



NATIONAL FORESTRY AUTHORITY STAFF SACCO

Tel: 256773446348 | Email: staffsacco@nfa.go.ug, Bugoloobi, Uganda

Loan Application Number.:L--1

Terms and Conditions

- 1 Percent of the loan is deducted for insurance against death or total disability
- Interest is calculated for the whole period of the loan.
- You undertake to forfeit all or part of your SACCO savings and employment terminal benefits to cover any monies unpaid after expiry of the loan period.
- Undertake to pay a 5 Percent surcharge on remaining balance after the loan period.
- Loan amount and interest must be payable within your remaining contract period through salary deductions.
- Members not working with NATIONAL FORESTRY AUTHORITY STAFF SACCO must secure their loans with collateral acceptable to the loan committee.

Part A- For the Applicant:"NFA TIMBER GROUP

Name of Applicant:	NFA TIMBER GROUP - Phn: 256701211693
System Membership number:	1737306961
Sacco Group Membership Attachment:	LOAN ATTACHED TO NFA STAFF ACCOUNT MAIN LOAN APPLICATION THANK YOU !
Remaining contract period confirmed by HRM:	
Amount applied (in figures):	UGX 700,000
Amount in Words:	Seven hundred thousand Ugandan Shillings
Reason for loan application:	MEDICAL LOAN
Current savings:	UGX
Number of share owned in the society:	UGX 0
Annual interest rate:	1.25 Percent per Month
Period in which repayment of loan should be completed: (8 Months)	Start Date: 05.02.2025 End Date: 06.10.2025
Interest payable:	
Total amount:	
1 Percent of total amount deductible for insurance	UGX 7,000
Installments to be paid per month:	
Method of repayment	
Collateral for non-payroll repayments	
Estimated value of collateral	
Collateral verified by	
Signature of applicant	
Seconded/Guaranteed by:	HARRIET ANITE Sacco ID: 70 Sign: (Required)

Part B – For official use only :

Amount recommended by the committee	UGX:
Approved by:	
(Member of Loans Committee/HRM)	Name: Sign: Date / /20
Chairman Loans Committee	Name: NINSIIMA EDIDAHPhn 256773446348Sign: Date / /20
To be Checked and Verified by Treasurer	Name: , Phn: Sign: Date / /20

Note: You have Received this Electronic Loan Application from the System, required to Fill the missing fields, Scan and Send Back to the Sacco Admin for Approval. Thank you for Choosing NATIONAL FORESTRY AUTHORITY STAFF SACCO

Report Generated with Telspay Sacco System: Loan Number: L--1 Registered to NFA TIMBER GROUP, Email: telnetsystem2@gmail.com