

PRINCIPAL CAPITAL
L I M I T E D



CORPORATE LOAN APPLICATION FORM

Account Name:

Branch:

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Account Number:

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Date:

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BUSINESS PROFILE

Name of Business:

Type of Company: **Sole Proprietorship** **Limited Liability** **Others**

Date of Registration: Registration No.:

Office Tel. No.: No. of Years in Business:

E-Mail Address:

Company Address:

Ownership Structure:

5 Major Customers:

Suppliers:

Monthly Turnover:

LOAN REQUIREMENT

Facility Amount: Ghc In Words

Tenure:

Purpose:

Repayment Structure:

Source of Repayment:

APPLICANT DECLARATION

I attest that the details provided above are true and correct, and by my signature below I authorize the obtaining of any references from other places which may seem beneficial to Principal Capital Microfinance.

Customer's Name:	Customer's Signature:	Date:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Customer's Name:	Customer's Signature:	Date:
<input type="text"/>	<input type="text"/>	<input type="text"/>

APPLICATION REQUIREMENT

ITEM				
Passport Size Photo of Directors and Signatories	<input type="checkbox"/> <input type="checkbox"/>			
National ID of Directors and Signatories	<input type="checkbox"/> <input type="checkbox"/>			
Employment ID (If any)	<input type="checkbox"/> <input type="checkbox"/>			
Company Registration Documents	<input type="checkbox"/> <input type="checkbox"/>			
Directors Guarantee Agreement	<input type="checkbox"/> <input type="checkbox"/>			
Post-Dated Cheques	<input type="checkbox"/> <input type="checkbox"/>			
Collateral	<table border="1"> <thead> <tr> <th>Type</th> </tr> </thead> <tbody> <tr> <td>Description</td> </tr> <tr> <td>Value</td> </tr> </tbody> </table>	Type	Description	Value
Type				
Description				
Value				
Visitation Report				



FOR OFFICE USE ONLY

Interest Rate: (PM)

Factors	Rate	Score	Comment
Character	30	<input type="text"/>	
Capacity	20	<input type="text"/>	<input type="text"/>
Capital	10	<input type="text"/>	
Condition	15	<input type="text"/>	<input type="text"/>
Collateral	15	<input type="text"/>	
Common Sense	10	<input type="text"/>	<input type="text"/>
Total	100	<input type="text"/>	

RO Comment:

Name: Signature: Date:

Supervisor

Supervisor's Recommendation:

Name: Signature:

Management's Approval

Financial Controller: *Name* Approved: Not Approved:
 Signature

General Manager: *Name* Approved: Not Approved:
 Signature

Chief Executive Officer: *Name* Approved: Not Approved:
 Signature

PRINCIPAL CAPITAL
L I M I T E D



OUR PRODUCTS

- Fixed Deposit
- Periodic Contribution
- Principal Group Contribution
- Principal Inheritance Account
- Flexi Save
- Personal Loans
- SME Financing

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Your Success ... Our Business