



PSMFin SME BUSINESS LOAN APPLICATION

PSMFin 03

Thank you for your recent enquiry in relation to our credit facilities. We require this application form & listed attachments to consider your request.

The institution responsible for processing your information is Premier Service Microfinance Pvt Ltd. an institution licensed & regulated by the Reserve Bank of Zimbabwe

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SECTION 1 : BUSINESS DETAILS

Please tell us about your business. This information will assist us in providing a timely & adequate professional response

Registered Business Name

Trading Name *(if different from above)*

Business Address

Contact Person & Designation

Legal Status *(e.g. Sole Trader, Partnership & Company etc.)*

Primary Business Activity

Telephone & Email

Bank & Account Number

Business Premises Status
(Owned Leased & Rented)

No of Employees

1.2 Business Financial Details

Period ending (DD/MM/YY)

Current Values

Assets		(000's)	Liabilities		(000's)
Land & Buildings	\$	<input type="text"/>	Creditors	\$	<input type="text"/>
Machinery & Equip	\$	<input type="text"/>	Obligations	\$	<input type="text"/>
Furniture & Fittings	\$	<input type="text"/>			
Bank & Cash	\$	<input type="text"/>	Net Worth	\$	<input type="text"/>
Other	\$	<input type="text"/>			

	Period 1	Period 2	Period 3
Sales	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Expenses	<input type="text"/>	<input type="text"/>	<input type="text"/>
Net Profit after Tax	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3 Business Borrowings

Facility Type	Institution	Amount Outstanding (000's)
Overdraft	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>

SECTION 2 : PERSONAL DETAILS

Your personal details are important to us, while it is important to understand your business it is also important to understand its owners.

A. Principal Business Owner

Full Name

ID Number

Tel. Number

Residential Address

Gender	<input type="text"/>	Date of Birth	<input type="text"/>
Residential Status (e.g. Rented.)	<input type="text"/>	% Shareholding	<input type="text"/>

B. Second Business Owner

Full Name	<input type="text"/>		
ID Number	<input type="text"/>	Tel. Number	<input type="text"/>
Residential Address	<input type="text"/>		
Gender	<input type="text"/>	Date of Birth	<input type="text"/>
Residential Status (e.g. Rented.)	<input type="text"/>	% Shareholding	<input type="text"/>

SECTION 3 : LOAN APPLICATION DETAILS

Please tell us about your current Financial Requirements

Loan Amount Required	\$	<input type="text"/>
Purpose of Loan	<input type="text"/>	
Repayment Period	<input type="text"/>	

a. Attachments (Minimum required – complete requirements provided by Credit Officers) – Tick Submitted***

Business Plan	<input type="checkbox"/>	Tax Clearance Form	<input type="checkbox"/>
Copy of IDs for all Directors	<input type="checkbox"/>	Proof of Residence for Directors	<input type="checkbox"/>

Management of Accounts

Bank Statements *(at least 3 months)*

Resolution to Borrow

Business Records

Registration Documents *(e.g. Certificate of Incorporation, CR12, CR2 CR14, Articles & Memos etc.)*

Loan Use Breakdown

Quotations of Items to be funded

b. Security/ Collateral Proposed

Security Type	Description	Value (\$)

SECTION 4 : DECLARATION & SIGNATURE

I/WE the undersigned certify to the best of his or her or their knowledge and belief, that all information contained in this Loan Application and in the accompanying statements and documents is/are true, complete and correct. The undersigned agrees to notify Premier Service Microfinance Pvt Ltd (PSMFin) immediately of any material changes in this information. It is further agreed that, whether or not the Loan herein applied for is approved, the undersigned will pay or reimburse PSMFin for the costs, if any, of surveys, title or mortgage examinations, appraisals, etc., performed by non-PSMFin personnel with the consent of the applicant. The undersigned authorizes PSMFin to contact any Bank and Trade Creditors/Debtors it deems necessary without further notice.

Name of Authorized Company Representative

Designation **Signature** **Date**

Name of 2nd Company Representative *(if any)*

Designation **Signature** **Date**