



UKULIMA SAVINGS AND CREDIT CO-OPERATIVE SOCIETY LIMITED  
P. O. BOX 44071, 00100, NAIROBI TEL. 254 020 2785000  
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website [www.ukulimasacco.coop](http://www.ukulimasacco.coop)

**M-SACCO MOBILE BANKING APPLICATION FORM**  
**(PLEASE COMPLETE THE DETAILS IN CAPITAL LETTERS)**

Branch: ..... Date: .....

Full Names: .....

Applicant's ID/ Passport No. .... **(MUST ATTACH COPY OF ID / PASSPORT)**

Membership / Personal Number: ..... Employer: .....

FOSA Account No. .... Email:.....

Safaricom Cell Phone Number: ..... **(MPESA REGISTERED NUMBER)**

Other Registered Cell phone numbers that can deposit money into my account:

1. .... 2. .... 3. ....

**Applicant's Address:**

P. O. Box: ..... Code: ..... Town: .....

Office Tel: ..... House Tel: .....

**Declaration by the SMS / M-SACCO applicant:**

I/ we authorize Ukulima Sacco to issue me with M-Sacco credentials and warrant that the information given above is true and complete. I/we authorize the Society to make any necessary enquiries in connection with the application. I / we accept and agree to be bound by the conditions of use (as amended from time to time).

I/we agree that I/we am / are liable for all charges incurred through the use of this service. I/we hereby indemnify Ukulima Sacco against all losses that they incur as a result of my /our use of the facility. I/ we understand that Ukulima Sacco reserves the right to decline the application without giving reasons to the extent permitted by law.

Applicant's Signature(s) : ..... Date:.....

**For Official Use:**

Input by:..... Signature: ..... Date: .....

Verified by: ..... Signature: ..... Date: .....

Approved by: ..... Signature: ..... Date: .....