

Sweet Salary Solution

(Employee Banking Bundle Application Form)

Solutions for all your banking needs

NB: Before you sign this application form, please read our Client Terms, Current and Savings Account Terms and Personal Loan Terms, and other terms indicated in the declaration section of this form and which are available on our website at www.sc.com/gh. You can request for a physical copy of these terms and conditions by calling us on 0302 740 100.

1a Please tell us about yourself

Full Name

						F	I	R	S	T									
						M	I	D	D	L	E								
						L	A	S	T										

Mother's Maiden Name

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Gender ☐ Male ☐ Female

Identity Document ☐ Passport ☐ National ID ☐ Driving License

Passport/National ID/Driving License/Others

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Issue Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Expiry Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Marital Status ☐ Single ☐ Married ☐ Others

Number of Dependants Number of Children

Highest Educational Qualification

Nationality

Country of Origin

Country of Residence

Resident Permit No.

Permit Issue Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Permit Expiry Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place of Issue

1b Contact details

Tel. (Mobile 1)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Operator's Name

Tel. (Mobile 2)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Operator's Name

Tel. (Office)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Tel. (Residence)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Official e-mail address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Personal e-mail address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mailing address

1c Employment/Business details

Nature of Employment ☐ Salaried ☐ Self Employed

Employment Terms ☐ Permanent ☐ Contract ☐ Others

Name of employer/business

Occupation / Designation

Employer Telephone Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Employment/Staff Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SSNIT Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Contact at employer

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Contract tenure (if applicable)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Contract expiry

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Duration at current organisation

		Years			Months
--	--	-------	--	--	--------

Salary receipt date

D	D
---	---

Contract tenure (if applicable)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Monthly net income

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address of employer (for salaried employees)

Monthly Income (in Local Currency). Please select range

GHS (or equivalent)	Please Tick
1-300	
301-500	
501-1000	
1001-2000	
2001-3000	
3001-4000	
4001-5000	
5001-	

1d Next of Kin details (in case of emergency)

Title Gender ☐ Male ☐ Female

						F	I	R	S	T									
						M	I	D	D	L	E								
						L	A	S	T										

Relationship

Tel. (Mobile 1)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Tel. (Mobile 2)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Residential Address

Metropolitan Municipal District Area

Region

1e Additional Details

Full Name of Beneficiary

Owner(s) of the Account (if applicable)

1f Bank details

For a new relationship, please indicate the current Bank account details

Your current bank

Branch

Type of Account

Account number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Duration with Bank ☐ Years ☐ Months

1g Residential details

Type of residence ☐ Self-owned ☐ Rented ☐ Company provided ☐ Others

Duration at residence

		Years			Months
--	--	-------	--	--	--------

Residential address

Previous residence address (if less than 3 years in current residence)

Nearest Landmark

Metropolitan Municipal District Area

2a Please tell us about yourself (Second Applicant)

Full Name

						F	I	R	S	T					
						M	I	D	D	L	E				
						L	A	S	T						

Mother's Maiden Name

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Gender

☐ Male ☐ Female

Identity Document

☐ Passport ☐ National ID ☐ Driving License

Passport/National ID/Driving License/Others

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Issue Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Expiry Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Marital Status

☐ Single ☐ Married ☐ Others

Number of Dependants

Number of Children

Highest Educational Qualification

Nationality

Country of Origin

Country of Residence

Resident Permit No.

Permit Issue Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Permit Expiry Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place of Issue

2b Contact details

Tel. (Mobile 1)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Operator's Name

Tel. (Mobile 2)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Operator's Name

Tel. (Office)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Tel. (Residence)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Official e-mail address

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Personal e-mail address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mailing address

2c Employment/Business details

Nature of Employment

☐ Salaried

Employment Terms

☐ Permanent ☐ Contract ☐ Others

Name of employer/business

Occupation / Designation

Employer Telephone Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Employment/Staff Number

SSNIT Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Contact at employer

NAME

Contract tenure (if applicable)

Contract expiry

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Duration at current organisation

		Years			Months
--	--	-------	--	--	--------

Salary receipt date

D	D
---	---

Contract tenure (if applicable)

Monthly net income

Address of employer (for salaried employees)

2d Bank details

For a new relationship, please indicate the current Bank account details

Your current bank

Branch

Type of Account

Account number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Duration with Bank

☐ Years ☐ Months

2e Residential details

Type of residence

☐ Self-owned ☐ Rented ☐ Company provided☐ Others

Duration at residence

		Years			Months
--	--	-------	--	--	--------

Residential address

Previous residence address (if less than 3 years in current residence)

3a Which solutions / products would you like to apply for?

