

# FULL MEMBERSHIP APPLICATION FORM - A\*



Please fill the application form, attach the relevant documents and send it to [members@ciskenya.co.ke](mailto:members@ciskenya.co.ke)

## COMPANY INFORMATION

Name of Company or Organisation

Trading Name

Postal Address

Physical Address

Telephone No.

Company Registration No.

KRA PIN No.

VAT Registration No.

Name(s) of Network(s) or Professional Association(s)/ Affiliation(s) (if any)

## BUSINESS CATEGORY

Bank

Cash/ Consumer Lender

DFIs/ State Lenders

Finance/Lease company

Insurance/ Assurance

Micro Finance Institution

Retail

SACCO

Telecommunications

Utilities

Other \_\_\_\_\_

## LOAN INFORMATION

Number of personal loan accounts in your portfolio

as at (date)

Number of corporate loan accounts in your portfolio

as at (date)

Is your debt recovery internal or outsourced?

Yes

No

Do you have consent to share information through CRBs from your customers?

Yes

No

## Business Profile

Please submit a short description / profile of the business which includes

(i) Ownership structure

(ii) Products offered

(iii) Why you want to join CIS Kenya.

*(Kindly provide as much information as possible. Use a separate page should this space be insufficient)*

\* For Credit Information Providers allowed to submit credit information.

## Membership Declaration

Having acquainted ourselves with the relevant Guidelines, Data Standardization Template (DST), Data Validation Tool (DVT) and Code of Conduct for members, we hereby confirm;

- (i) That all information reflected in this application is true and correct.
- (ii) That we shall abide by the set rules and guidelines.

### Signed for and on behalf of the Applicant

Name of the signatory:

Title of signatory:

Official Stamp

Email Address:

### Our Representative to CIS Kenya is

Name:

Title:

Tel No:

Cell No:

Email Address:

### Our Alternate Representative to CIS Kenya is

Name:

Title:

Tel No:

Cell No:

Email Address:

### Our Appointed Dispute Resolution Officer is

Name:

Title:

Tel No:

Cell No:

Email Address:

### Alternate is

Name:

Title:

Tel No:

Cell No:

Email Address:

**IMPORTANT**

Please enclose certified copies of:

- Certificate of incorporation
- PIN Certificate
- Registration Certificate
- Most recent audited financial statement

**NB: Copies should be in pdf file format**