KARIBIB LAND AND HOUSING NEEDS APPLICATION FORM

A. Client Details *(for individual clients only)*

First Name:	Last Name:
Date of Birth:	ID Number:
Nationality:	Postal Address:
Residential Address:	Tel./Cellphone Number:
Email Address:	Work Tel. Phone Number:
Date of Birth:	ID Number:
Marital Status:	Ethnicity:
Sex: ☐ Male ☐ Female	No of Dependents:
Any Disabilities? ☐ Yes ☐ No *(if yes, provide the disability details below)*:	Albinism? ☐ Yes ☐ No

B. Application Details

Application Type: ☐ Housing ☐ Land	Head of Household? ☐ Yes ☐ No	
Purpose of Application *(housing application type only)*:	Loan Required? ☐ Yes ☐ No	
Land Zoning *(state if residential, business, industrial, etc.)*	Loan Amount (NAD) *(only if applicable)*	
Institution:	Project:	
Employment Status: ☐ Employed ☐ Unemployed ☐ Self-Employed		
Employer:	Occupation:	Nett. Monthly Income (NAD):
Subsidy? ☐ Yes ☐ No (*if yes, provide subsidy amount)*	Subsidy Amount (NAD):	
Usual Place of Residence: …… …… …… …… ……	Application Remarks: …… …… …… …… ……	

NB: The following should be attached to this application form:

1. Certified copies of identity documents
2. Bank statement/Payslip
3. Proof of income with a supporting Police Declaration for self employed clients.
4. Copy of marriage certificate if legally married.
5. Receipt of proof of payment for the application form (if applicable).

I certify that the information provided above is correct.

_____ ____ / _____ / 20_____

SIGNATURE OF THE APPLICANT **DATE**

FOR OFFICE USE	
Received by:	**Designation:**
Signature:	**Date:** ____ / _____ / 20_____ **Time:** ____**h**_____