

(Wajir County Legislative Supplement No. 2)

LEGAL NOTICE NO. 2

THE PUBLIC FINANCE MANAGEMENT ACT

(Cap. 412A.)

THE WAJIR COUNTY ENTERPRISE DEVELOPMENT FUND ACT, 2024

(No. 4 of 2024)

THE WAJIR COUNTY ENTERPRISE DEVELOPMENT FUND REGULATIONS, 2025

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THE PUBLIC FINANCE MANAGEMENT ACT

(Cap. 412A.)

THE WAJIR COUNTY ENTERPRISE DEVELOPMENT FUND ACT, 2024

(No. 4 of 2024)

IN EXERCISE of the powers conferred by section 24 of the Wajir County Enterprise Development Fund Act, 2024 as read with section 116 of the Public Finance Management Act (Cap. 412A), The County Executive Committee Member for Finance and Economic Planning, makes the following Regulations—

THE WAJIR COUNTY ENTERPRISE DEVELOPMENT FUND REGULATIONS, 2025

PART I— PRELIMINARY PROVISIONS

*Citation*

1. These Regulations may be cited as the Wajir County Enterprise Development Fund Regulations, 2025.

*Interpretation*

2. In these Regulations—

“Act” means the Wajir County Enterprise Development Fund Act, 2024.

“applicant” means a person who has submitted a loan application for consideration by the Board;

“Board” means the Wajir County Development Fund Board established under section 8 (1) of the Act;

“borrower” means a person whose loan application has been approved and granted by the Board;

“County Executive Committee Member” means the County Executive Committee Member for the time being responsible for matters relating to Finance;

“Fund” means the Wajir County Development Fund established under section 4 of the Act; and

“loan” means a sum of money advanced by the Board to an applicant from the Fund and which is expected to be repaid at a specified time.

PART II— ESTABLISHMENT OF THE FUND

*Designation of the Administrator*

3. Pursuant to section 15 of the Act, the County Executive Committee Member shall designate an Administrator of the Fund, from amongst the employees of the County Government.

*Responsibilities of the Administrator*

4. Further to the responsibilities of the Fund Administrator under section 15(2) (3) of the Act, the Fund Administrator shall—

- (a) ensure that the earnings of, or accruals to the Fund are retained in the Fund, unless the County Executive Committee Member directs otherwise;

- (b) ensure that money held in the Fund, including any earnings or accruals referred to in Regulation 24, is spent only for the purposes for which the Fund is established;
- (c) prepare accounts for the Fund for each financial year;
- (d) not later than three months after the end of each financial year, submit financial statements relating to those accounts to the Auditor-General;
- (e) present financial statements of the Fund, to the County Assembly.
- (f) ensure that the accounts for the Fund and the annual financial statements relating to those accounts comply with the accounting standards prescribed and published by the Accounting Standards Committee from time to time;
- (g) open and operate a designated bank account for the Fund with the approval of the County Executive Committee Member Finance; and
- (h) under the direction of the Board, administer the assets of the Fund.

#### PART III—ELIGIBILITY FOR FUNDING

##### *Target group*

5. An application for funding may be received from —

- (a) an individual;
- (b) a registered group; or
- (c) a registered business entities including a co-operative society, partnership, limited liability partnership or a company.

##### *Eligibility for funding for individual applicants*

6. (1) An individual may apply for funding where the individual—

- (a) is an adult;
- (b) is a citizen of Kenya, whether or not the individual resides in Wajir; and
- (c) has an established business in the County.

(2) Despite sub-regulation (1), a resident of Wajir is eligible for funding where the resident—

- (a) is an adult;
- (b) is a citizen of Kenya;
- (c) intends to establish a business within the County; and
- (d) has prepared a business plan, as evidence of paragraph (c).

##### *Eligibility of groups*

7. A group is eligible to apply for a loan from the Fund where the group—

- (a) is registered under the relevant national law;
- (b) members are residents of Wajir;

- (c) has a constitution outlining—
  - (i) the purpose of the group;
  - (ii) the governance structures of the group; and
  - (iii) criteria for membership.
- (d) has duly signed minutes authorizing the officials of the group to apply for a loan from the Fund; and
- (e) has or intends to establish a business in the County.

