

LOAN GUARANTEE FORM

- 1.0 Name of guarantor:
- 1.1 BVN:
- 1.2 Residential address:
- 1.3 Previous Residential address:
- 1.4 Office address:
- 1.5 Home telephone:
- 1.6 Office telephone:
- 1.7 Email:
- 1.8 RC Number:
- 1.9 Directors Number:

That I owned and opened the account with the particulars hereunder listed

- 2.0 Account name:
- 2.1 Account no:
- 2.2 Bank:
- 2.3 Branch:
- 3.0 That Chief/Dr/Mr/Mrs/Ms:

ofis well known to me

3.1 That I am fully aware that he/she has applied for a loan of from your bank.

4.0 That in the event of default, I attest that the above listed cheques should be used to extinguish the loan amount and accrued interest thereon.

4.1 That I am fully aware that it is a criminal offence to issue a DUD cheque under the law of the Federal Republic of Nigeria.

5.0 That this guarantee remains irrevocably in force until the principal and interest is fully extinguished.

5.1 I hereby confirm that I have referred the contents of this guarantee form to my solicitor and same have been read and explained to me. I therefore confirm that I perfectly understand the contents herein

GUARANTOR'S INFORMATION

Date Of Birth:/...../.....

Place Of Birth:

Nationality: State Of Origin:

LGA: Name Of Village:

Name Of Village Head:

National ID card Nos: Driver's Licence Nos:

International Passport Nos: PENCOM Pin:

Other ID:

DATA FORM

1. How well do you know?

Very well Fairly well Not well

2. How sure are you about business?

Very sure Not sure Cannot say

3. What is your assessment of ability to service his/her loan?
.....
.....

4. How sure are you that will repay the loan as at when due?

Very sure not sure Cannot say

5. I hereby authorized the bank to writes the total outstanding balance both principal and interest and equally date the cheque to payback the default sum of the customer.

Declaration

I undertake to pay back all outstanding loan and interest if fails to honor his/her obligation as at when due.

GUARANTOR'S NAME:

OCCUPATION:

SIGNATURE:

DATE:

NATURE OF BUSINESS.....

SOURCE OF INCOME.....

ACCT. OFFICER'S NAME:

SIGNATURE:

DATE:

GUARANTOR'S VERIFICATION FORM (KYCG)

NAME.....

RESIDENTIAL
ADDRESS.....

OFFICE ADDRESS.....

PLACE OF WORSHIP.....

PHONE NUMBERS.....

HUSBAND/WIFE DETAIL.....

NAME.....

RESIDENTIAL.....

OFFICE.....

PHONE NUMBERS.....

NEAREST BUST STOP.....

MAJOR LAND MARK.....

GUARANTOR'S SIGN.....

PLEASE CONFIRM YOU VISITED THE GUARANTOR AND THE INFORMATION PROVIDED ABOVE ARE
CORRECT (ACCOUNT OFF)

SIGN...../DATE.....

