



**FEDERAL ROAD SAFETY CORPS SULEJA STAFF
COOPERATIVE THRIFT AND LOAN SOCIETY (FSS-CTLS)
LOAN APPLICATION FORM**

Note: All fields must be completed.

I, Rank..... PINCommand
Phone.....wish to apply for a loan facility of the total sum of
(**amount in words**) (₦.....)

Salary bank: **Monthly salary:** (**attach recent 3months payslip**)

Type of Loan: Emergency (1 month@5%) ☐ **Current status:** Not on loan ☐
Normal (1 - 12 months@10%) ☐ Under loan ☐
Special (above 12 months@15%) ☐ **Total Loan balance:**.....
Monthly deduction:.....

I commit to fully repaying this loan within the specified period of(**duration**)
....., including all interest charges as outlined in the FSS-CTLS Bye-Laws. I
hereby authorize FSS-CTLS to automatically deduct both my monthly loan repayments
and regular monthly contributions directly from my salary account. I acknowledge and
agree that missing any scheduled loan installment payment will be considered a
default, which will result in the following consequences:

- a. **Liable for a default charge of 5% of the defaulted amount at any point in time.**
- b. **Use of my contribution to liquidate the loan balance at the expiration of the loan tenure.**
- c. **Right of FSS-CTLS to adopt any legal means or institute any legal action against me for the loan recovery.**

Signature:

Date:

GUARANTOR:

I accept the terms and conditions set forth in the FSS-CTLS Bye-Laws, and commit to acting as a guarantor for this loan applicant:

S/N	Name	PIN	Rank	Cmd	Phone No.	Sign/Date

FOR OFFICIAL USE ONLY:

Financial Secretary: Total contribution:.....Outstanding
Loan:.....Recommendations:.....Sign/Date:.....

President: Amount approved:.....Interest rate:.....Repayment
duration.....Starting.....Ending.....Sign/Date:.....

Pay a non-refundable fee of ₦1,000 into FSS-CTLS First Bank Account 2041556018 and attach evidence