

# **Personal Loan and Credit Card Form**

sc.com/ng

1. Do you already	have ar	n ac	cou	nt w	/ith \$	Stanc	lard	Char	tere	d, if y	yes, g	go to	sec	tion 3	3)	
Please indicate your Account No:												]				
Bank Verification No																

2. For new customers,	pleas	e tel	l us a	abou	t γοι	ırsel	f																			
Please COMPLETE details	as it a	appea	ars or	ι γοι	ır me	ans (	of ide	entific	atior	whe	re ap	plica	able													
T I T L E							F		R	S	Т															
M I D D L E												L	Α	S	Т											
Date of birth	D	D	M	M	Y	Y	Y	Y			Coun of bir															
State of Origin																										
Bank Verification No																										
Gender		Male		F	emal	e						D		latior	al ID		Pas	sspo	rt	oter's	s Car	d	D	river	s Lic	ense
Marital Status		Single	e	M	larrie	d		Other	-			П	D Nu	mbei	r											
Tax ID No											]	Issu	e Dai	te	M	M	Y	Y		Exp	iry Da	ate	M	M	Y	Y
Residence Permit No (if applicable)																										
Education	ПН	igh S	choc			Diplo	ma		U	nderg	ıradu	ate		P	ost gr	adua	ite			Ν	lo of	Depe	endai	nts		
3. Contact Details																										
Telephone Number (office)	COL	untry c	ode	ar	ea co	de														Ne	twork	provi	der			
Telephone Number (mobile)	COL	untry c	ode	ar	ea co	de														Ne	twork	provi	der			
Email address																										
Full Residential Address	N	0			S	Т	R	E	E	Т				N	A	M	Е									
	N	E	A	R	E	S	Т		В	U	S		S	Т	0	Ρ				С		Т	Y			
	L	G	A												S	Т	А	Т	E							
Type of Residence		elf O	wnec	1		Ren	ted		Co	mpar	יא Oי	wned			Othe	er		1								
Length of Stay at Present Address			] Ye	ar(s)				N	lonth	S																
Previous Address	N	0			S	Т	R	Е	Е	Т				N	А	M	Е									
(if less than 3yrs at Present address)	N	E	A	R	E	S	Т		В	U	S		S	Т	0	Ρ				С		Т	Y			
	L	G	A												S	Т	А	Т	E							
4. Source of Funds																										

Name of Employer	
Nature of Employment	Salaried Self Employed Other Specify
Employment/Staff No	Employment Terms     Permanent     Contract
Name of Business	
Nature of Business	
Contract Tenor	Year(s)         Months         Contract Expiration         D         D         M         Y         Y         Y
Duration at current organisation	Year(s)     Months     Salary/Income Pay Day     D     D     Currency
Average monthly credit cash flow	Net Monthly Salary/Income
	Asset Value Currency Tenor
Asset under	Fixed Deposits
Standard Chartered	
Management	Investments (Bond/Mutual funds, Securities)
	Other Savings
	Description Value (NGN)
Monthly Expenses/ Payments/Recurring	
debits	
Address of Employer/ Business (for Self	
Address of Employer/ Business (for Self Employed)	

5. Do you have any Loan	s with any Lender(s) e.g. Other	banks, microfinance or loan	companies	
Type of Facility	Total Amount Borrowed (NGN)	Outstanding Loan Amount (NGN)	Monthly Repayment Amount (NGN)	Lender's Name

6. What would you like	e to ap	oly for?																						
Product/Solution		Based	on Sa	lary		ased ash F			Bas	ed o	n AU	М	Ca	ish S	Secu	red			pora aran			Othe (spe	er cify be	elow)
Salary Solutions + Current Ac Personal Loan & Credit card	count,																							
Salary Solution Lite 1: Curre account & Credit card	ent																							
Salary Solution Lite 2: Curre account & Personal Ioan	ent																							
Personal Loan only																								
Credit card only																								
Personal Loan	Ne	ew loan	T	op Up		Balar	nce Ti	rans	fer		Loan	Amc	ount (l	NGN	)					Te	enor (	mont	hs)	
Monthly Repayment amount					Int	erest	Rates	s%				Ρ	urpos	e of	the L	oan								
Visa Credit card Type	_ PI	atinum	G	iold				R	lepay	ment	Amo	unt o	ption			Mini	mum	amo	unt d	due		Tot	al Amo	ount due
Credit card repayment mode		ebit my a the due		t mont	hly	C	Cash		Che	que			Billin	g Cy	cle [	Date		201	th		25th		30th	5th
Name as it should appear on your Debit /Credit card																								
Mother's Maiden Name																								

