#### SHEDULE I

Date submitted:

Dd/mm/yy:

### KENYA PIPELINE COMPANY RETIREMENT BENEFIT SCHEME REGISTERED TRUSTEES &

# K. P.C RETIREMENT BENEFIT SCHEME 2006 (D.C) REGISTERED TRUSTEES

Please attach this application form together with the supporting documents listed under Section 4 of this form for further details.

#### APPLICATION TO PURCHASE A RESIDENTIAL HOUSE

SECTION 1. APPLICANT'S DETAILS	
1. Name of Applicant	Title: (Hon. /Prof./Dr. /Mr. /Ms. /Mrs.) Surname: First name. Other name:
2. Land reference or title number: (e.g. LR. No.)	
3. Date of birth: (dd/mm/yy)	

4. Membership status: (e.g. Active or deferred member	
5. Member number i.e KPC Company number:	
6. National identity card or passport number:	
7. KRA PIN Number:	
8. Contact details:	□ Mobile number:
9. Has the applicant previously utilized accrued benefits for the purchase of a residential house (indicate Yes/No)	

# **SECTION 2. PROPERTY DETAILS**

<ol> <li>Description of the residential house:</li> <li>(e.g. Apartment / bungalow / maisonette / other - specify</li> </ol>	
2. Location of property: (e.g. State town and county)	
3. Particulars of title/interest held: (Specify if freehold or leasehold. If the title is leasehold, state term and commencement date)	
4. Name of institution selling the residential house:	
5. Do you have a certificate of occupation for the house?  (Yes/No)	

# **SECTION 3. FUNDING**

1. Do you intend to utilize your accrued additional voluntary contributions (if any) to purchase the residential house?  (indicate yes/no)	
2. Do you intend to access additional funds to purchase the residential house? (yes/no)	1. If yes, state the source of funds.  (Give details of the source, and/or where the funds shall be obtained from, specify the lending institution and loan approval status)
	<ul><li>2. If additional funds are from another scheme of the same sponsor, specify the name of the scheme.</li><li>(Give name of the scheme, membership number and membership status)</li></ul>
	3. If you intend to combine your accrued benefits with those of your spouse to purchase the residential house.  (Indicate full names of spouse, amount to be contributed by spouse, name of scheme and membership number of the spouse)

# SECTION 4. ATTACHMENTS (TICK ATTACHED)

Certified copy of National Identity  Card or passport	
Certified copy of KRA PIN	
Letter of offer or sale agreement from institution	
Certified copy of the certificate of incorporation or other incorporating document of the institution	
Certified copy of certificate of title or certificate of lease	
Original certificate of official search or equivalent Current valuation report	
Documentary evidence of source of additional funds	
Proof of clearance of rent and rates payable	
Certified copy of the certificate of occupation from respective County Government	
Evidence of marriage	
Certified copy of spouse's National Identity Card or passport (joint purchase)	
Certified copy of spouse's KRA PIN (joint purchase)	

Spousal consent, (joint purchase)	
Copy of spouse's statement of	
available balance	

#### **SECTION 5. DECLARATION**

- **1.** I hereby confirm that I have read and understood the contents of this form and that all the information provided is true and accurate.
- **2**. I undertake to notify the trustees of any changes to the information provided.
- **3.** I hereby acknowledge that I am aware of the taxes, incidental costs, fees and charges that I may incur directly or indirectly when purchasing a house under these rules.

# **SECTION 6. FOR OFFICIAL USE ONLY**

<ul> <li>2. 40% of accrued benefits</li> <li>3. Additional voluntary contribution</li> <li>4. Spouses contribution (if any)</li> <li>5. Application approved / denied / deferred (provide reasons)</li> </ul>	<ul><li>3. Additional voluntary contribution</li></ul>	1. 1	Funds available (Yes/No)
4. Spouses contribution (if any)	4. Spouses contribution (if any)	2. 4	10% of accrued benefits
		3. 1	Additional voluntary contribution
5. Application approved / denied / deferred (provide reasons)	5. Application approved / denied / deferred (provide reasons)	4. 5	Spouses contribution (if any)
		5. 1	Application approved / denied / deferred (provide reasons)