



Document No: HS/FRM/12
Revision No: 01
Effective Date: 01/10/2026



POULTRY INFORMAL BUSINESS APPLICATION FORM



Loan Application Form

1.0 Company Details

Company / Applicant Details			
Business Name/ Applicant		Company No.	
Date of Incorporation/ Start Date of operation			
Contact Person		Tel	
Nature of business			
Business Location			
Loan Amount (BWP)			
Name			
Signature			
Date			

1.1 Applicants Personal Details

Title	Mr	Mrs	Ms	Dr				
Surname								
Other Names							Date Of Birth	
Contacts	Cell Phone:		General Telephone:		Omang No:		Facsimile:	
Marital Status	Single		Married		Divorced		Widow	
Marriage Regime					In Community		Out of Community	
Number of dependents			Number of Children				Number of Children under 18	
Disability							Yes	No
Postal Address						How long have you been at that address?		
Home Village Details	District			Village			Ward	
	Constituency			Name of Chief/ Headman				
Current Residence								
Are you employed?	Yes		No		Name of employer		Contact Details	

1.2 Highest Education Level

Non		Certificate	
PSLE		Diploma	
JCE		Degree	
BGSE, GCE, IGCE		No-Formal Education	



1.3 Personal Bank Account Details

Account Name		Branch	
Account Type		Account No	
Bank		Savings Amount	

1.4 Business Details

Type of Business		Location of Business	
------------------	--	----------------------	--

The Business Premise:

Rented

Owned

2.0 Next of Kin

Name		Name	
Relationship		Relationship	
Omang No.		Omang No.	
Postal Address		Postal Address	
Physical Address		Physical Address	
General Phone No.		General Phone No.	
Cell Phone No.		Cell Phone No.	
Employer (If Any)		Employer (If Any)	
Work Tel		Work Tel	

3.0 Loan Facility Details

Amount applied for BWP		Amount In Words	
Previous Loan Number		Previous Loan Amount	
Previous Loan Term			

Purpose		Amount (Pula)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
Total		



4.0 Credit History

Do you currently have any debts?

Yes ☐ No ☐

Name of Creditor	Loan Amount	Loan Repayment	Repayment Period	Amount Outstanding

5.0 Personal Declaration

I authorize and confirm that CEDA may source, share and disclose any information relating to my loan application or any information default to any third party (including other institutions or licensed credit reference agencies and any other institutions or persons permitted by law) for the purpose of evaluating my creditworthiness or for other lawful purpose.

I also accept all the terms and conditions of the loan as specified in CEDA rules and regulations.

Applicant's Name: _____

Date: _____ Signature: _____

6.0 Spousal Consent

I _____ of Omang ID No. _____ hereby declare that I am in full knowledge of my wife / husband (Tick where appropriate) that he/she has been advanced a loan of BWP _____ by CEDA. In case of any default by him/her, I hereby declare and guarantee the loan of BWP (in in words _____) declare that I will undertake to repay the loan on behalf of the said principal loanee at any time for whatever reason.

Name:		Postal Address:
Phone No:		Omang / ID No:
Residence:		Place Of Work:
Relationship to loanee:		

Signature: _____ Date: _____

FOR OFFICIAL USE

7.0 Recommendation / Approval and Authorization

Approved: ☐ Rejected: ☐ Deferred: ☐

Amount Approved: _____

Position	Name	Signature	Date
Branch Manager			
Director of credit			



8.0 Data Privacy Note

CEDA collects your personal data (directly from you or via third parties like credit bureaus) to provide financial services, verify your identity, assess risk, communicate with you, and meet legal obligations.

Your data is:

- **Used** only for the purposes it was collected for
- **Retained** if legally or operationally necessary
- **Shared** with third-party providers under strict contractual protections
- **Transferred** internationally only where equivalent data protection standards apply

Under the Botswana Data Protection Act 2024, you have the right to **access**, **correct**, or **delete** your personal data by contacting: dataprotection@ceda.co.bw

To further appreciate CEDA's Customer Privacy Notice, please visit our website. www.ceda.co.bw

By submitting the form, you **consent** to this data use and may **withdraw consent** at any time, subject to any overriding legal or contractual obligations.

9.0 DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case the above information is found to be false, untrue, misleading, or misrepresenting, I am aware that I may be held liable for it.

Full Name: _____

Date: _____ D D M M Y Y

Signature: _____

Name of Customer Advisor: _____

Date: _____ D D M M Y Y

Signature: _____



CEDA NETWORK

GABORONE BRANCH

Physical Address

Prime Plaza, Plot 54358, Corner PG
Matante Road & Khama Crescent Ext, CBD

Postal Address

Private Bag 00504, Gaborone, Botswana
T : +267 3170895, F : +267 3170896

KANYE BRANCH

Physical Address

Maswabi Complex, Plot. No. 1264,
Sebonego Ward, Kanye

Postal Address

Private Bag 16, Kanye, Botswana
T : +267 544-0324, F : +267 544-1109

MOLEPOLOLE BRANCH

Physical Address

Plot 470, Borakanelo Ward, Molepolole

Postal Address

P. O. Box 3271, Molepolole, Botswana
T : +267 5920000, F : +267 5915318

PHIKWE BRANCH

Physical Address

Behind Barclays Bank (next to Coop), Main Mall

Postal Address

Private Bag 190, Selebi Phikwe, Botswana
T : +267 262 2377, F : +267 262 2374

FRANCISTOWN BRANCH

Physical Address

Plot No 323676 (Unit 6,7,8) Donga
Along Marang Road

Postal Address

P. O. Box 1845, Francistown, Botswana
T : +267 241-2775, F : +267 241-6045

LETLHAKANE BRANCH

Physical Address

Plot 10297, Mokgobelele Ward, Letlhakane

Postal Address

Private Bag 55, Letlhakane, Botswana
Tel: 297 6254

MAUN BRANCH

Physical Address

Tsheko Road (Next to Standard Chartered
Bank and Behind Center Lodge), Old Mall

Postal Address

P/Bag 393, Maun, Botswana,
T : +267 686-4169, F : +267 686-4858

SHAKawe BRANCH

Physical Address

Acacia Mall - Unit 10, Plot 180, Shakawe
Botswana

Postal Address

Private Bag 16, Shakawe.
Tel: 6875090. Fax: 6875093

KASANE BRANCH

Physical Address

Plot 5085- Nunga Road (Within the Rural
Administration Centre)

Postal Address

P O Box 63, Kasane
Tel : 625 0183 Fax: 6250185

GHANZI BRANCH

Physical Address

Plot 1299 (Opposite Bus Rank, Next to
Delta Pharmacy)

Postal Address

P. O. Box 792, Ghanzi, Botswana
T : +267 659-7331, F : +267 659-7595

PALAPYE BRANCH

Physical Address

Riverview Mall A1 Road,
Plot 8717 Unit 17, Palapye

Postal Address

Private Bag 24, Palapye, Botswana
T : +267 4920279, F : +267 4920235

HUKUNTSI BRANCH

Physical Address

Macheng Mall, Plot No. 158, Unit 7

Postal Address

P.O Box ,131 Hukuntsi Botswana
T : +267 6510170 F: 267 6510169

TSABONG BRANCH

Physical Address

Plot No. 7069, Tsabong Rural Administra-
tive Centre (RAC)

Postal Address

Private Bag 23, Tsabong
T: +267 654 0208 F: +267 654 0208

TUTUME BRANCH

Physical Address

Plot No 1551, Magapatona Ward
Sefalana Shoppers Complex

Postal Address

T : +267 2987003