# PERSONAL LOAN APPLICATION FORM

Please complete in BLOCK LETTERS.

## Bank Use

*Processing Branch Code* | *Staff/Direct Sales ID* | *Date* dd / mm / yy

*AO Name* | *Signature*

*BM Name* | *Signature*

## SECTION A - LOAN APPLICATION DETAILS

### Part 1: Personal Information (Individual Customers)

Title Mr | Mrs | Others *(specify)* | Male | Female

Name

(Surname) (First Name) (Other Names)

Marital Status Single | Married | Others *(specify)* | Date of Birth (DD MM YYYY)

Nationality | Mobile Phone

E-mail Address

Residential Address

*(Not P.O Box)*

Resident Owned Type | Rented | Staying with Family | Others | Length of Time at Current Address | Month(s) | Year(s)

Highest Educational Qualification

Mode of Identification | Nat. ID | NDL | Others *(specify)*

Identification Number

Name of Spouse | Spouse's Mobile Phone

Bank Verification Number *(BVN)*

### Part 2: Loan Request Details

Loan Amount (₦)

Loan Amount in words (₦)

Tenor(months)

Access Bank Account No. 1

Access Bank Account No. 2

## Part 3: Employee Information (To be completed by employee)

Job Title

Staff ID No.

Employer's Name

Office E-mail

Office Address

Industry: Oil & Gas ☐ Manufacturing ☐ Transportation ☐ Governmental Parastatal ☐

Others _____

Cadre/Level

Number of Years in Current Employment

Annual Income (₦)

Terminal Benefits (₦)

Monthly Income (₦)

Salary Due Date (DD MM YYYY)

## Part 4: Employee Authorization (To be completed by employee)

I _____ hereby certify that the above information given by me is correct to the best of my knowledge and irrevocably undertake, covenant and agree that my employer should domicile my salary and allowances to Access Bank Plc. This undertaking shall be a continuing and irrevocable obligation and shall not be withdrawn by me until my obligations, indebtedness or liabilities to the bank have been fully settled, as evidenced by the written consent/confirmation of Access Bank.

*Authorized Signatory*

(DD MM YYYY)

## Part 5: Employer Undertaking (To be completed by employer)

In consideration of a loan facility request by our employee to Access Bank PLC, we hereby confirm that all information provided by the applicant above is true.

We undertake and covenant to (1) To domicile the salary account of the employee with Access Bank for the entire duration of the facility. (2) To domicile with Access Bank all monetary/terminal benefits due from us to the employee upon the employee ceasing to remain in our employment (3) To inform the bank within two (2) working days of resignation, or transfer or dismissal or termina-tion of the employee. We agree that in the absence of a notification of resignation, transfer, dismissal or termination of the employee, the receipt by the Bank of the employee's terminal benefits along with an advice regarding same shall suffice.

Date of Employment of Employee (DD MM YYYY)

Confirmed Status of Employee: Confirmed ☐ Probation ☐

HR Name

E-mail Address

*Designation*

*Authorized Signatory*

Mobile Phone

Official Stamp

Date
(DD MM YYYY)

*Please note that any additional loans or deductions for this employee should only be approved upon considering all existing borrowing obligations—including cooperative or employer-based loans—to ensure the employee's capacity to meet ongoing repayment obligations to Access Bank.*

HR Name

E-mail Address

*Designation*

*Authorized Signatory*

Mobile Phone

Official Stamp

Date
(DD MM YYYY)

*Please note that any additional loans or deductions for this employee should only be approved upon considering all existing borrowing obligations—including cooperative or employer-based loans—to ensure the employee's capacity to meet ongoing repayment obligations to Access Bank.*

## Part 6: Existing Facilities with Access Bank and other Lenders/Employers

| S/No | Name of Bank/Organisation (Including Access Bank) | Type of Facility (Including Credit Cards) | Repayment Amt | Repayment frequency (monthly, Quarterly, Yearly) | Current Outstanding Balance |
|---|---|---|---|---|---|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |

*Please note that any additional loans or deductions for this employee should only be approved upon considering all existing borrowing obligations—including cooperative or employer-based loans—to ensure the employee's capacity to meet ongoing repayment obligations to Access Bank.*

## Declarations

You make the following declarations to us:

The Loan is governed by this application form, and the Terms and conditions attached hereto. The acceptance of your application for a loan shall be at the discretion of the Bank and we shall not be obliged to furnish reasons to you should your application not be accepted. If we accept your application, we will let you know in writing.

1. I am at least 21 years of age

2. I confirm that all the details given in this application are true and complete and I understand that these will be used to form the basis of any facility offered.

3. I authorize you to conduct any enquiry you consider necessary and appropriate for the purpose of evaluating this application from my/our employer, if any and from any other source to which you may apply including a credit search with one or more credit reference agencies, and confirm that I am not currently under administration, sequestration, debt review, or a restructuring order.

4. I accept that at any time before any facility offered to me is completed; Access Bank may withdraw, revise or cancel such offer.

5. I am aware that the rate of interest and monthly repayments of any variable rate facility granted may be varied from time to time.

6. I undertake to notify the Bank immediately in writing of any situation which materially changes the representation of this application, and I understand that the Bank may amend or withdraw any offer previously made.

7. I understand that Access Bank will disclose my details to any Access Bank's insurers, auditors, professional advisers or any persons providing services to Access Bank who have agreed to treat my personal details as confidential, or if required to do so by law or any relevant regulatory body, as envisaged by this application form or with my written consent.

8. I acknowledge that Access Bank may at any time transfer Access Bank's interest in the facility, together with any security I give, to any other lender, bank or institution, without first seeking my permission and I authorize Access Bank to disclose any information which Access Bank holds/ possesses about me to such entity.

9. I hereby authorise the Bank to disclose any and all information in respect of my account to the guarantors for as long as the guarantor's liability of the debt outstands.

10. I agree that by taking up all or part of any facility offered by Access Bank on the basis of the information provided on this application form and by signing this form, I agree to accept all the conditions set out in Access Bank's facility offer letter. I agree that if I receive more than one letter, the letter showing the latest date will be that which applies.

11. I understand that the Bank may set off any amounts due under the agreement against any sums owing by me/us to Access Bank (whether jointly or severally) and otherwise combine and consolidate all or any of my/our accounts with Access Bank at any branch of the Bank and whether current, deposit, loan or any other nature and whether accounts in my name or jointly with others and whether in any other currency. Any currency conversions required to be effected by Access Bank in pursuant to this right shall be effected in accordance with the usual practice of the Bank.

12. I have personally completed this application form, or if complet-ed by someone else, have read and checked every answer and I have appended my signature fully understanding the implication of the wordings and terms so contained.

13. I commit that this facility shall not be utilized for any acts of terrorism or other related acts.

I hereby confirm my application for the above facility and certify that all information provided by me above and attached thereto is correct and complete. The facility shall not be utilized for any act of terrorism or other illegal or prohibited acts.
I authorize you to make any enquiry you consider necessary and appropriate for the purpose of evaluating this application.

1. Name of Signatory

*Signature of Applicant*

Date
(DD MM YYYY)