Digital Banking

You will automatically be subscribed to our Digital Banking Services, including e-Statements, Online Banking, SMS & E-mail Alerts and Mobile Banking.

You however have the option to unsubscribe to any of our Digital Banking Services except e-Statements. If you wish to unsubscribe to any of the following Digital Banking Services, please tick the relevant boxes below:

☐ Online Banking ☐ Mobile Banking ☐ SMS & E-mail Alerts

e-Statements will be made available to you via e-mail on the e-mail address you have given to us. If you would also like to receive paper statements, it is on a request at a fee.

NB: You may use these Digital Banking Services after activation.

Current Accounts

☐ Standard ☐ Premium ☐ Foreign Currency ☐ Foreign Exchange

Savings Accounts

☐ Premium Savings ☐ Savings Plus ☐ My Dream

Other Account

☐ Fixed Deposit

Lending Products

	Regular	Cash Covered	Corporate Guaranteed
Personal Loan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overdraft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Salary Advance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Currency Options

Personal Loan	<input type="checkbox"/> GH¢	<input type="checkbox"/> USD
Foreign Currency	<input type="checkbox"/> USD	<input type="checkbox"/> EUR <input type="checkbox"/> GBP
Foreign Exchange	<input type="checkbox"/> USD	<input type="checkbox"/> EUR <input type="checkbox"/> GBP

Visa Debit Cards

☐ Platinum ☐ Gold

3b Current, Savings and Fixed Deposits

Mode of operation

<input type="checkbox"/> Current Account	<input type="checkbox"/> Individual	<input type="checkbox"/> Joint
<input type="checkbox"/> Savings Account	<input type="checkbox"/> Individual	<input type="checkbox"/> Joint
<input type="checkbox"/> Fixed Deposit Account	<input type="checkbox"/> Individual	<input type="checkbox"/> Joint

Signatory for Joint Account

- * ☐ Current Account ☐ Savings Account ☐ Fixed Deposit Account
- * ☐ Signs alone ☐ Signs alone ☐ Signs alone
- ☐ Any one of us ☐ Any one of us ☐ Any one of us
- ☐ All of us ☐ All of us ☐ All of us
- ☐ Other ☐ Other ☐ Other

3c Personal Loan

- ☐ Scheme Loan (loan repayment deduction by employer)
- ☐ Smart Credit (loan repayment deduction direct from your SCB account)
- ☐ New Loan ☐ Top Up ☐ Balance Transfer

Loan Amount Applied

Loan Duration (months)

Purpose of loan

- ☐ School Fees ☐ Home Improvement ☐ Medical ☐ Car
- ☐ Other

3d Overdraft / Salary Advance

Amount required

Linked to Salary Account

- ☐ Yes ☐ No

Salary Account Number

Linked to Fixed Deposit

- ☐ Yes ☐ No

Fixed Deposit Account Number

* For a new relationship, the salary account number need not be filled in at this point in time. The overdraft will be linked to the salary current account once it is opened.

3e Accounts held with other Banks

Name & Address of Bank/Branch

1.

2.

3.

4.

5.

Account Name

1.

2.

3.

4.

5.

Account Number

1.

2.

3.

4.

5.

4

Interest Rate and Fees

Product	Personal Loans (Variable Interest Rate)	Overdraft (Variable Interest Rate)
Interest Rate		
Bundle Discount		
Arrangement Fee		
Insurance		

The Annual Percentage Rate (APR) on your loan will be% per annum.

Please refer to our tariff guide for a more detailed and exhaustive list of fees and charges on all our products. The tariff guide is available at any of our branches. Alternatively, it is also available on our website www.sc.com/gh

5

Referee Details

Referee 1

Full Name

Relationship with applicant

Years acquainted with applicant

Tel (Office)

Tel (Mobile)

Residential Address

Please provide the following if refereeing for Current Account

SCB Account Number

Branch

Signature

Referee 2 (Must be a relative)

Full Name

Relationship

Tel. (Mobile 1)

Tel. (Mobile 2)

Tel. (Work)

Home Address

Number of years acquainted with Referee

6 Employer's consent and recommendation

I confirm that due diligence has been done on applicant and responses to questions below are correct at the date of endorsement.

