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THE MD

OKUNSGLOBAL

Date _____

LOAN APPLICATION FORM

I _____

Wish to apply for the following loan facilities

LOAN/OVERDRAFT

I. P. O FINANCING

BUSINESS FINANCING

1. (a) Amount Required: _____ (b) Tenure _____

(c) Purpose _____

2. AS Security the following items are being offered

(a) _____

(b) _____

(c) _____

PERSONAL DATA

1. Name of Applicant _____

2. Residence Address _____

3. Telephone _____

4. Date of Birth Day ____ Month _____ Year _____

5. Length of stay in this address _____ State Of Origin _____

6. Office/Shop Address _____

7. Permanent Address of State of Origin _____

8. Business Engaged in _____ How Long _____

9. Marital Status _____ Next of Kin _____

10. Address of Next of kin _____

11. Relationship _____ Next of Kin Phone No. _____

Names of Guarantors and Phone Numbers

1.

2.

Signature _____

Okunglobal Signature _____