(A) <u>APPLICATION TO RESCHEDULE MY LOAN REPAYMENT</u>

I _____ ID No. _____ Mno. _____ hereby apply to

reschedule my loan repayment as follows:

a) Extend the repayment period by an additional _____months effective_____.

b) Adjust the repayment period from the current KShs_____ per month to KShs _____ per

    month for the next _____ months.

Loan Type _____ Original Amount _____Remaining period _____ months.

Loan Type _____ Original Amount _____Remaining period _____ months.

Loan Type _____ Original Amount _____Remaining period _____ months.

Signature of loanee _____   Date _____

<u>Conditions</u>

a) This application must be supported by an official document indicative of reduction/ loss of income.

b) Extension of repayment period of more than three (3) months must be approved by the guarantors.

c) The maximum extension period shall not be more that 12 months.

d) There will be no total waiver. The applicant must endeavor to pay <u>full monthly</u> interest and an amount
    towards principal balance based on the new repayment period.

e) Applicants will not qualify for any other Sacco product during the period of rescheduling.

(B) <u>GUARANTORS APPROVAL (to be completed if rescheduling is for a period of more than 3 months)</u>

We the undersigned hereby accept jointly and severally accept the extension of the above loan repayment period

from _____ months to _____ months.

Name	Member no.	Signature

Witnessed by

Name   _____   Mno.   _____

Signature_____   Date   _____

(C) <u>FOR OFFICIAL USE ONLY</u>

Loan Type	Original Amount (KSh)	Original Period (months)	Current Remaining Period	New Loan Period	New Monthly deductions (KSh)

Prepared by: _____Title: _____Signature: _____ Date: _____

Checked by: _____Title: _____Signature: _____ Date: _____

Verified by: _____Title: _____Signature: _____ Date: _____

<u>Credit Committee Approval</u>

Application for extension of repayment period approved/rejected _____

_____

_____

_____

_____   _____   _____
Chairman   Signature   Date

_____   _____   _____
Secretary   Signature   Date

_____   _____   _____
Member   Signature   Date