

Initial Loan Application Form

Name: _____

Commercial Registration Number: _____

Legal Form: _____

Owners:

1- Name : _____ ID: _____

2- Name : _____ ID: _____

Project Activity: _____

Project location: _____

Project summary: _____

Project Cost:

Buildings	
Machinery	
Vehicles	
Furniture	
Contingency	
Preoperative expenses	
Working capital	

Loan Amount: _____

Have you ever / one of the partners applied or received a loan from ODB?

No

Yes

Loan Number ()

Contact Information:

Mobile: _____ P.O.Box: _____ E-mail: _____

Do you want to receive SMS messages regarding Banks services?

No

Yes