



# UKRISTO NA UFANISI DT SACCO LTD

Tufanikiwe Pamoja



P.O. Box 872-00605 Nairobi, Tel; 0720 339 673, 020 7650581

Email: [info@ukristonaufanisicoop.com](mailto:info@ukristonaufanisicoop.com) | Website: [www.ukristonaufanisicoop.co.ke](http://www.ukristonaufanisicoop.co.ke)

Serial No.

Member No.

**CHECK LIST:** 1. For officials/directors (a. Copy of National ID, b. Copy of KRA Pin, c. Passport Size Photos), 2. Registration Fee, 3. Certificate of Registration, 4. CR 12, 5. Letter of Authorization (For Institutions and churches)

## CORPORATE MEMBERSHIP APPLICATION FORM

We wish to join membership in Ukristo Na Ufanisi DT Sacco Ltd as per the following details:

### CORPORATE DETAILS

COMPANY NAME		
POSTAL ADDRESS:	CODE:	COUNTY:
TELEPHONE NUMBER:		
DATE OF REGISTRATION:	CERT NO.	
OCCUPATION / NATURE OF BUSINESS:		PHYSICAL ADDRESS:

### SIGNATORY DETAILS

#### FIRST SIGNATORY

SURNAME:	FIRST NAME:	MIDDLE NAME:
DESIGNATION:	ID/PASSPORT NUMBER:	TELEPHONE NO:
SIGNATURE:	NATIONALITY:	

#### SECOND SIGNATORY

SURNAME:	FIRST NAME:	MIDDLE NAME:
DESIGNATION:	ID/PASSPORT NUMBER:	TELEPHONE NO:
SIGNATURE:	NATIONALITY:	

#### THIRD SIGNATORY

SURNAME:	FIRST NAME:	MIDDLE NAME:
DESIGNATION:	ID/PASSPORT NUMBER:	TELEPHONE NO:
SIGNATURE:	NATIONALITY:	

#### FOURTH SIGNATORY

SURNAME:	FIRST NAME:	MIDDLE NAME:
DESIGNATION:	ID/PASSPORT NUMBER:	TELEPHONE NO:
SIGNATURE:	NATIONALITY:	

### ACCOUNT MANDATE

Signing Instructions:

Jointly

Three to Sign

Other Signing Instructions

Main Contact Persons

1. Name \_\_\_\_\_ Position \_\_\_\_\_ Tel. No. \_\_\_\_\_

2. Name \_\_\_\_\_ Position \_\_\_\_\_ Tel. No. \_\_\_\_\_

*"All hard work brings a profit a profit, but mere mere talks lead only to poverty" (Proverbs 14:23)*

## AUTHORIZED SIGNATORIES DETAILS AND PHOTOGRAPHS

AFFIX PHOTO

NAME:	
EMAIL ADDRESS:	
ID NO:	
POSITION:	
TEL NO:	
SIGNATURE:	

AFFIX PHOTO

NAME:	
EMAIL ADDRESS:	
ID NO:	
POSITION:	
TEL NO:	
SIGNATURE:	

AFFIX PHOTO

NAME:	
EMAIL ADDRESS:	
ID NO:	
POSITION:	
TEL NO:	
SIGNATURE:	

AFFIX PHOTO

NAME:	
EMAIL ADDRESS:	
ID NO:	
POSITION:	
TEL NO:	
SIGNATURE:	

## DECLARATION

We confirm that the information given above is true to the best of our knowledge. By signing on this form, we request you to open an account in our company/Institution name. We agree to abide by the by-laws of Ukristo Na Ufanisi DT Sacco Ltd.

We agree that this account shall be operated solely at the discretion of the society and hereby indemnify the society at our cost against any cost incurred or claims arising out of the account.

## CONTRIBUTION DETAILS

We wish to make a monthly contribution of Ksh. \_\_\_\_\_

Proposed mode of remittances (Tick appropriately): Cheque ☐ Standing Order ☐ Cash Deposit ☐ Paybill (520900) ☐

## SAVING ACCOUNTS (Choose Accordingly)

Share Deposit ☐ Current/Saving Account ☐ Holiday A/c ☐ School Fees A/c ☐ Business A/c ☐  
Junior A/c ☐ Asset Account ☐ Kilimo A/c ☐ Household Asset A/c ☐

Share Capital worth Kshs 20,000/= (Minimum contribution monthly Ksh. 500 for 40 months, non-refundable)

*"All hard work brings a profit a profit, but mere mere talks lead only to poverty" (Proverbs 14:23)*

## DIRECTORS LIST

NO	NAME	ID NUMBER	MOBILE NO	SIGNATURE
1				
2				
3				
4				
5				
6				

## DECLARATION / ACCEPTANCE

The information given above is accurate to the best of our knowledge. We agree to abide by the society's By-laws as may be reviewed from time to time.

## CERTIFIED BY OFFICIALS\DIRECTORS

NAME	POSITION	SIGNATURE	DATE

How did you learn about Ukristo Na Ufanisi DT Sacco Ltd (Tick appropriately)

Sacco Member: ☐ Social Media: ☐ Sales Representative: ☐ Others (Specify): ☐

Introduced by: \_\_\_\_\_ Member No: \_\_\_\_\_ Sign \_\_\_\_\_ Date \_\_\_\_\_

## FOR OFFICIAL USE ONLY

### CUSTOMER SERVICE:

Form Received on: \_\_\_\_\_ Input by \_\_\_\_\_ Sign \_\_\_\_\_

Photograph Scanned on: \_\_\_\_\_ Input by \_\_\_\_\_ Sign \_\_\_\_\_

Signature Scanned on: \_\_\_\_\_ Input by \_\_\_\_\_ Sign \_\_\_\_\_

Is the Applicant Accepted? YES: ☐ NO: ☐ Member No: \_\_\_\_\_

Application approved by: \_\_\_\_\_ Sign \_\_\_\_\_ Date \_\_\_\_\_

## REGISTRY SECTION:

File Opened on: \_\_\_\_\_ Name: \_\_\_\_\_ Sign \_\_\_\_\_

Checked on: \_\_\_\_\_ Name: \_\_\_\_\_ Sign \_\_\_\_\_

## RULES AND REGULATIONS

1. Membership is open to the general public.
2. Members shall be admitted on payment of registration fee of Kshs.500 and payment of minimum deposit of Kshs.1500 (Ksh.1000 for Normal Savings and Ksh.500 for Share Capital).
3. Members should purchase a minimum of 200 shares at a cost of Kshs. 100 per share (Ksh.20000) within a period of 3 years and 4 months from date of registration.
4. The share capital is non-refundable; however, upon withdrawal from the Sacco, a member may transfer their shares to an existing member.
5. Upon withdrawal from the Sacco, the member shall give sixty (60) days' written notice to withdraw their deposits. A closure fee shall be charged prior to account closure, calculated at the prevailing rate.
6. The signatories must sign as per the mandate given.
7. After six months membership the company/institution will qualify to receive a loan of up to 3 times their savings for the first loan and 4 times their savings for subsequent loans.
8. All loans are secured by collateral.
9. Loans are repaid within 1 month up to a maximum of 72 months depending on the loaned amount.

## BRANCHES

Riruta Head Office, Ngong (Ngong Hills Plaza), Kiserian (Mutall Building),  
Kangemi (Palace House), Kiambu (Kikinga House), Limuru (Kimuchu Building),  
Wangige (Mwathi Centre), Utawala (Benedicta), Piai Field Office (Along Embu  
- Makutano highway).

*"All hard work brings a profit a profit, but mere mere talks lead only to poverty" (Proverbs 14:23)*