



PAMOJA SAVING ACCOUNT APPLICATION FORM

APPLICANT'S DETAILS

Group Name*: _____

Permanent Address*: _____

Email*: _____ Phone No. *: _____

Description: _____

Officials

NAMES	TITLE	ID NUMBER	MOBILE NUMBER	SIGNATURE

Signing mandate: All to sign Any to sign 2 to sign

TO USHURU SACCO DT SACCO SOCIETY LIMITED

I/ We agree that this account shall be operated solely at the discretion of the SACCO and hereby agree to indemnify the SACCO at my/our cost against any loss or claims arising out of the account being closed by the SACCO without notice due to unsatisfactory performance. I/We confirm having read and understood the General Terms and Conditions contained in the overleaf for operating the FOSA Account, this _____ day of _____ year _____ and which I/we accept.

Sign: _____ Sign: _____ Sign: _____

FOR OFFICIAL USE ONLY

Captured by: _____ Sign: _____ Date: _____ / _____ / _____

Approved by: _____ Sign: _____ Date: _____ / _____ / _____

Account number generated

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Terms and Conditions

- The account is available for all active Sacco Members.
- The account does not attract periodic ledge fees.
- An ATM card and mobile banking link will not be issued in respect of the account.

Application requirements

- Attachment of ID card copy
- One passport photo for signatories
- A duly filled account opening form
- Fully signed minutes of the group (with the recommendation of account opening)
- The group constitution (guiding rules)