*Eligibility of business entities*

8. A business entity is eligible to apply for a loan from the Fund where the entity—

- (a) is registered as a cooperative society, partnership, limited liability partnership or a private company limited by shares, under the relevant national law;
- (b) has at least half of the members of the entity as residents of the County;
- (c) has a constitution or articles of association outlining—
  - (i) the governance structures of the entity; and
  - (ii) membership of the entity.
- (d) has a duly signed minutes authorizing the officials or directors of the entity to apply for a loan from the Fund; and
- (e) has an established business in the County.

PART IV—APPLICATION FOR FUNDING

*Application period*

9. (1) The Board shall, at least once every four months, issue notice inviting applications for funding.

(2) The invitation under sub-regulation (1) shall be in Form 1 set out in the Schedule and shall specify—

- (a) the duration in which applications can be made;
- (b) funding available for loaning;
- (c) the process of application;
- (d) where application forms may be accessed; and
- (e) any additional the criteria to be used that may be applied by the Board in considering the applications.

(3) The Board shall publicize the notice issued under sub regulation (1) through radio broadcasts, social media posts and such other medium as the Board may determine from time to time.

*Application for loan*

10. (1) A person wishing to access a loan from the Fund shall apply to the Board in the manner set out under the Second Schedule.

- (2) An application for funding shall be accompanied by—
  - (a) a copy of the applicant’s national identity card;
  - (b) a copy of the applicant’s registration documents, in the case of a group or business entity;
  - (c) a copy of the applicant’s business plan where applicable;
  - (d) a credit report from a recognized Credit Reference Bureau;
  - (e) a copy of the applicant’s tax PIN certificate; and
  - (f) evidence of collateral.
- (3) The Applicant shall submit the duly filled application form to the Ward Administrator, in the respective Ward
- (4) Upon submitting the application form, the applicant shall fill in the application register availed by the Ward Administrator.
- (5) Upon the lapse of the application period, the Sub-county Trade and Co-operatives Officer shall within seven days collect all the application forms from the Ward Administrators in the Sub-county.
- (6) The Sub-county Trade and Co-operatives Officer shall verify the existence of the applicant’s business in the County or, where applicable, the applicant’s residence status.
- (7) The Sub-county Trade and Co-operatives Officer shall, within fourteen days of collecting application forms, submit the application forms to the Fund Administrator alongside brief reports on the residence status of the applicant or existence of the applicant’s business in the County as the case may be.

*Consideration of applications*

11. (1) The Fund Administrator shall, within seven days of receiving applications from Sub-county Trade and Co-operatives officers, submit the applications to the Board for review and approval.
- (2) The Board shall on receipt of the applications under sub-regulation (1) consider the applications within thirty days.
- (3) In considering applications for funding received pursuant to this Regulation, the Board shall ensure—
  - (a) equitable allocation of resources to all the wards of the County;
  - (b) fair balance in allocation of funding to men and women; and
  - (c) prioritization of applications from youth, persons with disability and minority groups.
- (4) Where the Board is satisfied that the applicant meets the criteria for funding set out under these Regulations, the Board shall grant funding to the applicant, in line with the available funding.
- (5) Where the Board determines that an applicant does not meet the criteria for

funding set out under these regulations, the Board shall—

- (a) reject the application; and
- (b) notify the applicant of its decision, in writing, within fourteen days.

*Collateral*

12. (1) The Board shall ensure that all loans advanced are secured with acceptable collateral.

(2) Loans may be secured using—

- (a) title deeds;
- (b) chattels mortgage;
- (c) the applicant's pay slip;
- (d) insurance policy with adequate surrender value;
- (e) motor vehicle log books; or
- (f) guarantors.

*Disbursement of funds*

13. The Board shall, upon reviewing applications, authorize the disbursement funds to successful applicant

*Review*

14. (1) A person aggrieved by a decision of the Board may apply to the Board for a review within fourteen days from the date of the decision.

(2) The Board may, upon reviewing the decision, uphold, annul or vary the decision as necessary.

PART V—FINANCIAL PROVISIONS

*Opening of Bank Accounts*

15. (1) The Fund Administrator may, upon approval by the County Executive Committee Member, open and maintain bank accounts for the Fund.

(2) The signatories to the bank account shall include the Fund Administrator and any other signatories designated by the Board with the approval of the County Executive Committee Member.

