

ALPHA MORGAN CAPITAL

Plot 1668b, Oyin Jolayemi Street, Victoria Island, Lagos

+234-04-888-0050, 888-0080

FACILITY APPLICATION FORM

A. CORPRATE INFORMATION

1. Name and address of company

2. Telephone Numbers

3. Are the Memorandum and Articles of Association enclosed? (If not, please attach)

4. When was the company established?
(Please attach certificate of incorporation)

5. Company's principle business

6. Who are the principle shareholders of the company?

Name	%
1	
2	
3	
4	
5	
Others	
Total	100%

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7. Who are the directors of the Company?

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

8. Who are members of senior management?

S/N	Name	Designation

9. Who will be responsible for monitoring and managing transaction?

(Include direct telephone lines)

Email address

10. Is there any other information regarding the Company that you believe will be relevant to this application?

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B. FINANCIAL INFORMATION

1. Are audited financial statements for the last two years attached? Yes/No please attach.

2. Are management accounts for the current period attached? Yes/No

3. Who are the company's auditors

4. What are the addresses of the company's bankers/financiers?

Name	Address
1.	
2.	
3.	

5. Have they extended any credit facilities to the company?

Please give details below. Attach extra sheet if necessary.

Bank	Type	Date	Tenor	Interest Rate	Current Balance

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C. TRANSACTION DETAILS

1. Type of facility required? Lease Loan

Description of transaction	Amount

2. Amount Required?

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3.

What percentage of transaction amount would you finance?
(Minimum of 20%)

20/25/30

4. Preferred tenor of facility? 1month__3months__6months__9months__12months

5. Security provided (including Location and Value)

- (i) _____
- (ii) Personal Guaranty of Mr./Mrs. _____

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(iii) _____

6. Type of Repayment/Rental?

Monthly

Quarterly

Semi-annually

Annually

7. Security Provided (including Location and Value)

(iv) Personal Guarantor of Mr./Mrs. _____

(v) _____

8. Type of lease preferred?(If lease)

Finance

Operating including Maintenance

9. Are there any special requirements in the structure or operation of the lease/loan facility? _____

10. Please state specifically the purpose of the facility _____

11. How do you intend to pay back? (repayment sources)? _____

We confirm the above information is correct:

For: Name of Company _____

Designation _____

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Name

Signature

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	Yes	No
Is direct communication with the auditors required?		
Is direct communication with bankers' required?		
Have all authorizations been obtained?		
Have we received a copy of memorandum and articles of association?		
Have we received a copy of the L.P.O?		
Have we received a copy of audited accounts?		
Have we received a copy of management accounts?		
Have we confirmed that proposed transaction?		
Is it in line with the company's object clause?		