



Mombasa Port Sacco Ltd
My Sacco of Choice

Mombasa Port Sacco Society Ltd

P.O. Box 95372 Mombasa- Kenya

Telephone: 041-222-124

Mobile: 0725238367/0780238367/0743836783

Email: info@msaportsacco.co.ke

M-SACCO MOBILE BANKING APPLICATION FORM

DATE.....

PLEASE COMPLETE DETAILS IN CAPITAL LETTERS

PERSONAL DETAILS

Full Name.....

Applicants ID NO..... Pin Number.....

Employment Number..... Membership Number.....

Mobile Phone no(s)..... (Safaricom Number ONLY)

Email Address.....

I want to use M-SACCO on the following menu accounts:

<input type="checkbox"/>	• Savings Withdrawal
<input type="checkbox"/>	• Loan Repayment
<input type="checkbox"/>	• Loan Request
<input type="checkbox"/>	• Deposit
<input type="checkbox"/>	• Balance Enquiry
<input type="checkbox"/>	• Airtime Purchase
<input type="checkbox"/>	• Utility Payment
<input type="checkbox"/>	• Information
<input type="checkbox"/>	• Sacco Payments

Please attach a copy of your national identification card. You MUST be registered with M-PESA to use the M-SACCO Service (*346#) is charged and this amount shall be deducted from your account each time an SMS is sent.

Declaration by the Applicant:

I hereby apply for M-Sacco solution. I warrant you that the information given above is true and complete and I authorize you to make any inquiries necessary in connection with this application. I accept and agree to be bound by the conditions of use. I agree that I am liable for charges incurred through the use of this Facility. I hereby indemnify the Sacco against all losses that they may incur as a result of my use of the facility. I understand that the Sacco reserves the right to decline the application without giving reasons.

Applicants ID NO..... Signature:

FOR OFFICIAL USE ONLY

Verified By: _____ Date Verified: _____

Approved By: _____ Date Approved: _____