Applicant is a permanent employee ☐ Yes ☐ No
 Applicant is a contract employee ☐ Yes ☐ No
 If yes, contract renewable ☐ Yes ☐ No
 State contract expiry where applicable DD / MM / YYYY
 Has applicant notified you of resignation or study leave or any kind of separation? ☐ Yes ☐ No
 Is applicant is under any disciplinary action? ☐ Yes ☐ No

We confirm the details as above. We also confirm that we will not accept any instruction to discontinue salary or loan payments to SCB without prior written confirmation from Standard Chartered Bank (GH) Ltd. We recommend the loan proposal for approval.

OPTIONAL FOR NON-SCHEME

Company Name

Name of Authorised Company Official

Position/Job Title

Signature

Date

Company Stamp

7 Document Checklist

Documents required	Personal Loans	Current Account	Savings Account	Term Deposit	Salary Overdraft
Passport size recent colour photograph	1 Only	1 Only	1 Only	1 Only	1 Only
Copy of National ID/ Passport/Driver's License/NHIS Card/ Valid Voter's ID Card (original must be sighted)	Yes	Yes	Yes	Yes	Yes
Copy of resident permit (for non-Ghanaian)	Yes	Yes	Yes	Yes	Yes
Proof of residential address (where applicable): Utility bills, etc. (certified true copy is acceptable if original)	Yes	Yes	Yes	Yes	Yes
Copy of work permit (where applicable)	Yes	Yes	Yes	Yes	Yes
Proof of income e.g. Pay slip	Yes	Yes	Yes	Yes	Yes
Bank Statement	3 Months	NA	NA	NA	6 Months
Certified loan account statements for Balance Transfer	Yes	NA	NA	NA	6 Months
Letter from Employer/ Contract/School (for salary account and or student)	Yes	Yes	Yes	NA	Yes
Important Information Document (customer signature required)	Yes	Yes	Yes	Yes	Yes

Only one set of documents is required even if you have opted for multiple products

8 Illiterate/Blind Form is read to him/her by a Third Party

I agree to abide by the consent of this agreement and acknowledgement that it has been truly and audibly read over and explained to me by an interpreter.

Mark of Customer
Thumbprint/Signature

Mark of Customer
Thumbprint/Signature

Date

Name of Interpreter

Address of Interpreter

Language of Interpretation

By signing these General Terms and Conditions:

- You represent and warrant that all information (including any documents) you have given to us in connection with the application is correct, complete and not misleading. (If this is not the case, you may be personally liable);
- You authorize us to verify any of the information you have given us or your credit standing from anyone we may consider appropriate (such as an authority or credit reference agency);
- You acknowledge that we may decline your application without giving you any reason for doing so. If this happens, no contractual relationship arises between us and you;
- You confirm and agree that we may give any information in connection with this application (including your personal information) to any service provider (whether located in or outside of Ghana) for the purposes of providing any service to you in connection with this application (including data processing);
- You understand that by entering into our banking agreement you give indemnities, authorizations, consents and waivers and agree to limitations on our liability;
- You consent to us contacting you at the address, email address and telephone numbers you have provided to us, to give information on other products and services that we, or our strategic partners may offer;
- You confirm and agree that you have read and understood the terms & conditions governing the opening, operation and closure of the Salary Account you have opened;
- You confirm and agree that a Welcome Pack and Instant Pack would be accepted by your office coordinator on your behalf in your absence;
- Unfunded accounts may be closed after two months from the day the Salary Account was opened;
- You understand that the various products offered under the bundle are available as Individual Products and the Individual terms and conditions will apply to the bundle;
- You understand that the Product bundle consists of a **Personal Loan, Salary Account, Visa Debit card and SMS/Online/Breeze banking**. You understand that each of the products are individually available if you so desire. You may also opt for other products such as Insurance or an Overdraft or any of our other products outside the product bundle, if you so wish to apply;
- At any point in time, you can chose to exit any of the individual constituent products in the Product bundle. If you chose to do so, we may at our discretion revoke the preferential pricing offered to you on the product bundle. In this scenario the pricing on the remaining product will revert to the prevailing market rate on the individual product;
- You confirm that you are in good health;
- You have read and understood our Client Terms, Current and Savings Account Terms and Personal Loan Terms forming our banking agreement. They are available on our website at www.sc.com/gh or call us at on **0302740100** for a physical copy. You agree to be bound by them when using any product we may provide you with. You acknowledge that you are bound by any variation we make to these documents, in accordance with our banking agreement.

