

Pick Now Pay Later Application Form

PERSONAL INFORMATIO	N		
Title NAME OF APPLICANT			
Surname	First Name	Other Please Inc	dicate
Date of Birth dd mm yy Driver's License Passpo	M F	arital Status Married Single Others Please Indicate	Others
Residential Address		City/Nearest Landmark	
Home Phone No(s)	Mobile Phone No(s)	Email Address	
EMPLOYMENT INFORMAT	TION		
Occupation/Industry	Name of Employer	Designat	ion/Level
Gross Salary (GHS) Amount in W	/ords		
Net Salary (GHS) Amount in W	/ords		
TERMS OF EMPLOYMENT			
Permanent Cont	tract Part-time	Other Please Indicate	
Staff ID Number	Office Phone No(s)	Employer's Add	ress
DURATIONWITHCURRENTEMPLO	OYER Years	Months	
FINANCIAL/CREDIT INFO	RMATION:		
Account No.	Branch		
Do you have any outstanding Loan with Access/Any other Bank? Amount in Words	Yes No Outsta (If Yes	nding Balance Loan	
EXISTING CREDIT OBLIGATIONS	DEDITIONED DEDITION AT L	V	
	Amount	Tenor	Maturity Date

DIRECT DEBIT							
I hereby authorize Access Bank Ghana Plc with an amount of GHS	to debit my Current/Savin	g account null ly basis for th	mber e repayment of	my obligation.			
Signature of Applicant		Date					
NEW LOAN REQUEST							
Loan Amount Requested (GHS)	Amount in Words						
One Month Moratorium	Yes		No				
Requested Loan Tenor Purpose of the Ioan	Six Months		Twelve Mon	ths		1	
Item to be financed							
Vendor						J	
Applicant Signature			Date			1	
			dd	mm	уу		

EMPLOYER'S UNDERTAKING

To: The Man Access E Starlets '	Accra Sports Stadium GP 353	
LETTER OF	UNDERTAKING	
RE NAME O	F CUSTOMER	ACC. NO.
peri	od of	nas applied for a Personal Loan of GHSfor a
	-	is a permanent staff.
	nereby confirm that the employee's monthly	•
num Banl 5. Sho	ber at y k is obtained to the contrary.	d employee's remuneration will continue to be paid into account our branch unless written consent from Access oyment with this organization, we will advise you immediately and
6. Show	uld we find it necessary to change the emplohange.	loyee's location of employment, we will advise you immediately of
7. We	confirm that this letter of undertaking remair	is in full force until advised contrary by Access Bank Ghana Ltd.
For and	on behalf of (Name Of Organization)
Name of Position	e	or Admin
Name of Position	e	troller

LETTER OF REQUEST

Fror	n:										
<i>J</i> S C F	The Mana Access Bal Starlets '9 Opposite A P.O. Box G Osu, Accra	nk Ghar 1 Road Accra Sp SP 353		ım							
Dea	r Sir/Mad	am,									
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I	wish	to	repay	the	said	loan	within	an	installment	period	of
You	rs Faithfu	lly,									
Sign	ature										
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Nam	ne										