*Books of Account*

*Cap. 412B*

16. The Fund Administrator shall keep proper books of accounts and shall prepare annual statements of accounts in accordance with the Public Audit Act.

*Audit*

*Cap. 412B*

17. (1) Within a period of three months from the end of each financial year, the

Administrator of the Fund shall submit to the Auditor-General the accounts of the Fund together with—

- (a) a statement of the income and expenditure of the Fund during the year; and
  - (b) a statement of the assets and liabilities of the Fund on the last day of that year.
- (2) The accounts of the Fund shall be audited and reported upon in accordance with the Public Audit Act, 2015.
- (3) The Fund Administrator shall submit copies of the accounts of the Fund specified under sub-regulation (1) to the County Executive Committee Member and the County Assembly.

#### PART VII—MISCELLANEOUS PROVISIONS

##### *Default*

18. (1) Where a borrower is in default of the terms of the loan agreement, the Fund Administrator shall in the first instance reach out to the borrower to establish the reasons for the default.
- (2) Where the Fund Administrator finds the reasons for default to be reasonable, the Fund Administrator may propose a restructuring of the debt subject to the provisions of the Fund's credit policy.
- (3) Where the Fund Administrator finds the reasons for default to be unreasonable, the Fund Administrator shall issue a default notice in the second month of non-payment.
- (4) Where a borrower fails to settle the debt upon receiving a default notice, the Fund Administrator shall cause a demand letter to be issued to the borrower, specifying a specific period during which the borrower should pay the outstanding debt.
- (5) Upon the lapse of the time period specified in the demand letter, the Fund Administrator shall take steps to recover the debt in line with the Act, these Regulations and the Fund's credit policy.
- (6) A borrower who is aggrieved by the decisions of the Fund Administrator under this Regulation may appeal to the Board and the decision of the Board shall be final.

##### *Reports*

19. (1) The Board shall, on a quarterly and annual basis, submit reports to the County Executive Committee Member with a copy to the County Executive Committee Member responsible for matters relating to Trade and the County Assembly.
- (2) The reports envisaged under sub-regulation (1) shall contain-
- (a) a summary of the applications received by the Board in the preceding quarter and indicating the funding status of such applications;
  - (b) a summary of the status of disbursements from the Fund; and
  - (c) information on the financial and non-financial performance of the Fund;
- (3) The Board shall prepare and submit annual monitoring and evaluation reports

to the County Executive Committee Member with a copy to the County Executive Committee Member responsible for matters relating to Trade.

*Records*

20. The Fund Administrator shall ensure that all the records of the Fund, including financial statements, reports, application documents, copies of collateral received and records of all disbursements from the Fund are securely kept and updated regularly.

*Terms of the loan*

21. The Board shall determine the—

- (a) modes of disbursing funds to successful applicants;
- (b) modes of disbursement of funds;
- (c) modes of payment;
- (d) terms of credit;
- (e) restructuring of debt;
- (f) debt recovery; and
- (g) any other matter that the Board may deem relevant.

*Winding up of the Fund*

*Cap. 412A*

22. (1) Where the Fund is wound up pursuant to section 116(5) of the Public Finance Management Act—

- (a) the Fund Administrator shall pay any amount remaining in the Fund into the County Exchequer Account for the credit of the County Government while other assets of the Fund shall be transferred to the County Department for the time being responsible for matters relating to Trade;
- (b) the County Executive Committee Member shall pay any deficit in the Fund from the funds of the County Government in the County Exchequer Account with the approval of the County Assembly; and
- (c) the County Executive Committee Member shall submit a final statement of accounts of the Fund to the County Assembly.

(2) The Fund Administrator shall prepare the final winding up report not later than six months from the date of the decision to wind up the Fund and submit the financial and non-financial reports to the Auditor-General for audit with a copy to the County Treasury.

(3) The Auditor-General shall, after the audit, submit the final report to the County Assembly within three months of the receipt of the initial report under paragraph (2), with a copy to the County Treasury.

**FIRST SCHEDULE:  
START-UP BUSINESS PLAN TEMPLATE  
(Regulation 6(2)(d))**

Name of Business .....

Logo of the Business

Location of Business: .....

Telephone Number:.....

**SECTION ONE: BUSINESS BACKGROUND**

Part 1: Name of Business.....

