



USHURU SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LIMITED  
M-SACCO MOBILE BANKING APPLICATION FORM.

DATE.....

PLEASE COMPLETE DETAILS IN CAPITAL LETTERS

Full Name..... Applicants ID NO.....

Employment Number .....Membership Number.....

Mobile Phone no(s)..... (Safaricom Number ONLY)

Email Address .....

I want to use M-SACCO on the following menu accounts:

- |  |   |
|--|---|
| <input type="checkbox"/> Investment Withdrawal   | <input type="checkbox"/> Loan Payment (Maximum Kshs 70,000) |
| <input type="checkbox"/> Sacco balance Enquiry   | <b><u>Information</u></b>                                   |
| <input type="checkbox"/> M-Sacco balance Enquiry | <input type="checkbox"/> Guarantors                         |
| <input type="checkbox"/> Sacco Payments          | <input type="checkbox"/> Next of Kin                        |

Please attach a copy of your national identification card. You MUST be registered with M-PESA to use the M-SACCO Service.

(\*346#) is charged Kshs 5 and each SMS's shall be charged a flat rate of Kshs 10. This amount shall be deducted from your account each time an SMS is sent.

**Declaration by the Applicant:**

I hereby apply for M-Sacco solution. I warrant you that the information given above is true and complete and I authorize you to make any inquiries necessary in connection with this application. I accept and agree to be bound by the conditions of use. I agree that I am liable for charges incurred through the use of this Facility. I hereby indemnify the Sacco against all losses that they may incur as a result of my use of the facility. I understand that the Sacco reserves the right to decline the application without giving reasons.

Applicants ID NO..... Signature:.....

**FOR OFFICIAL USE ONLY**

Verified By:\_\_\_\_\_ Date Verified:\_\_\_\_\_

Approved By:\_\_\_\_\_ Date Approved:\_\_\_\_\_