



Social Development Fund

Kanifing Institutional Layout
Kanifing
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FORM III

LOAN APPLICATION FORM (CBOs & Groups)

APPLICATION NUMBER

Name of Organization: _____

Address of Organization: _____

Contact Person: _____ Tel: _____

Organization Registration No: _____ TIN: _____
(Attach copies of this document) (Attach copies of this document)

Total Membership: _____ No. of Female: _____ No. of Male: _____

Years of Operation: _____

BANKING INFORMATION

List of Bank(s) & Account No. (s): *(please attach bank statements where feasible)*

SR #	Name of Bank	Address of Bank	Account Number	Current Bank Balance
1				
2				
3				
			Total	

PORTFOLIO INFORMATION

Amount of Loan Outstanding: _____ Amount(s) in Default to Date: _____

Average Loan Size: _____ Portfolio at Risk (<30days): _____

Are you currently enjoying any Credit or Lease Facility (Tick the one appropriate)? YES ___ NO ___

If yes give details below:

SR #	Lender's Name	Amount Borrowed (GMD)	Duration	Expiry Date	Balance Outstanding
1					
2					
3					
Total					

REQUEST

Total No. of Applicants: _____ No. of Female: _____ No. of Male: _____

Amount of Loan: _____ in words: _____

Purpose for which Facility is required: _____

Intended Payment Duration: _____ Grace Period Required: _____

Source of Repayment: _____

How do you intend to repay (Frequency): _____

Security Proposed: _____

Declaration and acceptance

I/We hereby certify that all the particulars given above are true and complete. We **understand that we will be notified by letter if the application is approved.**

Please remember to enclose:

- 1. Formal Letter of loan Request
- 2. Copy of the organization's TIN certificate;
- 3. Copy of Group Registration Certificate; and
- 4. Copy of Constitution
- 5. Copy of List of end Borrowers & Amounts. (Where applicable)

Name: _____ Position: _____

Signature of applicant Date _____

Stamp/Seal:

Witness By:

I/We confirm that above instructions are true and complete.

Name: _____ Position: _____

Signature of witness Date _____

FOR OFFICE USE ONLY

DATE SUBMITTED TO RFO: _____ RECEIVED BY _____

SIGNATURE: _____

Date Received By DO: _____ Signature: _____