Part 2: Name/s of Entrepreneurs/Owners .....

.....

Part 3: Registration

**SECTION TWO: BUSINESS SITUATIONAL ANALYSIS**

SWOT analysis of the Business

What strengths, weaknesses, threats and opportunities do you for see in your business

SWOT Analysis

Strengths	Weaknesses
Opportunity	Threats

**SECTION THREE: MARKET ASSESSMENT**

Which is market segment are you targeting?	
What is the scope of your market coverage?	
What is the growth potential for each segment of the market?	
How are you planning to sell your products/services?	
Who are your key competitors?	
What will you do better than your competitors?	

What trends, relevant to your business, do you see?	
How will you price the product?	

## MARKETING OF PRODUCTS/SERVICES

<i>Product/Service</i>	
Describe the products and services you plan to sell.	
How is your product or service unique?	
How does your product or service compare to other products in Quality?	
Price?	
Location?	
What experience do you have with this product/service?	
<i>Pricing</i>	
How much will you sell your product for?	
Explain your choice of price: (i) Quality of Product (ii) Competitors' price (iii) Target market	
<i>Promotion</i>	
What key benefits of your product/service do you want to promote the most?	
How will you promote your product/service (word of mouth, social gatherings, sale agents, samples, posters, etc)? Explain your choice(s) in terms of: (i) Effectiveness (ii) Cost/affordability	
<i>Distribution</i>	
What distribution channel will you use?	

(i) Wholesaler Retailer Consumer; (ii) Retailer Consumer; (iii) Direct to the Consumer; (iv) Explain your choice	
---	--

**SECTION FOUR: MANAGEMENT AND HUMAN RESOURCE NEEDS**

*Describe who will perform the various tasks that keep your business operating.*

<b>HUMAN RESOURCE NEEDS</b>	
Who will you need to work in your business	
How/ where will you get the get employee(s)	

**SECTION FIVE: PRODUCTION/OPERATION PLAN**

*Describe the basic operations of your business. Describe the technical features of your product and the manufacturing process (raw materials through to final products). Indicate your production capacity, production and purchasing channels*

What premises and equipment do you need for production and how will you get them?	
What supplies/raw materials will you need and where will you get them?	
What hour do you/will you operate?	
What are the main components/stages in the production process?	
What are the operation expenses for the first year?	
Who are your principal suppliers and what terms will you have with them?	

Projected financial performance .....

Projected sales in the next one year .....

**SECTION SEVEN: FINANCIAL PLAN**

Year .....													
Sales/month	1	2	3	4	5	6	7	8	9	10	11	12	
KSh.													
Average sales per month: KSh. _____													

Projected expenses in the next one year												
Expenses/month	1	2	3	4	5	6	7	8	9	10	11	12
KSh.												
Average expenses per month: KSh. _____												
Projected profit in the next one year												
Sale/month	1	2	3	4	5	6	7	8	9	10	11	12
KSh.												
Average profit per month: KSh. _____												
<b>In addition, the following information will be required: Sources of income/revenue for the business and amounts;</b>												
Source						Amount						
TOTAL												
Types of expenses for the business and amounts;												
Expense						Amount						
TOTAL												
Assets and equipment for the business and their costs;												
Asset/Equipment						Amount						
<u>FOR OFFICIAL USE</u>												
Collected by ward administrator:												
Name.....												
Signature.....Date.....												
Appraised by Trade Officer/Co-operative Officer:												

Name.....

Signature.....Date.....

Confirmed by Sub-county Administrator:  
 Name.....Signature.....Date.....  
 ... Verified by Fund Administrator:

I, Mr/Mrs/Ms.....Fund Administrator, confirm that all the documents are attached and relevant information captured.  
 Name..... Signature.....Date.....

Decision by the Board

Recommendation from the County Enterprise Development Fund Board.

Approval  Decline

Chairman.....  
 Date.....Signature.....

Secretary.....Date.....  
 Signature.....

Minute  
 No.....Date.....

We have validated and technically assessed the proposal and we recommend as follows:

Approved: Amount KSh.....in words .....

Deferred:  
 Reasons.....  
 .....

Rejected:  
 Reasons.....  
 .....

Signed:  
 Chairman.....

Witnessed by  
 Secretary.....

Minutes signed by all Board members sitting on  
 date.....