I/We hereby apply for the opening of account(s) with Bank.
I understand that the information given herein and the documents supplied are the basis for opening such account(s) and I/We therefore warrant that such information is correct.

I/We further undertake to indemnify the Bank for any loss suffered as a result of any false information or error in the information provided to the Bank.

DISCLOSURE TO CREDIT REFERENCE BUREAUS

The bank will obtain information about you from the credit reference bureaus to check your credit status and identity. The bureaus will record our enquiries which may be seen by other institutions that make their own credit enquiries about you.

1st Applicant's
Signature _____

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Name _____

2nd / Joint Applicant's
Signature _____

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Name _____

Date:

.....

The Loan Centre Manager
 Standard Chartered Bank (Gh) Ltd.
 P. O. Box 768
 Accra

Dear Sir/Madam

ASSIGNMENT OF TERMINAL BENEFITS:

.....

In consideration of Standard Chartered Bank granting me a loan,

I give this irrevocable undertaking that:

1. I authorize my employer,
 (.....),
 to provide and confirm any employment details that may be
 required for the processing of this facility.
2. I further authorize my employer to forward my monthly salary to
 Standard Chartered Bank towards the repayment of my loan until
 facility is fully paid.
3. I further undertake to promptly notify you in the event of my
 employment with my current employer being terminated.
4. I understand that the interest rate on the loan is not fixed thus the
 interest rate will be adjusted upwards or downwards in line with
 prevailing market conditions. This may cause the repayments
 period to be shorter or longer than when the loan was disbursed.
 I also understand if the impact of interest rate changes leads to a
 tenor reduction, the Bank will cease deduction on the basis on the
 new tenor and will refund if any additional deduction resulting for
 the reduced tenor. In the same vein, I authorize my employer to
 deduct additional installment arising from interest rates
 adjustments during the tenor of the Loan.
5. I have also authorized my employer to assign to the bank my
 terminal or end of service benefits which I may be entitled to
 towards the permanent reduction of my outstanding loan, should
 my employment cease. Such monies should be paid directly to the
 bank and I hereby confirm notification of this assignment to my
 employers.
6. I will act responsibly not to prejudice recovery of the credit facilities
 advanced to me.
7. I shall notify the bank of my transfer to another station and ensure
 that I keep to the agreed arrangement for repayment until the loan
 is paid in full.
8. This arrangement will remain in force until the loan granted to me
 has been paid in full.

Yours faithfully

 Applicant Signature

 Applicant Name

Date:

.....

The Loan Centre Manager
 Standard Chartered Bank (Gh) Ltd.
 P. O. Box 768
 Accra

Dear Sir/Madam

ASSIGNMENT OF TERMINAL BENEFITS:

.....

In consideration of Standard Chartered Bank granting me a loan,

I give this irrevocable undertaking that:

1. I authorize my employer,
 (.....),
 to provide and confirm any employment details that may be
 required for the processing of this facility.
2. I further authorize my employer to forward my monthly loan
 repayment to Standard Chartered Bank towards the repayment
 of my loan until facility is fully paid.
3. I further undertake to promptly notify you in the event of my
 employment with my current employer being terminated.
4. I understand that the interest rate on the loan is not fixed thus the
 interest rate will be adjusted upwards or downwards in line with
 prevailing market conditions. This may cause the repayments
 period to be shorter or longer than when the loan was disbursed.
 I also understand if the impact of interest rate changes leads to a
 tenor reduction, the Bank will cease deduction on the basis on the
 new tenor and will refund if any additional deduction resulting for
 the reduced tenor. In the same vein, I authorize my employer to
 deduct additional installment arising from interest rates
 adjustments during the tenor of the Loan.
5. I have also authorized my employer to assign to the bank my
 terminal or end of service benefits which I may be entitled to
 towards the permanent reduction of my outstanding loan, should
 my employment cease. Such monies should be paid directly to the
 bank and I hereby confirm notification of this assignment to my
 employers.
6. I will act responsibly not to prejudice recovery of the credit facilities
 advanced to me.
7. I shall notify the bank of my transfer to another station and ensure
 that I keep to the agreed arrangement for repayment until the loan
 is paid in full.
8. This arrangement will remain in force until the loan granted to me
 has been paid in full.

