Credit Card Application Form



APPLICATION TYPE				
☐ New ☐ Increase Credit Limit	☐ Decrease Credit Limit ☐ Close			
CHOOSE LIMIT BETWEEN K7,500 - K50,000				
K7,500	☐ K25,000			
K30,000 K40,000 K50,000 Other K				
Title: Mr Mrs	Ms Other(Please state)			
First Name:	Last Name:			
Nationality:	D.O.B: Gender: Male Female			
Country of Birth:	Marital Status: Single Married Other*			
Primary ID Type:	If Other, please state:			
ID Number: Expiry:	Email Address:			
Home Address:				
Work No:	Mobile No:			
EMPLOYMENT DETAILS				
Occupation Description:	Employer Address:			
Name of Current Employer:				
Date of Employment:				
Employer Phone No:				
Last three jobs:				
Employer Name:	From: To:			
Employer Name:	To:			
Employer Name:	To:			
ADDITIONAL CARD HOLDER				
1. CARD HOLDER				
First Name:	Last Name:			
Card Limit:	Card holder Signature:			
2. CARD HOLDER				
First Name:	Last Name:			
Card Limit:	Card holder Signature:			

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INCOME AND EXPENSES MONTHLY NET INCOME **AMOUNT** Κ Salary Κ Other Income K **TOTAL INCOME** (Less) **MONTHLY EXPENSES MONTHLY NET EXPENSES** Rent Κ Electricity Κ Κ Water Telephone Κ School Fees Κ Living Expenses Κ K Entertainment / Videos Travel / Fuel Κ Other Expenses Κ TOTAL EXPENSES Κ **NET INCOME** Κ (Less) **MONTHLY LIABILITIES MONTHLY NET EXPENSES Credit Cards** Κ Home Finance Κ Other Loan Repayments Κ New Credit Card Repayments (5% of Credit Card Limit) Κ TOTAL MONTHLY LIABILITIES K **SURPLUS** K OFFICE USE ONLY Net Income Total Monthly Liabilities INCOME/DEBTRATIO



ASSETS POSITION

Assets	Total Assets (A)	Liabilities	Total Amou	•	Lender's Name
House	K	Home Finance	K	K	
Car	K	Other Loans	K	K	
Land	K	Credit Cards	K	K	
Personal Effects	K	Others:	K	K	
Life Policy	K	Others.	K	K	
Superannuation	K		K	K	
Others	K		K	K	
Total Assets (A)	К	Total Liabilities (B)	K	K	
Net Asse	ts (A) - (B)	K			
Have you ever had legal If so, details Have you ever been adjusted in the failure to answer and void and immediately related to the failure with the Credit enquire with the Credit	Usted and banckrupt of the release of any informations.	you for recovery of a door had a bankruptcy proof or if false information is assession of any assets formation held by CCF	oceeding aga s given will rer financed by C to a Credit Bu	nder any Finance Contr	No No
I/We hereby declare the carry out any investigation		nis application for finar	nce is true and	l accurate and that CCF	is authorised to
Applicant's Signature:		Dat	e of Applicati	on:	
OFFICE USE ON		sitively identified this /	these applica	ants by sighting his / he	r/theirID:
Officer Name	e:	Appro	oved Limit:		
Officer Signature	:		Date:	I	
CHECKLIST:					
3 Pay slips verified		☐ CDB Check		☐ Loans St	atement
Bank Statement fro	m the last 3 months	Confirmation of E	Employment I	Letter World Cl	neck

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