7. Mandate for Cash (	Covered Len	nding		
Cash covered linked to Fixed deposit account	Deal no:		Amount held under lien	

# 8. Authorization to Set off against accounts in other banks

I hereby pledge to fund my account for my monthly loan and/ or credit card repayment. However, in the event that my account is not funded for my due repayment obligations, I authorise the bank to debit any or all of my other account(s) in Standard Chartered bank and my underlisted accounts in other banks for the value of the repayment amount, 7 days after the due date.

Bank	Account Number	Branch Address

## 9. Please consider these valuable services

E-statement for any of our products will be sent to your preferred email address as indicated in Section 3 of the form. We will not send physical statements unless indicated below. The default frequency for sending out the e-Statements on our products will be monthly unless otherwise stated below. Please refer to our tariff guide for charges on paper statements.

For paper statement, Paper Statement (Bank account)

Y N

Frequency: Monthly Quarterly

I would not like to be informed about promotions, products and services that Standard Chartered Bank, or its strategic partners, may offer through email and any other medium the bank wishes to use

10.	Ne	xt of	Kin																									
Т		Т	L	E								F		R	S	Т												
M		D	D	L	Е												L	А	S	Т								
Rela	tions	ship																										
Date	of B	Birth				D	D	M	M	Y	Y	Y	Y	]								Ger	nder		Male		Fe	male
Ema	il Ad	dress	5																									

Residential Address	N	0			S	Т	R	Е	E	Т				Ν	А	M	E										
	N	E	Α	R	Е	S	Т		В	U	S		S	Т	0	Ρ					С		Т	Y			
	L	G	А												S	Т	А	Т	Е								
Mailing Address (if different from above)																											_
																										<u> </u>	
11. References (two Ban	k Ace	cour	nt Ho	Iders	5)																						
First Reference																											
T I T L E							F		R	S	Т																
M I D D L E												L	Α	S	Т												
Residential Address	N	0			S	Т	R	Е	Е	Т				N	А	M	E										
Residential Address	С		Т	Y															S	Т	А	Т	E				
Email Address																											
Relationship																					No	of Ye	ars k	now	n		
Contact Phone Nos	со	untrv	code											1	соц	ntry c	ode		,						, 		
Employer Name and		<u>r</u>	1000	_						<u> </u>		<u> </u>	<u> </u>						<u> </u>	<u> </u>	<u> </u>			<u> </u>			
Address																											
																						1					
Name of Bank												Ba	ank A	CCOL	int N	umbe	er										
Second Reference							F	1	R	S	Т																
M I D D L E								-					A	S	Т												=
				 		-												 	 	 	1	1		 			
Residential Address	N	0			S	Т	R	E	E	Т				Ν	А	Μ	E										
	С		Т	Y															S	Т	A	Т	E				
Email Address																									, T	i T	

elationship		No of Years Known	
ontact Phone Nos			
mployer Name and ddress			
ame of Bank	Bank Account Number		

# 12. Declaration

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By signing these General Terms and Conditions