Yours faithfully

 Applicant Signature

 Applicant Name

PLEASE ENSURE THAT YOU HAVE FULLY COMPLETED THIS FORM BEFORE SIGNING

Photo
(FOR PERSONAL ACCOUNT)

Photo
(FOR PERSONAL ACCOUNT)

Specimen Signature of first or sole applicant

Specimen Signature of second / joint applicant

Name

Name

Date

D

D

M

M

Y

Y

Y

Y

Date

D

D

M

M

Y

Y

Y

Y

Signature Witnessed by

Signature Witnessed by

Dear Customer,

This document provides you with the important items including features & benefits and terms & conditions you need to note concerning the CreditLife Insurance policy.

I / We understand that:

The terms, conditions & risks of the CreditLife Insurance Policy are set out in this Important Information Document given to me.

1. This CreditLife Insurance Plan is underwritten by Enterprise Life Assurance Company (ELAC). Standard Chartered Bank Ghana Ltd. is a distributor of the CreditLife Insurance policy and I / we understand that the insurance risk is entirely borne by the Insurer.
2. Enterprise Life Assurance Company has its registered office at High Street, Accra, Ghana and address being PMB General Post Office.
3. Premium will be refunded, on pro-rated basis, if customer early settles his / her loan.
4. This product is neither a "free product" nor a "product feature" but a bundled product purchased by you in addition to the loan product you have purchased from the bank.
5. This policy covers you against defaults which may arise as a result of risks listed in the Insurance T&C's.

Pricing

- Single Insurance fee of 1.66% of loan amount (comprising risk premium of 1.46% and processing fee of 0.20%).
- Insurance fee will be deducted from disbursed loan amount, unless customer pays fee upfront after loan approval.

Maximum Cover Period

5 years (unless extended with extra premium to cover tenor extensions)

I understand that this is a separate product that I am purchasing in addition to the loan to protect me against the risks outlined under Features & Benefits detailed in the Terms and Conditions.

I understand and agree that while the CreditLife Insurance policy is bundled, I am satisfied with the protection provided and the Insurance fee payment method prescribed by the Bank.

I confirm that I have applied for a loan from Standard Chartered Bank. This policy is not for persons who have not purchased a loan from Standard Chartered Bank. My status as a policy holder shall take effect once my loan request is disbursed to me.

I acknowledge that I have made my own analysis of the Insurance policy features and benefits after reading all relevant information on the product (Terms and Conditions and other information available on the bank's website), and understand protection afforded and claims process.

I have received and agreed to the terms and conditions of this insurance policy

Name: _____

Signature: _____ Date: _____

This literature constitutes a summary presentation of the CreditLife Insurance Plan and it is issued for indicative and informative purposes only. While all reasonable care has been taken in preparing this document, no responsibility or liability is accepted by SCB for errors of fact or for any opinion expressed herein. Standard Chartered assumes no fiduciary responsibility or liability for any consequences, financial or otherwise, arising from the subscription or acquisition of this policy. Proposer should make their own appraisals of the risks and should consult their own legal, financial, tax, accounting and other professional advisors in this respect, prior to any subscription or acquisition. For further information on this product please visit our website www.sc.com/gh

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This document provides you with the important items including features & benefits and terms & conditions you need to note concerning the CreditLife Insurance policy.

I / We understand that:

The terms, conditions & risks of the CreditLife Insurance Policy are set out in this Important Information Document given to me.

1. This CreditLife Insurance Plan is underwritten by Enterprise Life Assurance Company (ELAC). Standard Chartered Bank Ghana Ltd. is a distributor of the CreditLife Insurance policy and I / we understand that the insurance risk is entirely borne by the Insurer.
2. Enterprise Life Assurance Company has its registered office at High Street, Accra, Ghana and address being PMB General Post Office.
3. Premium will be refunded, on pro-rated basis, if customer early settles his / her loan.
4. This product is neither a "free product" nor a "product feature" but a bundled product purchased by you in addition to the loan product you have purchased from the bank.
5. This policy covers you against defaults which may arise as a result of risks listed in the Insurance T&C's.

