

B (For Group/Organisation customers only) Customer code

Name of Signatory:  (First Name)  (Middle Name)  (Last Name)

Date of Birth:     Gender: Female: ☐ Male: ☐

Mother's Name:  Father's Name:

Marital Status: ☐ Married ☐ Remarried ☐ Single ☐ Widowed ☐ Divorced ☐ De-facto

Spouse Name:  Education Qualification:  Name of Clan:

Occupation:  Employer:

☐ Number of Family Members ☐ Number of Children ☐ Hide word

Address:  Mobile No:

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Address:  Mobile No:

I/We agree to comply with and abide by all rules of Kada Poroman Microfinance Ltd to deposit, withdraw funds, guarantee loans or apply for loans and to repay loan principal including interest charged according to agreed terms and conditions under the KPML policies and any charges made from time to time. Furthermore, I/We agree that Kada Poroman Microfinance Ltd has the right to deduct any fees from my/our account that is deemed necessary for the upkeep of and including any other charges to the account or guarantee of loans I/We authorised and who defaulted under KPML policies.

Method of Operation ☐ Self ☐ Two to Sign ☐ Three to Sign ☐ All to Sign

Signatory 1  Signatory 2  Signatory 3  Signatory 4

Name: \_\_\_\_\_ Name: \_\_\_\_\_ Name: \_\_\_\_\_ Name: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_ Title: \_\_\_\_\_ Title: \_\_\_\_\_

Office Use Only:

KPML Officer: \_\_\_\_\_ Approved/Declined By: \_\_\_\_\_

Officer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_