**REQUIREMENTS**

1. A dully filled in application form.
2. Photocopy of ID both for applicants and guarantors.

3. Evidence that business is based and operational at the Wajir County (License).
4. A copy of PIN certificate.
5. Bank account
6. List of charged collaterals with applicants and guarantors from the advocate (*Where necessary*)

*This form is not for sale but can be copied, printed and photocopied for purposes of furthering this Regulation only. Wajir County Government.*

SECOND SCHEDULE

Regulation 10 (1)

APPLICATION FORMS

FORM 1: INDIVIDUAL APPLICATION FORM

(Please tick and answer the relevant question)

Startup (0-12 months) existing business (13 months +)

Business Sector.....

SECTION I: PERSONAL PROFILE

Surname.....Other

Names.....

Category (please tick one)..... Youth . Woman Person with

Disability  ID No.....

Date Birth(dd/mm/yy)..... of

Phone No..... Email.....

Pin No..... Marital Status.....

Spouse ID..... Spouse phone number.....

Sub-county.....

(Constituency).....

Ward .....

Physical location (village, nearest town/shopping Centre, mosque) .....

Bank/Sacco details..... Branch.....

SECTION II: VERIFICATION OF HOME DETAILS

Name of Ward.....

Administrator.....

Ward..... Tel..... I certify that I know the applicant and that they are of good conduct to access public funds.

Signature..... Official Rubber stamp..... Date.....

SECTION III: LOCATION OF THE BUSINESS

Sub-county..... Ward.....

Name of Ward Administrator..... Tel No. ....

I certify that I know the applicant and that they are of good conduct to access public funds.

Business Details

Please give a brief description of your business experience

.....  
...

.....  
...  
.....  
...  
.....  
...

SECTION IV-CREDIT FACILITY PROPOSAL

1. Credit facility Particulars

i. Credit facility Amount Requested (Ksh)	
ii. Main Product (s)/ Service (s)	
iii. Main Customers/target market	
iv. Business site ( attach map)	

2. (a) Projected income flow from business

<i>Product</i>	<i>Sales</i>	<i>Total cost</i>	<i>Approx. Profit</i>

Management: Who will manage the business?

.....  
.....  
.....  
.....

Marketing: How do/will you market your products?

.....  
.....  
.....  
.....

Proposed growth plans: How do you plan to grow your business?

.....  
.....  
.....  
.....

Part C

(a) Additional income sources if any.....  
KSh.....

(b) Changes expected in the business from facilitation injection.....  
 .....  
 .....  
 .....P  
 lan for facility repayment (briefly explain how you expect to service the facility to  
 completion)  
 .....  
 .....  
 .....

*Guarantor Consent and Declaration*

I Mr./M/S/Mrs.....Guarantee (*Applicants Name*)  
 .....of .....County..... Sub-  
 county.....ward, a credit facility of KSh.....In case of  
 default in payment of the credit facility for 90 days I guarantee to repay the principal  
 outstanding amount plus associated costs to the Wajir County Enterprise Development  
 Fund

*Guarantor One*

Guarantor Name..... ID/PP No.....  
 Relationship to Applicant.....Postal Address.....  
 Code..... Town..... Phone No.....  
 Sub-county.....  
 Ward.....  
 Village.....  
 Physical Location of Employment/Business.....

(*Attach Sketch Map*) Monthly Income (*attach pay slip/bank statement*)  
 .....

Attach copy of security (*for title deed and/or log book only*) where guarantor is pledging  
 security for facility.

Type of Security	Title No./Car Registration No.	Estimated Value	Discounted Value

Signature of Guarantor.....Date.....

*Guarantor Consent and Declaration*

I Mr./M/S/Mrs.....Guarantee (*Applicants Name*)  
 .....of .....County..... Sub-  
 county.....ward, a credit facility  
 of KSh.....In case of default in

payment of the credit facility for 90 days I guarantee to repay the principal outstanding amount plus associated costs to the Wajir County Enterprise Development Fund

*Guarantor Two*

Guarantor Name..... ID/PP No.....

Relationship to Applicant..... Postal Address.....

Code..... Town..... Phone No.....

Sub-county.....

Ward.....

Village.....

Physical Location of Employment/Business.....