Pricing

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Maximum Cover Period

5 years (unless extended with extra premium to cover tenor extensions)

I understand that this is a separate product that I am purchasing in addition to the loan to protect me against the risks outlined under Features & Benefits detailed in the Terms and Conditions.

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I confirm that I have applied for a loan from Standard Chartered Bank. This policy is not for persons who have not purchased a loan from Standard Chartered Bank. My status as a policy holder shall take effect once my loan request is disbursed to me.

I acknowledge that I have made my own analysis of the Insurance policy features and benefits after reading all relevant information on the product (Terms and Conditions and other information available on the bank's website), and understand protection afforded and claims process.

I have received and agreed to the terms and conditions of this insurance policy

Name: _____

Signature: _____ Date: _____

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Dear Customer,

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I / We understand that:

The terms, conditions & risks of the CreditLife Insurance Policy are set out as below

1. This CreditLife Insurance Plan is underwritten by Enterprise Life Assurance Company (ELAC). Standard Chartered Bank Ghana Ltd. is a distributor of the CreditLife Insurance policy and I / we understand that the insurance risk is entirely borne by the Insurer.
2. Enterprise Life Assurance Company has its registered office at High Street, Accra, Ghana and address being PMB General Post Office.
3. Premium will be refunded, on pro-rated bases, if customer early settles his / her loan.
4. This product is neither a "free product" nor a "product feature" but a bundled product purchased by you in addition to the loan product you have purchased from the bank.
5. This policy covers you against defaults which may arise as a result of risks listed under scope of cover below.

Pricing

- Single Insurance fee of 1.66% of loan amount (comprising risk premium and processing fee).
- Insurance fee will be deducted from disbursed loan amount, unless customer pays fee upfront after loan approval.

Maximum Cover Period

5 years (unless extended with extra premium to cover tenor extensions)

Features & Benefits and Scope of Cover

1. Life Cover

- a) The outstanding amount on the Loan Account shall be paid by ELAC to Standard Chartered Bank to settle the Life Assured's debt; upon the occurrence of the insured event of death. Standard Chartered Bank must be notified of Life Assured's death as soon as the death occurs.
- b) SCB must be notified (with proof of death) within six (6) months of the Life Assured's Death;
- c) SCB may request any additional documentation (if required by ELAC) to support validity of any claim submitted.

2. Total Permanent Disability Cover (TPD)

- a) The TPD benefit becomes payable when the Life Assured becomes permanently unable to work in any occupation which the Life Assured is reasonably able to do, given his experience, education or training, because of an injury or illness.
- b) The TPD benefit shall be a lump sum payment of the outstanding loan amount in the Life Assured's Account as at the date of disablement;
- c) In order to qualify for TPD benefit, the life assured must be certified by a qualified medical practitioner, recommended and recognized by ELAC, to be totally and permanently unfit to carry out his normal duties;
- d) A letter from the employer confirming absence from work due to a TPD will be required.
- e) TPD claims are to be advised to the insurer for settlement soon after assessment by a doctor recommended by ELAC.

3. Temporary Disability Cover

- a) The Temporary Disability benefit becomes payable when the Life Assured becomes unable to work, due to an injury or illness; in any occupation which the Life Assured is reasonably able to do – given his experience, education or training.
- b) The Temporary Disability benefit covers a maximum of six monthly loan repayment installments, so long as the life assured remains unfit to work during that period and is payable to the creditor (SCB).
- c) Customer must notify SCB of their temporary disability not more than 30 days after recovery. Life Assured will be required to support a claim of Temporary Disability with a qualified medical practitioner's confirmation as well as employer's confirmation.
- d) The Temporary Disability benefit covers a maximum of six monthly loan repayment installments, so long as the life assured remains unfit to work during that period and is payable to the creditor (SCB). After the maximum of six months loan repayment installment, no payment shall be made even if the temporary disability continues. Payment will be made only if the health condition moves into Permanent Disability state.

