	DA	TE:
AFFIX YOUR PASSPORT HERE	Cus	stomer A/C No:
	Cus	stomer's Name:
	Pla	ce of Work Address
	 Cus	tomer Phone No:
The Managing Director, CITIZEN TRUST MICROFINANCE B		
OFFA, KWARA STATE.		
I/we hereby apply for loans/overdra	ft of #(Words)	
To enable me/us		
Tenure of loan/overdraft		
Due Date		
Collateral Security for the loan/ove	rdraft	
GUARANTOR		
In case of default please transfer the salary in flow.	the outstanding principal plus intere	st into current account with you and deduct same from my
Name	A/C No	
Place of work	Date	
Phone No	Signature	
	Yours faithfully	
	Customer's Name	
	Customer's Signature	
	Date	
CONFIRMATION OF STAFF SA	ALARY BY EMPLOYER	
This is to inform you that the abov account to another bank unless he/		staff. He/she will not be allowed to change or transfer his/her
His /her monthly salary is	it is hoped that will extend yo	ur assistance to him/her.
Employer's Name		Post Held
Signature	Offi d	cial Stamp



CITIZEN TRUST MICROFINANCE BANK NIGERIA LIMITED RC1255153 86, OLOFA WAY, P.M.B 434, OFFA, KWARA STATE. 08066101830.

GUARANTOR'S FORM

THE MANAGING DIRECTOR, CITIZEN TRUST MICROFINANCE BANK LTD. OFFA, KWARA STATE.

DEAR SIR,

RE: BANK FACILITY

I write to confirm my guarantee for the loan of # _____guaranted to Mr/Mrs ______in Citizen Trust microfinance bank limited. I am ready to accept full responsibility for my guarantee. Incase of default, please transfer the outstanding principal plus interest into my Current Account with you deduct same from my salary in flow.

Thank you as you comply with this instruction.

	Yours faithfully,
GUARANTOR 1	
Full Name:	
Place of work	
	Guarantor's Acct. No
Phone No	Signature
GUARANTOR 2	
	transfer the outstanding principal plus interest into my and deduct same from my salary/cash inflow.
Full Name:	
Place of work	
Date	Guarantor's Acct. No
	Signature

Variation for the faile