



Application for Civil Servants Vehicle Loan

P O Box 249
BASSETERRE, ST. KITTS
TEL NO 465-2288/465- 4041
FAX NO. 465-4016
EMAIL : dbskn@caribsurf.com

MAIN STREET
CHARLESTOWN, NEVIS
TEL NO. 469-5416
FAX NO. 469-1262
EMAIL: dbskn@caribsurf.com

APPLICANT	DOB (DD/MM/YY)	PHONE NOS HOME WORK	S.S.N #
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ADDRESS:	MINISTRY/DEPT.....
	POSITION.....
	PRESENT MONTHLY SALARY \$.....
	OTHER INCOME : SOURCE
	AMOUNT

AMOUNT REQUESTED EC\$

VEHICLE SPECIFICATION ARE PROVIDED ON THE ATTACHED PROFORMA INVOICE AND INSPECTION REPORT:

NEW VEHICLE	NAME OF SUPPLIER.....
USED VEHICLE	MODEL OF VEHICLE
	YEAR OF VEHICLE

I HEREBY DECLARE THAT THE ABOVE INFORMATION IS CORRECT AND THAT SUFFICIENT FUNDS ARE AVAILABLE FROM MY SALARY FOR THE REPAYMENT OF THE LOAN TO BE MADE DIRECTLY BY THE GOVERNMENT TREASURY.

CERTIFIED BY:

.....
APPLICANT

.....
ACCOUNTANT GENERAL

.....
DATE

.....
DATE

RECOMMENDED BY:

AUTHORISED BY:

.....
P.S/ ESTABLISHMENT

.....
FINANCIAL SECRETARY

.....
DATE

.....
DATE

APPROVED BY THE DEVELOPMENT BANK OF ST. KITTS & NEVIS:

.....
GENERAL MANAGER

.....
DATE