4. Retrenchment Cover

- a) The retrenchment benefit shall become payable in the event of the Life Assured being retrenched and being without employment for a period exceeding 30 continuous days. This benefit shall only be payable to an assured who has been on the scheme for a minimum of twelve (12) months from when the assured joined the scheme. ELAC shall reimburse the creditor with the monthly installment due under the credit agreement.
- b) The monthly installments payable shall be restricted to a maximum of 9 months payable monthly and this shall exclude arrears of installments and arrears of finance charges.
- c) This benefit is payable once in the life time of the facility

Exclusions

Enterprise Life Assurance is not obliged to make any payment in respect of any condition or event arising directly or indirectly from or traceable to:

- a) Intentional self inflicted injury, suicide, or suicide attempt (whether sane or insane) within the first two years of the Life Assured's policy start date;
- b) Any act of war (whether war be declared or not), military action, terrorist activities, riots, strikes, civil commotion or insurrection;
- c) Any physical defect or infirmity of which the Life Assured was aware and which has its origin prior to the granting of the life cover to the Life Assured. This clause shall apply in the first six (6) months of each and every individual policy;
- d) The Life Assured being affected (temporarily or otherwise) by alcohol or drugs, except as prescribed by a medical practitioner;
- e) The Life Assured committing any breach of criminal law;
- f) Active participation in mountaineering, horse riding, hunting, motor-racing, power boat racing or fighting (except in self defense);
- g) Participation in any form of aviation other than as a fare paying passenger or pilot on a scheduled air service over an established passenger route.

The above is a summary of Credit Life Insurance T&Cs found on our website address www.sc.com/gh

Dear Customer,

This document provides you with the terms and conditions you need to note concerning the CreditLife policy.

I / We understand that:

The terms, conditions & risks of the CreditLife Insurance Policy are set out as below

1. This CreditLife Insurance Plan is underwritten by Enterprise Life Assurance Company (ELAC). Standard Chartered Bank Ghana Ltd. is a distributor of the CreditLife Insurance policy and I / we understand that the insurance risk is entirely borne by the Insurer.
2. Enterprise Life Assurance Company has its registered office at High Street, Accra, Ghana and address being PMB General Post Office.
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- d) The Life Assured being affected (temporarily or otherwise) by alcohol or drugs, except as prescribed by a medical practitioner;
- e) The Life Assured committing any breach of criminal law;
- f) Active participation in mountaineering, horse riding, hunting, motor-racing, power boat racing or fighting (except in self defense);
- g) Participation in any form of aviation other than as a fare paying passenger or pilot on a scheduled air service over an established passenger route.

The above is a summary of Credit Life Insurance T&Cs found on our website address www.sc.com/gh

Standards to Personal Loans important for you known about your facility.

Customer Name: _____

We would like to thank you for applying for a Standard Chartered Personal Loan. At Standard Chartered, we believe in earning your trust by presenting information in a clear and transparent manner to you. Therefore you are kindly requested to please note the following key terms that are associated with your loan.

1. You have applied for a Personal Loan for an amount of (.....) and, if approved you will repay us in monthly installments of (.....) for (.....) months until the outstanding loan principal and interest due are fully repaid. (Please note: the Loan installment & tenor provided may change depending on the amount finally approved for you)

2. The due date for the first installment of the loan and the tenor of loan would be communicated to you when the loan is approved.

3. Your monthly repayment will not exceed (.....%) of your net monthly Salary.

4. Mode of Repayment will be (please tick loan type)

- Employee Smart Credit (Account Holder) - Monthly repayment debited to your Current / Savings account with Standard Chartered Bank by standing order on the installment due dates.
- Employee Smart Scheme** - deducted at source from your company's payroll.

NB: ** In the event that your employer does not deduct and pay repayment to the bank or deducts repayment but does not remit to the bank, you would ultimately be responsible for the repayment of outstanding installment.

5. You will be charged an Arrangement/Processing fee of (.....%) which is spread over the life of the loan.

6. A Credit Life Insurance Premium of (.....%) would be deducted upfront from the approved loan account. For top up loans, unearned premium on the existing loan will be netted-off against the total premium charge on the new loan.

7. The Annual Percentage Rate on your loan will be (.....%) per annum i.e. our nominal rate of plus the arrangement fee quoted in point 5 above. This interest rate may change based on market conditions. Any loan repayment schedule we provide you with is indicative and will change if your loan is re-priced. Interest rate offered on this facility is NOT a Fixed Rate.

8. Interest will be charged at the bank's rate and this is subject to changes that may become necessary to reflect current market conditions. "Interest Rate will be adjusted downwards or upwards in line with the bank's prevailing Rates. This would lead to a decrease/increase in loan tenor or monthly installment. The bank reserves the right to pass on any increase in interest rate through increased tenor or an increase in the monthly installment.

