Service Ratio} = \frac{\text{Total Loan \& Interest Payments}}{\text{Net Profit}} \times \frac{100}{1}$	

Approved for Disbursement: yes no **Reason:** _____

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