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**PPMC HQ STAFF MULTIPURPOSE COOPERATIVE SOCIETY, ABUJA**

**FINANCIAL COMMITMENT STATUS ON UPFRONT ALLOWANCE**

The purpose of this form is to confirm the extent of the financial liability of a loan applicant to other Cooperatives Societies and other financial institution for suitability of granting a loan facility by the **PPMC HQ Staff MPCS.**

Kindly note that all the information provided will be confidentiality used only for the purpose of processing the loan application.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **APPLICANT NAME:** |  | | | | |
| **APPLICANT ID NO:** |  | **SBU/CSU:** |  | **LOCATION:** |  |

**A - CO-OPERATIVE SOCIETY COMFIRMATION**

The section provides information on the existing loan facilities from other cooperative societies for which an applicant is a member.

|  |  |  |  |
| --- | --- | --- | --- |
| **S/N** | **COOPERATIVE NAME/ADDRESS** | **SCHEDULED DEDUCTION ON NEXT UPFRONT** | **AUTHORISED SIGNATURE/STAMP/DATE** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |

**B – ABU-COOP MICRO FINANACE BANK CONFIRMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **BANK NAME/ADDRESS** | **ACCOUNT NUMBER** | **SCHEDULED DEDUCTION ON NEXT UPFRONT** | **AUTHORISED SIGNATURE/STAMP/DATE** |
|  |  |  |  |

**C – SALARY BANK CONFIRMATION**

This section confirms the outstanding loan from the bank the beneficiary uses for salary.

|  |  |  |  |
| --- | --- | --- | --- |
| **BANK NAME/ADDRESS** | **ACCOUNT NUMBER** | **SCHEDULED DEDUCTION ON NEXT UPFRONT** | **AUTHORISED SIGNATURE/STAMP/DATE** |
|  |  |  |  |

**I hereby certify that the information provided above is accurate.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature Date

**\*Note: all information provided is subject to verification.**