



# CATHOLIC ARCHDIOCESE OF KUMASI CO-OP UNION FOR DEVELOPMENT (CAKCSOD) KUMASI.

## CREDIT APPRAISAL FORMS

### PERSONAL INFORMATION

Name .....Date.....  
Residential Address (Digital):.....  
Direction to Residence.....  
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I.D. No ..... ID Type .....Sex .....  
Date of Birth ..... Tel. No: .....  
No. of Dependants: ..... Marital Status: .....  
Name of Spouse: .....Tel No.....  
Postal Address: ..... Years in Business .....  
Occupation .....Nature of Business.....  
Direction to business.....  
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.....  
Average monthly Income.....Other Income.....

### ACCOUNT INFORMATION:

Account Type & Number ..... Date Opened.....  
Account Balance ..... Share Balance.....

### CREDIT INFORMATION

#### Previous Record

No. of Times Given Credit ..... Latest Credit Given.....  
Date Granted ..... Final Payment Date .....  
Outstanding Loan Balance ..... Reasons for Default (If Any) .....  
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**Present Loan**

Current Loan Requested: ..... Purpose .....

Duration ..... Interest rate .....

**Security**

Land ( ) Building ( ) Lien ( ) Lien Amount : .....

Description and Location of Land & Building: .....

.....Estimated Value: .....

Remarks on Security: .....

**LOAN APPLICATION AND AUTHORISATION:**

I(we) hereby apply for the loan as stated. The information I (we) have provided is to the best of my (our ) knowledge true and correct. I (we) authorized Catholic Archdiocese of Kumasi Co-operative Society for Development (CAKCSOD) to verify the correctness of this information and also obtain additional information it deems necessary in evaluating my loan application.

Date: ..... Borrower's Signature/Thumbprint: .....

Name of Account's Manager.....Signature & Date.....

**OFFICE USE ONLY**  
**CREDIT APPRAISAL REPORT**

NAME OF APPLICANT: .....

AMOUNT REQUESTED .....DURATION.....

LOAN PURPOSE.....

(1)        **BRIEF DESCRIPTION (HISTORY) OF CLIENT BUSINESS  
(BUSINESS BACKGROUND AND MAJOR CHANGE)**

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(2)        **MARKET FOR THE PRODUCTS/SERVICES AND CAPABILITY**

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(3)        **SECURITY**

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