



Prime Bank

ASSET FINANCE

APPLICANT'S DETAILS

Full Name:.....

(in Block Letters)

Postal Address: P.O. Box: Code: Town:.....

Telephone:

Office No Residence No.....

Mobile No Fax No.....

Email Address

Physical Residential Address:

District: Town

Location and Road: Plot /House No.....

Estate:.....

Ownership(tick √ appropriate box)

☐

Rented

☐

Owned

If Tenant, name and address of Land Lord:

.....
.....

How long have you lived at the above address.....

(i) Individual

ID/Passport No:..... Expiry Date:.....

Nationality:..... Age:..... PIN No:.....

Marital Status:.....

Profession:..... Position:.....

Name of the Current Employer:.....

Business:..... PIN No:.....

Employers Physical Address:.....

Employers Postal Address:.....

How long have you worked with the above Employer:.....

(ii) Firm/Company

Name:..... PIN No:.....

Nature of Business:.....

Date of Registration/Incorporation:.....Registration No:.....

Particulars of Directors/Partners:

Name	PIN No.	I/D No./ Passport No.	Nationality	% of Shares

Authorised Capital:.....Paid up Capital:.....

B. BANKING DETAILS

Name of Bank:.....Branch:.....

Type of Account & Account No:

C. EXISTING BORROWING DETAILS

Name of Bank	Type of Facility	Outstanding	Monthly Instalment	Security					
				Vehicles			Others		
				No	Make/ Model	Value	L.R No	Location	Value

D. VEHICLE/MACHINERY/EQUIPMENT TO BE FINANCED**(i) Vehicle**

Registration No:.....Year:.....

Make:.....Model:.....

H.P. or C.C.....Engine No:.....

Chassis No:.....Type of Body:.....

Colour:.....Accessories:.....

New or Used;.....Purpose;.....

Vehicle will be kept on Plot No:.....Seating Capacity:.....

(ii) Machinery/Equipment

Serial No:.....Year:.....

Make:.....Model:.....

New or Used;.....Purpose;.....
 Machinery/Equipment will be kept on Plot No:
 Amount of Loan Period: Repayment:.....

E. MONTHLY INCOME

Business	
Salary (Net)	
Other	

F. REFEREES

NAME:	ADDRESS
1	
2	

I /We warrant the answers given above are in every respect true and that I/We have not withheld any information that is likely to affect acceptance of this proposal and I/We agree that if accepted, the proposal on the reverse shall be the basis of the contract between us

1.Name:..... Designation:..... Signature:..... Date:..... 2. Name:..... Designation:..... Signature:..... Date:.....	Affix company seal/ stamp here
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**FOR OFFICE USE ONLY
FINANCIAL SCHEDULE**

Value	
Purchase Price	
Initial Payment	
Option fee plus service charge	
Balance	
Rate of Interest	
Finance Charges	
Government Registration Fees	
TOTAL	

Repayment.....monthly instalment of Kshs.....
commencing..... and one final instalment of Kshs.....
payable on
Insurance company:.....
Dealer:.....

Remarks

Authorised Signatory

Authorised Signatory

Approved / Rejected

Sanctioning Authority