



FIXED DEPOSIT APPLICATION/RENEWAL FORM

EGERTON UNIVERSITY SACCO SOCIETY LIMITED

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PART 1: PERSONAL DETAILS

Salutation	Prof. <input type="checkbox"/>	Dr. <input type="checkbox"/>	Rev. <input type="checkbox"/>	Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Ms. <input type="checkbox"/>	Others..... <input type="checkbox"/>
First Name <i>(as Indicated in your ID)</i>		Middle Name		Last Name			
ID No./Passport No.	Work Station/Business Location		Payroll No.				
FOSA Account No.	Mobile No.		Home/Permanent address				

Please transfer Kshs..... (Amount in words)..... from my/our savings, account numberto a fixed deposit account with effect from..... for a period of.....months.

Source of funds.....

(Account savings, Bankers cheque, Personal cheque, Cash deposit, EFT, Fixed deposit Renewal, Sacco loan).

How did you learn about fixed deposit? (e.g. Through SMS, From existing members or introduced by.....

PART 2: TERMS AND CONDITIONS

- Interest granted is based on market dynamics and remain constant within the fixed deposit period
- Interest earned is subject to **15% Withholding Tax**
- Minimum amount to be fixed is **Kshs 50,000**
- Minimum period for a fixed deposit is **3 Months**
- Interest shall be forfeited if terminated before the date of maturity

Declaration by the member(s)

I/We have read and understood the terms and conditions and I/We hereby accept the interest rate granted and agree to place Ksh _____ on a fixed deposit for _____Months.

SIGNED BY MEMBER/S

(1)..... (2)..... (3)..... Date.....

PART3: OFFICIAL USE ONLY

Approved By:..... Sign..... Date.....

Effected By:..... Sign..... Date.....

Interest granted..... Certificate No..... Maturity Date.....