*(Attach Sketch Map)*

Monthly Income (attach pay slip/bank statement)

.....

Attach copy of security (for title deed and/or log book only) where guarantor is pledging security for a facility.

<i>Type of Security</i>	<i>Title No./Car Registration No.</i>	<i>Estimated Value</i>	<i>Discounted Value</i>

Signature of Guarantor..... Date.....

**Other Terms and Conditions**

- (a) In connection with this application and /or maintaining a credit facility with the Wajir County Enterprise Development Fund, I/We authorize the Fund to carry out credit checks with or obtain my credit information from, a credit reference bureau. In the event of the account going into default, I consent to my name, transaction and default details being forwarded to a credit reference bureau for listing.
- (b) I/We agree that the Wajir County Enterprise Development Fund, may disclose details relating to my/our facility account to any third-party including Credit reference bureau, if in the Lender’s opinion such disclosure is necessary for the purpose of evaluating my/our creditworthiness or for any other lawful purpose.

**Declaration**

I..... ID No.....

Declare that the information provided in this application form regarding myself and business is correct subject to changes in the projections. I understand that the Wajir

County Government reserve the right to verify this information and I will cooperate fully in this regard, and that if I am found to have provided incorrect information, it will lead to automatic disqualification and prosecution.

Signed.....

Date.....

FOR OFFICIAL USE

Collected by Ward Administrator:

Name.....

Signature.....Date.....

Appraised by Trade officer/Co-operative officer:

Name.....

Signature.....Date.....

Confirmed by Sub-county Administrator:

Name.....Signature.....Date.....

Verified by Fund Administrator:

I, Mr/Mrs/Ms ..... Fund Administrator, confirm that all the documents are attached and relevant information captured.

Name..... Signature.....

Date.....

Decision by the Board

Recommendation from the County Enterprise Development Fund Board.

Approval  Decline

Chairman..... Date.....Signature.....

Secretary.....Date..... Signature.....

Minute No.....Date.....

We have validated and technically assessed the proposal and we recommend as follows:  
Approved: Amount (in figures) Ksh.....in words  
.Kenya Shillings.....

Deferred:

Reasons.....

.....

Rejected:

Reasons.....

.....

Signed by Chairman.....

Witnessed Secretary..... by

Minutes signed by all Board members sitting on date.....

REQUIREMENTS

- 1. A dully filled in application form.
2. Photocopy of ID both for applicants and guarantors.
3. Evidence that business is based and operational at the Wajir County (License).
4. A copy of PIN certificate.
5. Bank account statements for 6 months.
6. List of charged collaterals with applicants and guarantors from the advocate (where necessary)

This form is not for sale but can be copied, printed and photocopied for purposes of furthering this regulation only.

WAJIR COUNTY GOVERNMENT.

FORM 2: GROUP FACILITY APPLICATION FORM

Group Information

- 1. Group Name:
2. Group Certificate Number:
3. Address:
o County: Sub-county:
o Ward:
4. Phone Number:
5. Email Address:

BRIEF BACKGROUND OF THE GROUP

i). Purpose/objective (e.g.) improve Economic well-being of members

.....
.....
.....

ii) Key activities .....

.....
.....
.....

iii) Achievements.....

.....

.....

.....

.....

v) Challenges.....

.....

.....

Business Details

- 1. Date Registered: \_\_\_\_\_
- 2. Number of members: \_\_\_\_\_
- 3. Incomes: \_\_\_\_\_
- 4. Expenses: \_\_\_\_\_

Credit Facility Information

- 5. Facility Amount Requested: \_\_\_\_\_
- 6. Facility Purpose: \_\_\_\_\_
- 7. Facility Term Requested:
  - o  6 months  9 months  1 year  Other: \_\_\_\_\_
- 8. Collateral Offered: \_\_\_\_\_

Business Financial Information

- 9. Bank Name: \_\_\_\_\_
- 10. Account Number: \_\_\_\_\_
- 11. Outstanding Debts: \_\_\_\_\_

GROUP DECLARATION

We, the undersigned, being the validity elected leaders of the group hereby commit the group individually and jointly to adhere to the terms and conditions of this Fund’s Regulations. We also confirm that the above information is true and authorize the Fund to;

- (i) Share information of our performance history with the Registrar of Culture and Social Services.
- (ii) Confirm bank details with our bank as and when necessary.