- You agree that we will send all correspondence in electronic form using email or any other electronic media. However, we reserve the right to send paper correspondence at your last known address as per our records.
- You represent and warrant that all information (including any documents) you have given us in connection with this application including minor accounts, if applicable, is correct, complete and not misleading. If this is not the case, you may be personally liable. You must notify us if you become aware that any information you have given changes, is incorrect or misleading.
- You represent and warrant that you have power and all necessary authorisations to own your assets and carry on any business you conduct, to enter into each of our banking agreements and any other arrangement with us and to comply with your obligations and exercise your rights under them.
- You consent to each of Standard Chartered Bank PLC and its subsidiaries (Standard Chartered Investment Services (SCIS) for investment products) and affiliates (including each branch or representative office) ("Standard Chartered Group"), its officers, employees, agents and advisers disclosing information relating to you (including details of our banking agreement, the accounts, the products or any arrangement with us) to our head office and any other member of the Standard Chartered Group in any jurisdiction ("permitted parties"); professional advisers, service providers (whether located in Nigeria or outside) for the purposes of providing any service to you in connection with this application or an application for Investment Services (including data processing), or independent contractors to, or agents of, the permitted parties, such as debt collection agencies, data processing firms and correspondents who are under a duty of confidentiality to the permitted parties, any actual or potential participant or sub-participant in relation to any of our obligations under our banking agreement between us, or assignee, novatee or transferee (or any officer, employee, agent or adviser of any of them), any credit reference agency, rating agency, business alliance partner, insurer or insurance broker of, or direct or indirect provider of credit protection to, or any permitted parties; any court, tribunal or authority (including an authority investigating an offence) with jurisdiction over the permitted parties; a merchant or member of VISA International or MasterCard International or China Union Pay where the disclosure is in connection with the use of a card; any authorised person or any security provider; anyone we consider necessary in order to provide you with the services in connection with an account.
- Subject to applicable local laws, you consent for Standard Chartered PLC or any of its affiliates (collectively 'the bank') to share your information with domestic and
  overseas regulators or tax authorities where necessary to establish your tax liability in any jurisdiction. Where required by domestic or overseas regulators or tax
  authorities, You consent and agree that the Bank may withhold from your account(s) such amounts as may be required according to applicable laws, regulations and
  directives.
- You undertake to notify the bank within 30 calendar days if there is a change in any information which you have provided to the bank.
- You have read and understood or have been explained to (in the language you understand) our Client Terms, i hal Loan Terms, and Credit Card Term which forms our banking agreement. They are available on our website at www.sc.com/ng or call us on +234 1 270 4611 for a point of the 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. In particular, you understand that by entering into our banking agreement, you give indemnities, authorisations, consents and waivers and agree to limitations on our liability.

You agree that we have the right to set off the amount held, in lien against funds in any of your accounts with us or with other banks for any facility(ies), that has been granted to you by us, in the event of default. You authorise us to purchase such foreign currency with the monies standing to the credit of your account(s) as may be necessary, to effect the set off and settle any outstanding amount on the loan facility, where necessary to facilitate the offsetting of the facility in default. You agree that the lien will only be lifted upon full repayment of the facility(ies). You agree that you shall lay no claim whatsoever to the funds under lien until such time the facility is repaid in full.

# 13. Facility Terms Acceptance

I hereby confirm that I have read and understand the terms and conditions of this facility and I willingly accept, and I agree that the facility will be fully repayable immediately should my salary deposits be moved to another bank, or should my salary deposits not occur for a period of 90 days.

Sig	nature	Applicant's Name	Date
	Attach One Passport Photograph	Specimen Signature (same as on your means of ID)	Postage Stamp
			Append Stamp

### 14. For Bank Use Only (complete as applicable for loans and/or accounts)

Sales Person's Name					
Sourcing ID		Signature:			
Referral Person's Name					
Referral ID:			Address Verification Done	Yes	
Sales/ Branch Manager's Name					
Sales/Branch Manager's Signature	÷				

Comment:

14.1 To be completed by Branch				
Account Number		Relationship Number		
Master No		GL Department		
Branch Code		ISIC Code		
Country Code		Employer code (for salaried		
Segment Code		applicants only)		

# 14.2 To be filled by Credit Initiation. Approval condition

Credit Underwriter's name	Signature & Date
Credit approver's name	Signature & Date
14.3 To be filled by Lending operations (Loan disbursement)	
Officer's name	Signature & Date
Manager's name	Signature & Date