

Application for skills-based finance for young professionals



Contact numbers for application assistance

Windhoek Head Office 061 - 290 8000 Walvis Bay Office 064 - 220 924 / 221 857 Ongwediva Office 065 - 230 129 / 230 130 Rundu Office 066 - 257 735 / 257 736

www.dbn.com.na



Contact and banking details

Name & surname			
ID number			
Marital status (Y/N) / divorced			
Residential address			
Postal address			
Mobile no.	Em	ail address	
Bank	Braz	nch name	
Bank tel. no.	Acc	count no.	
Account name			
Current occupation			
Company registration no.			
(CC / Sole proprietorship)			

Professional field and qualification

Field: mark one appropriate field for professional enterprise	Х	Qualification
Medical / psychiatric medicine		
Dental		
Optometry		
Pharmaceutical		
Legal		
Accounting / Actuarial		
Veterinary		
Engineering		
Architecture		
Quantity surveying		
Name of institution of higher learning		
Date of qualification		
Name of governing body / council		
Date of registration with body / council		

Post-study work experience

Years and months after registration with body / council / licensing YY		YY	MM	
Most recent employer		Tel.		
Other employer		Tel.		

Financing and amount

			Grace period
Finance requirement **	Amount	Description	(3 - 6 months)
Specialised equipment *	N\$		
Stock *	N\$		
Premises / alterations *	N\$		
Specialised business vehicle *	N\$		
Operating capital **	N\$		
Total	N\$		

* Please attach quotes.

** Please attach business plan.



Job creation & region

IF ANY: No. of permanent jobs	No. of temporary jobs	
Description of jobs		
Town for professional practice	Region	

Owners' contribution

IF ANY: Own contribution towards	N\$	Description of contribution.
the business (excl. collateral)		

Collateral

Ι	F ANY: Collateral *	N\$	Description of collateral
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* Collateral can be insurance policy, fixed assets, movable assets, etc.

Professional indemnity insurance

IF ANY: Professional indemnity insurer		Policy no.	
Value	N\$		

Checklist

Certified copy of ID / passport (not more than 3 months old)	
Proof of residence (municipal bills, rental agreement, etc.)	
Proof of income (6 months bank statement bank stamped)	
Certified copy of professional qualifications	
Certified copy of registration with professional body / council	
Proof of registration of CC or sole proprietorship	
Verifiable letters of reference	
IF ANY: Marriage certificate or divorce certificate	
Quotations for assets / vehicles / stock to be financed	
Business plan	
Projected cash flow statement for the duration of the loan for new business (minimum 36 months)	
Good Standing Certificate from SSC	
Good Standing Certificate from Ministry of Finance	
Income Tax Registration Certificate	
Certificate of Fitness from the Municipality / Councils	
Statement of Personal Assets and Liabilities	
CV	
IF ANY: Copy of life insurance policy	
IF ANY: Copy of professional indemnity insurance policy	
IF ANY: Copy of sort-term insurance policy	

Acknowledgement

I, the undersigned,

Name and surname	
Identity no. / passport no.	

resolve to borrow

NS

from Development Bank of Namibia

and herewith acknowledge and state my understanding that:

- 1. the Development Bank of Namibia will be entitled to make enquiries about my payment profile and credit performance history for the purposes of compiling a credit assessment as provided for in the Bank of Namibia Act 1997: Credit Bureau Regulations (Regulation 15 and 16);
- 2. the assessment will relate to both favourable and unfavourable credit performance information (Regulation 15 and 16);
- 3. the Development Bank of Namibia will be obliged to provide such credit performance information to all credit bureaus and credit providers which have subscribed to receive credit performance information from credit bureaus and such information will include both favourable and unfavourable information (Regulation 22).
- 4. without any notice to me, the Development Bank of Namibia will be obligated and entitled to inform credit bureaus in the event that I default on this credit agreement, fail to effect payment or make late payment in terms of this agreement (Regulation 14(2)).
- 5. I accept that I will be required to take out life insurance and short-term insurance, that I will cede these policies to the Development Bank of Namibia, and that if I do not have these policies, these will be financed as part of a loan from Development Bank of Namibia.
- 6. I agree to attend mentoring and training as determined by Development Bank of Namibia.
- 7. I accept that I will be legally responsible for repayment of the loan received from Development Bank of Namibia.
- 8. I have registered a company / closed corporation / trade name as a sole proprietor and that I have registered for company tax (company or CC) or income tax (sole proprietor) as well as for VAT. I have a bank account with an online banking platform and will provide proof of the above to the Development Bank of Namibia.
- 9. I have satisfied myself to the meaning and consequences of the above-mentioned.
- 10. I warrant and represent that all documents and statements in this application are true, and accept that any misstatement of fact will disqualify me from finance provided by the Development Bank of Namibia or, should the misstatement be discovered after granting of finance, cancellation of the finance agreement upon which the outstanding balance shall become immediately repayable.

Signature	
Place	
Date	

Witness

Name and surname	
Signature	
Date	

Report theft, fraud, bribery, misconduct and nepotism anonymously

Development Bank of Namibia is committed to ethical behaviour and integrity in all its transactions and operations.

Deloitte Tip-offs Anonymous provides an anonymous reporting channel for unethical behaviour in the workplace. It is a completely independent, confidential whistleblowing hotline service operating 24-hours a day, 7 days per week and 365 days a year.

> E-mail a tip off to dbn@tip-offs.com Call 0800 290 800 (toll free - mobile & landlines) Website: www.tip-offs.com



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