

PASSPORT

15, Shodipe Street, Yaba. Lagos, +2348024129932 +2348103145423 Info@firstallon.org www.Firstallon.org

	SALART ADVANCE	LAITEIOATION		
FIRST NAME:	MIDDLE NAME:		SURNAME:	
ADDRESS:				
EMAIL ADDRESS:		PHONE:		
PHONE:	DOB:		GOVT ID TYPE/	
ID NUMBER	EXPIRY DATE:		NEXT OF KIN:	
RELATIONSHIP:	PHONE:		PHONE:	
EMPLOYERS NAME & ADDRESS:				
SUPERVISOR'S NAME			PHONE:	
APPLICANT'S OFFICIAL EMAIL:		POSITION & DEPT:		
SALARY ACCT BANK:		ACCT NUMBER:		
BVN:	NIN:		MONTHLY NET SALARY:	
SALARY AMT:	SAL PYMT DATE:		HAVE YOU BEEN CONFIRMED? YES/NO	
HOW LONG HAVE YOU BEEN IN THE ORGANISATION?			DO YOU HAVE OTHER LOANS IN THE BANK OR WITH OTHER FINANCE COMPANY(IES) YES/NO:	
		REFERENCES		
FULL NAME:		FULL NAME:		
COMPANY:		COMPANY:		
ADDRESS:		ADDRESS:		
OFFICIAL EMAIL:		OFFICIAL EMAIL:		
PHONE:		PHONE:		
RELATIONSHIP:		RELATIONSHIP:		
I agree and declare that Firstallon Limited and any representative thereof may contact any person listed above to discuss debts owed to Firstallon Limited.  I understand and agree that defaulted cheques will incur an additional 20% charge of the face value of the check concerned in addition to other charges that may be incurred in the course of recovering the debt.  I attest that all information provided above is true and authentic and any false information given or stated by me disqualifies me from receiving any service from Firstallon Limited.  I understand it is criminal action to move my salary from the stated account or to refuse to fund the account in case of a job loss and authorizes Firstallon Limited to treat such action as such.				

LOAN AMOUNT N	SIGNATURE & DATE	LOAN DURATION:
	FOR OFFICIAL USE ONLY	
PASSPORT? YES/NO	GOVT ID? YES/NO	ACCOUNT MGR:
OFFICIAL ID? YES/NO	FORM PROPERLY COMPLETED? YES/NO	CONFIRMATION LETTER? YES/NO
REFERENCES CONFIRMED? YES/NO	SIGNATURE & DATE? YES/NO	STATEMENT OF ACCOUNTS REVIEWED YES/NO
UTILITY BILL OKAY? YES/NO	EMPLOYMENT ID? YES/NO	EMPLOYMEMT LETTER? YES/NO
REVIEWED BY:	SIGNATURE & DATE	COMMENT:
APPROVED BY:	SIGNATURE & DATE	COMMENT:

I authorize Firstallon Limited to verify this information and/or obtain additional information by securing data from a credit bureau.

By signing this form, I understand and agree to abide by the terms and conditions stipulated by Firstallon Limited