

MORTGAGE APPLICATION FORM

Please complete in BLOCK LETTERS.

Bank Use													
Processing Branch Code Staff/Direct Sales ID Date dd / mm / yy													
AO Name	Signature												
CSM Name	Signature												
SECTION A - LOAN APPLICATION DETAILS													
Part 1: Personal Information (Individual Customers)													
Title Mr Mrs Others (specify)	Male Female												
Name													
(Surname) (F	rst Name) (Other Names)												
Marital Status Single Married Others (specify)	Date of Birth (DD MM YYYY)												
Nationality	Mobile Phone												
E-mail Address													
Residential Address (Not PO Box)													
Resident Owned Rented Staying with Family Ot	hers Length of Time at Current Address Month(s) Year(s)												
Highest Educational Qualification													
Mode of Identification Nat. ID NDL Othe	rs (specify)												
Identification Number													
Name of Spouse	Spouse's Mobile Phone												
Bank Verification Number (BVN)													
Part 2: Business Information (Business Entrepreneurs)													
Registered Business Name													
Registration Number													
Trading Name													

Business Address														
City	State													
Telephone														
Email Address														
Brief Description of Customer's Business														
Part 3: Employee Information (To be completed by employee)														
Job Title		Staff ID No.												
Employer's Name														
Office E-mail														
Office Phone Number														
Office Address														
Industry: Oil & Gas Manufacturing	g Transportatio	n Governme	ental Parasta	tal										
Others		-												
Cadre/Level														
Number of Years in Current Employment														
Date of Employment (DD MM YYYY)		Confirmed Status:	Confirmed	Pr	obation									
Annual Income (₦)		Terminal Benefits (₦	+)											
Monthly Income (#)		Salary Due Date (DD MM YYYY)												
Part 4: Employee Authorization (To be completed by employee) I														
Authorized Signatory		Date (DD MM YYYY)			_									

Part 5: Employer Undertaking (To be completed by employer)

In consideration of a loan facility request by our employee to Access Bank PLC, we hereby confirm that all information provided by the applicant above is true.

We undertake ar facility. (2) To do to remain in our tion of the emp employee, the re	micile wi [.] employn oloyee. W	th Ac nent /e ag	cces: (3) T gree	s Banl o info that i	kall more orm the n the	oneta e ban abse	ary/to k wit ence	ermi hin t of a	nal b wo (2 noti	ene 2) wo	fits orkin	due fr g day of res	om (s of signa	us to resig atio	the gnat n, tra	e em ion, ansf	ploy or tr er, d	ee u ansf ismi	pon er or ssal	the e disr or te	empl niss ermi	oyee al or natic	e cea term on o	asing nina-
Name																								
Designation																								
Authorized Signa	atory										Date (DD N	e MM YYY	Y)											
Official Stamp																								
Name																								
Designation																								
Designation																								
Authorized Signa	atory										Date (DD N	e 1M YYY	Υ)											
Official Stamp																								
Part 6: Loan Re		etails	s (Ind	dividu	ial and	Cor	pora	te C	usto	mei	rs)													
Loan Amount (₦))																							
Loan Amount in words (#)																								
iii words (ii)						İ																		
Equity Contributi	ion(₦)										7	Tenor	(mor	nths)									
Access Bank Account No. 1												cess E count												
* Repayment Method: Direct Debit								Bank	Star	nding	g Ord	er			_				s is fo				ose	

Part 7: Insurance Premium Financing Option													
Would you like the Insurance Premium Finance Product as an additional facility Yes No													
Insurance Premium Amount													
Amount	in words												
Equity C	Contribution												
Part 8:	Mortgage Details												
Product Type: Home purchase Equity Release Off Plan Mortgage													
Open M	larket Value (OMV)		Forced Sale Va	lue (FSV)									
Type of Property Terrace Bungalow Flat Duplex Others													
Part 9:	Existing Facilities with Acce	ess Bank and other Lende	rs/Employer										
S/No	Name of Bank/Organisation (Including Access Bank)	Type of Facility (including Credit Cards)	Repayment Amt	Repayment frequency (monthly, Quarterly, Yearly)	Current Outstanding Balance								
1.													
2.													
3.													
4.													

Declarations

You make the following declarations to us:

The Loan is governed by this application form, and the Terms and conditions attached hereto. The acceptance of your application for a loan shall be at the discretion of the Bank and we shall not be obliged to furnish reasons to you should your application not be accepted. If we accept your application, we will let you know in writing.

- 1. I/we am/are at least 21 years of age
- 2. I/we confirm that all the details given in this application are true and complete and I/we understand that these will be used to form the basis of any facility offered.
- **3.** I/we authorise you to conduct any enquiry you consider necessary and appropriate for the purpose of evaluating this application from my/our employer, if any and from any other source to which you may apply including a credit search with one or more credit reference agencies and confirm that I/we am/are not currently under administration, sequestration, debt review, or a restructuring order.
- 4. I/we accept that at any time before any facility offered to me/us is completed; Access Bank may withdraw, revise, or cancel such offer.

- **5.** I/we am/are aware that the rate of interest and monthly repayments of any variable rate facility granted may be varied from time to time.
- **6.** I/we undertake to notify the Bank immediately in writing of any situation which materially changes the representation of this application, and I/We understand that the Bank may amend or withdraw any offer previously made.
- 7. I/we understand that Access Bank will disclose my/our details to any Access Bank's insurers, auditors, professional advisers, or any persons providing services to Access Bank who have agreed to treat my/our personal details as confidential, or if required to do so by law or any relevant regulatory body, as envisaged by this application form or with my/our written consent.
- **8.** I/we acknowledge that Access Bank may at any time transfer Access Bank's interest in the facility, together with any security I/we give, to any other lender, bank or institution, without first seeking my/our permission and I/we authorize Access Bank to disclose any information which Access Bank holds/ possesses about me/us to such entity.
- **9.** I/We hereby authorise the Bank to disclose any and all information in respect of my/our account to the guarantors for as long as the guarantor's liability of the debt outstands.

- 10. I/we agree that by taking up all or part of any facility offered by Access Bank on the basis of the information provided on this application form and by signing this form, I/we agree to accept all the conditions set out in Access Bank's facility offer letter. I/we agree that if I/we receive more than one letter, the letter showing the latest date will be that which applies.
- 11. I/we understand that the Bank may set off any amounts due under the agreement against any sums owing by me/us to Access Bank (whether jointly or severally) and otherwise combine and consolidate all or any of my/our accounts with Access Bank at any branch of the Bank and whether current, deposit, loan, or any other nature and whether accounts in my/our name or jointly with others and whether in any other currency. Any currency conversions required to be effected by Access Bank in pursuant to this right shall be effected in accordance with the usual practice of the Bank.
- 12. I/we have personally completed this application form, or if completed by someone else, have read and checked every answer and I/we have appended my/our signature fully understanding the implication of the words and terms so contained.
- 13. I/we commit that this facility shall not be utilized for any acts of terrorism or other related acts. I/We hereby confirm my / our application for the above facility and certify that all information provided by me/ us above and attached thereto is correct and complete. The facility shall not be utilized for any act of terrorism or other illegal or prohibited acts.

I / We authorize you to make any enquiry you consider necessary and appropriate for the purpose of evaluating this application $\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left(\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2}$

1. Name of Signatory												
Signature of Applicant]D)	Date YYYY)					
2. Name of Signatory												
Signature of Applicant For Additional Signatory)						JD)	Date					