- (a) Chairperson.....ID No.....Tel No.....  
Signature.....Date.....
- (b) Secretary.....ID No.....Tel No.....  
Signature.....Date.....
- (c) Treasurer.....ID No.....Tel No.....  
Signature.....Date.....



Collected by Ward Administrator:

Name.....

Signature.....Date.....

Appraised by Trade officer/Co-operative Officer:

Name.....

Signature.....Date.....

Confirmed by Sub-county Administrator:

Name.....Signature.....Date.....

Verified by Fund Administrator:

I, Mr/Mrs/Ms.....Fund Administrator, confirm that all the documents are attached and relevant information captured.

Name.....Signature.....

Date.....

Decision by the Board

Recommendation from the County Enterprise Development Fund Board.

Approval  Decline

Chairman.....Date.....Signature.....

Secretary.....Date.....

Signature.....

Minute No.....Date.....

We have validated and technically assessed the proposal and we recommend as follows:

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Deferred:

Reasons.....

.....

Rejected:

Reasons.....

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Signed by Chairman.....

Witnessed by Secretary.....

Minutes signed by all Board members sitting on date.....

REQUIREMENTS

1. A dully filled in application form.
2. Photocopy of ID both for applicants and guarantors.
3. Evidence that business is based and operational at the Wajir County (License).

4. A copy of PIN Certificate.
5. Bank account statements for 6 months.
6. List of charged collaterals with applicants and guarantors from the advocate (*where necessary*)

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WAJIR COUNTY GOVERNMENT.

FORM 3: CO-OPERATIVE FACILITY APPLICATION FORM

Co-operative Information

1. Name of Co-operative: \_\_\_\_\_
2. Certificate of Registration Number: \_\_\_\_\_
3. Physical Address: \_\_\_\_\_  
County: \_\_\_\_\_  
Sub-county: \_\_\_\_\_  
Ward: \_\_\_\_\_
4. Phone Number: \_\_\_\_\_
5. Email Address: \_\_\_\_\_
6. Type of Co-operative: \_\_\_\_\_
  - Producer  SACCO  Marketing  Consumer  Other: \_\_\_\_\_
7. PIN of Co-operative: \_\_\_\_\_

Business Details

14. Date Registered: \_\_\_\_\_
15. Number of Members: \_\_\_\_\_
16. Income: \_\_\_\_\_
17. Expenses: \_\_\_\_\_

Credit facility Information

2. Facility Amount Requested: \_\_\_\_\_
3. Facility Purpose: \_\_\_\_\_
4. Facility Term Requested: \_\_\_\_\_
  - 6 months  9 months  1 year  Other: \_\_\_\_\_
5. Collateral Offered: \_\_\_\_\_

Business Financial Information

1. Bank Name: \_\_\_\_\_
2. Account Number: \_\_\_\_\_
3. Outstanding Debts: \_\_\_\_\_

**Signatories Information****1. Signatory 1**

- Full Name: \_\_\_\_\_
- Position in Co-operative: \_\_\_\_\_
- National ID number: \_\_\_\_\_
- Address: \_\_\_\_\_ County: \_\_\_\_\_
- Sub-county: \_\_\_\_\_ Ward: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

**2. Signatory 2**

- Full Name: \_\_\_\_\_
- Position in Co-operative: \_\_\_\_\_
- National ID number: \_\_\_\_\_
- Address: \_\_\_\_\_ County: \_\_\_\_\_
- \_\_\_\_\_ Sub-county: \_\_\_\_\_
- Ward: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

**3. Signatory 3**

- Full Name: \_\_\_\_\_
- Position in Co-operative: \_\_\_\_\_
- National ID Number: \_\_\_\_\_
- Address: \_\_\_\_\_
- County: \_\_\_\_\_ Sub-county: \_\_\_\_\_
- Ward: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

**Additional Information****2. Business Proposal: (if applicable)**

- Attached  Not Attached

**3. Recent Financial Statements:**

- Attached  Not Attached

**4. Tax Compliance Certificate**

- Attached  Not Attached

Consent and Declaration

I hereby certify that the information provided in this application is true and correct to the best of my knowledge. I authorize the lender to verify any information contained in this application and to obtain a credit report if necessary.

