



**LAIKIPIA COUNTY ENTERPRISE DEVELOPMENT FUND**



**INDIVIDUAL APPLICATION FORM**

(Please tick and answer the relevant question)

Startup (0-12 months)

existing business (13 months +)

Business Sector.....

**SECTION I: PERSONAL PROFILE**

Surname..... Other names.....

Category (please tick one)  Youth  Woman  Person with Disability  Needy person  Group

ID No..... Date of Birth (dd/mm/yy).....

Contact..... Email.....

Pin No..... Marital Status.....

Spouse ID..... Spouse phone number.....

Sub-County (Constituency).....

Ward of residency.....

Physical location (estate, village, nearest town/shopping centre) .....

Bank/Sacco details..... Branch.....

**Education Details**

What is your highest level of education? (Please tick one)

Primary school  Secondary school  College/Polytechnic  University

Other (explain).....

Qualification (degree, diploma, certificate)

Institution..... Graduation (year) .....

Skills relevant to your business/idea.....

**Employment Details**

What is your current employment status? (Please tick one)

Employed

If Employed

Non-employed

If employed or self- employed, please give a brief description of your work/business experience

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### SECTION II-LOAN PROPOSAL

#### 1.Loan Particulars

i.	Loan Amount Requested (Ksh)	
ii.	Main Product (s)/ Service (s)	
iii.	Main Customers/target market	
iv.	Proposed business site ( attach map)	

Reasons for selecting the proposed business (COmment on suitability, competition and management ability).

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#### 2. (a) Business cycle

Product	Normal Maturity Period (Month)	Normal Period taken to sell product and obtain payment.	Expected yield	Price per unit	Total Proceeds Expected (Ksh.)
i.					
ii.					
iii.					
<b>Total</b>					

(b) After how long will the first (1<sup>st</sup>) sale be made?.....

(c) How often will the subsequent sales be made?.....

#### 3. Budget (investment).

Item	Source	Cost	Total
i.			
ii.			
iii.			
iv.			
v.			
<b>Total</b>			

4. (a) Projected income flow from business

Product	Sales (from 3 above)	Total cost	Approx. Profit

*NB. Separate sheet may be attached.*

Other proposed sources of fund (if any) please tick.

- a) Group savings       b) Members contributions       c) Loan       d) Others

Ksh.....

Explain or combination of any

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 .....  
 .....

Management: Who will manage the business?

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 .....  
 .....

5. Marketing: How do/will you market your products?

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 .....  
 .....

6. Proposed growth plans: Business and group.

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 .....  
 .....

Part C

- (a) Additional income sources if any..... Ksh.....  
 (b) Changes expected in the business from loan injection.....

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 .....

(c) Plan for loan repayment (briefly explain how you expect to service the loan to completion)

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**Guarantors One**

**GUARANTOR'S PERSONAL DETAILS**

Guarantor Name..... ID/PP No.....

Relationship to Applicant..... Postal Address.....

Code..... Town..... Phone No.....

**Draw map to residence**

Town/Estate..... District.....

Division..... Location.....

Sub-Location..... Village.....

Employment or business.....

Physical Location of Employment/Business.....  
(Attach Sketch Map)

Monthly Income.....

Attach copy of security (for title deed and/or log book only) where guarantor is pledging security for loan.

Type of Security	Title No./Car Registration No.	Estimated Value	Discounted Value

Signature of Guarantor..... Date.....

**Guarantor Two**

**GUARANTOR'S PERSONAL DETAILS**

Guarantor Name..... ID/PP No.....

Relationship to Applicant..... Postal Address.....

Code..... Town..... Phone No.....

Draw map to residence

Town/Estate..... District.....

Division..... Location.....

Sub-Location..... Village.....

Employment or business.....

Physical Location of Employment/Business.....  
(Attach Sketch Map)

Monthly Income.....

Attach copy of security (for title deed and/or log book only) where guarantor is pledging security for loan.

Type of Security	Title No./Car Registration No.	Estimated Value	Discounted Value

Signature of Guarantor..... Date.....

Other Terms and Conditions

(a) In connection with this application and /or maintaining a credit facility with the Laikipia County Enterprise Fund, I/We authorize the Fund Manager to carry out credit checks with or obtain my credit information from, a credit reference bureau. In the event of the account going into default, I consent to my name, transaction and default details being forwarded to a credit reference bureau for listing.

(b) I/We agree that the Laikipia County Enterprise Fund, may disclose details relating to my/our loan account to any third party including Credit reference bureau, if in the Lender’s opinion such disclosure is necessary for the purpose of evaluating my/our creditworthiness or for any other lawful purpose.

Declaration

I..... ID No.....

Declare that the information provided in this application form regarding myself and business is correct subject to changes in the projections. I understand that the Laikipia County Government reserve the right to verify this information and I will cooperate fully in this regard, and that if I am found to have provided incorrect information, it will lead to automatic disqualification and prosecution.

Signed.....

Date.....

**REQUIREMENTS**

- 1.A dully filled in application form.
- 2.Photocopy of ID both for applicants and guarantors.
- 3.Evidence that business is based and operational at the Laikipia County(License).
- 4.A copy of PIN certificate.
- 5.Bank account statements for 6 months.
- 6.List of charged collaterals with applicants and guarantors from the advocate.

