POLICE SAVINGS ASSOCIATION LTD (PSAL)

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Website: www.psal.co.ug

LOAN APPLICATION

(Only Members Are Entitled)

The Chairperson Police Savings Association Ltd

THRU: (HEAD OF REGION / DEPARTMENT / UNIT / SECTION)	
a) LOAN PARTICULARS (to be completed by the	Applicant)
i) Names	
(IN BL	OCK LETTERS)
Account NO Ba	ank Name & Branch
IPPS NoFile No. / Force No	StationRank
Date of BirthAge	(ATTACH PHOTOCOPY OF NATIONAL ID
ii) Present Address	Геl NoEmail
iii) Basic Salary (AT	TACH ORIGINAL CURRENT PAYSLIP)
iv) Membership NoAmount of	monthly savings with PSAL
v) Warrant card No (AT	TACH PHOTOCOPY OF WARRANT CARD)
vi) Terms of service (specify if temporary / contr	ract / permanent) Date of Retirement
Fresh Loan Top Up Loan	
rii) Amount of loan SHS(In wo	rds)
riii) Repayment Period	
ix) Purpose(s) of the Loan	
x) Amount of outstanding loan with other finan	cial institutions
(If any Atta	ch Bank Statement)
xi) Insurance Premium (1%) of the Principal Loan	Issued UG Shs Deduct from Loan.
(ATTACH A LETTER OF UNDER TAKING)	
DECLARATION	
	re true to the best of my knowledge and belief I
	ion and variations by the lender in respect to (7)
and (8) above. I hereby authorize the necessary repayment for this loan.	Recoveries to be made from my salary as
repayment for this loan.	
Date Signature of A	pplicant
-	
b) For official use only	
Ability to pay loan.	
Applicants monthly savings	Outstanding Loan Balance
Amount of loan Approved	Monthly Recovery Rate
Repayment PeriodIns	urance Premium Ug Shs

Signature......Date.....