9. If you wish to repay the loan early, you will pay an Early Repayment fee of (.....%) of the outstanding balance to cover admin fees and other costs.

10. As required by law, we will share your credit data with Credit Bureau or other regulators.

11. We trust you will appreciate the repercussions of non-payment of monthly installments, as this will negatively impact your credit rating and may jeopardize your access to future loans from Standard Chartered Bank (SCB) and any reputable lending institution. Please note that SCB will also take action to collect any unpaid dues, including legal action where necessary

12. This document is for your convenience and does not replace your Personal Loans Terms and Conditions and Arrangements.

13. For additional information, please call our helpline on 0302 - 740100 or contact your nearest branch.

I acknowledge the information above has been explained to me and I fully understand.

Customer Signature _____

Sales Person Signature _____

Standards to Personal Loans important for you known about your facility.

Customer Name: _____

We would like to thank you for applying for a Standard Chartered Personal Loan. At Standard Chartered, we believe in earning your trust by presenting information in a clear and transparent manner to you. Therefore you are kindly requested to please note the following key terms that are associated with your loan.

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I acknowledge the information above has been explained to me and I fully understand.

Customer Signature _____

Sales Person Signature _____



Branch Directory

Priority Banking Lounges:

Accra High Street Priority Lounge
Head Office Building, High Street

Kumasi Harper Road Priority Lounge
Harper Road Branch

Liberia Road Priority Lounge
1st Floor Liberia Road Branch

North Industrial Area Priority Lounge
North Industrial Area Branch

Opeibea House Priority Lounge
1st Floor Opeibea House Branch

Osu Priority Lounge
1st Floor Osu Branch

Ring Road Central Priority Lounge
1st Floor Ring Road Central Branch

Tema Priority Lounge
Tema Branch

Tema Harbour Priority Lounge
Tema Harbour Branch

* For Priority Customers only

Branches

Abeka
Abeka-Lapaz
Tel: +233 2895 26541

Accra High Street
Tel: +233 3026 68029

Achimota
Opposite Neoplan
Tel: +233 2895 26567

Ayanfuri
Dunkwa - Tarkwa Rd
Tel: +233 3026 33581

Breeze @ East Legon
Dellino Plaza
Tel: +233 302 610 750

Dansoman
Dansoman Market
Tel: +233 2895 20174

Esiama
Elembelle District
Tel: +233 2898 80080/79

Harper Road
Adum, Kumasi
Tel: +233 3220 38549

Kejetia, Kumasi
Tel: +233 2895 46025-6

Korle Dudor
Ayalolo, Accra
Tel: +233 2896 66885

Legon
Near University Bookshop
Tel: +233 2895 00297

Liberia Road
Opposite TUC Building
Tel: +233 2896 66956

Liberation Rd - Takoradi
Tel: +233 2898 80084

Madina
Near Firestone
Tel: +233 2895 46065

North Industrial Area
Accra North
Tel: +233 2896 69490

Obuasi
Opposite Methodist Church
Tel: +233 2895 59215

Opeibea House
Airport, Accra
Tel: +233 2895 55923/5

Osu
Osu Oxford Street
Tel: +233 2895 26596

Ring Road Central
Accra
Tel: +233 2895 46055

Spintex Road
Near Hydraform Estates -
Junction
Tel: +233 2895 20164/9

Takoradi
Harbour Roundabout
Tel: +233 2895 46016

Tamale
Tel: +233 2895 55935-6

Tarkwa
Tel: +233 2896 69257

Tema
Community 1, Tema
Tel: +233 2895 26543-4

Tema East
Motorway Roundabout
Tel: +233 3033 11748

Tema Harbour
Harbour Roundabout
Tel: +233 2898 80094

Tudu
SCB Building
Tel: +233 2896 64525

Westlands
Westlands Blvd
Tel: +233 302 433 054

SME Banking Centres

Accra
Business Home
SSNIT Building, Awudome
Tel: +233 3070 11705

Kumasi
SME Banking Centre
Harper Road
Tel: +233 2895 16213

Banking Hours

Monday - Friday	All Branches	8:30 am – 4 pm
Saturday	Abeka, Achimota, Dansoman, Kejetia, Opeibea, Korle Dudor, Madina, Spintex, Osu, Tema, Tema East, Tudu, Tamale, Obuasi Westlands.	9am – 2 pm
Monday - Sunday	Breeze @ East Legon	24 Hours