Signatory 1: \_\_\_\_\_

Date: \_\_\_\_\_

Signatory 2: \_\_\_\_\_

Date: \_\_\_\_\_

Signatory 3: \_\_\_\_\_

Date: \_\_\_\_\_

FOR OFFICIAL USE

Collected by ward administrator:

Name.....

Signature.....Date.....

Appraised by Trade Officer/Co-operative Officer:

Name..... Signature.....Date.....

Confirmed by Sub-county Administrator:

Name.....Signature.....Date.....

Verified by Fund Administrator:

I, Mr/Mrs/Ms.....Fund Administrator, confirm that all the documents are attached and relevant information captured.

Name.....Signature..... Date.....

Decision by the Board

Recommendation from the County Enterprise Development Fund Board.

Approval  Decline

Chairman..... Date.....Signature.....

Secretary.....Date..... Signature.....

Minute No.....Date.....

We have validated and technically assessed the proposal and we recommend as follows:

Approved: Amount KSh.....in words .....

Deferred:

Reasons.....

.....

Rejected:

Reasons.....

.....  
 Signed by Chairman.....  
 Witnessed by Secretary.....  
 Minutes signed by all Board members sitting on date.....

**REQUIREMENTS**

1. A dully filled in application form.
2. Photocopy of ID both for applicants and guarantors.
3. Evidence that business is based and operational at the Wajir County (License).
4. A copy of PIN Certificate.
5. Bank account statements for 6 months.
6. List of charged collaterals with applicants and guarantors from the advocate (*where necessary*)

*This form is not for sale but can be copied, printed and photocopied for purposes of furthering this regulation only.*

**WAJIR COUNTY GOVERNMENT.**

## THIRD SCHEDULE

## CHECKLISTS INDIVIDUAL FACILITY CHECKLIST AT APPLICATION

WAJIR COUNTY ENTERPRISE DEVELOPMENT FUND			
REQUIREMENTS	Expected	Yes	No
Applicant is in operation for years(minimum)	6 months		
Business is registered or Business plan	Confirmed		
Has a bank account	Confirmed		
Business is legal	Confirmed		
Business in Wajir county	Confirmed		
Purpose of facility clearly stated	Confirmed		
Facility applied does not exceed the maximum amount	2 million		
collateral available	Confirmed		
Repayment period requested is within the set limits for the purpose of a facility	Confirmed		
Required documentation			
National identification	Attached		
6 months Bank/Mpesa statements	Attached		
Business permit	Attached		
PIN	Attached		
Tax compliance certificate	Attached		
CRB report	Attached		
Facility application form duly completed and signed	Attached		

## GROUP FACILITY CHECKLIST AT APPLICATION

WAJIR COUNTY ENTERPRISE DEVELOPMENT FUND			
<i>Requirements</i>	<i>Expected</i>	<i>Yes</i>	<i>No</i>
Group is in operation for years(minimum)	6 months		
Holds regular meetings	Confirmed		
Group has a physical location	Confirmed		
Group has a constitution	Confirmed		
Group has a well-kept cash book	Confirmed		
Group has a banking history	Confirmed		
Group is registered	Confirmed		
Credit facility applied does not exceed the maximum amount	KSh. 2 million		

Collateral available	Confirmed		
Credit history of the group and group members is clean	Confirmed		
Repayment period requested is within the set limits for the purpose of credit facility	Confirmed		
Required documentation			
Business registration certificate	Attached		
Group registration certificate	Attached		
List of members	Attached		
Minutes			
Constitution of the group	Attached		
6 months Bank statements	Attached		
Business permit	Attached		
CRB reports of signatories	Attached		
Credit facility application form duly completed and signed by all the required individuals	Attached		

## CO-OPERATIVE FACILITY CHECKLIST AT APPLICATION

WAJIR COUNTY ENTERPRISE DEVELOPMENT FUND			
<i>Requirements</i>	<i>Expected</i>	<i>Yes</i>	<i>Yes</i>
Cooperative is in operation for years(minimum)	1 year		
Cooperative holds annual general meetings	Confirmed		
Co-operative has a physical location	Confirmed		
Co-operative has by-laws	Confirmed		
Cooperative has audited financial accounts	Confirmed		
Cooperative has a banking history	Confirmed		
Cooperative has a clean CRB report	Confirmed		
Signatories have clean CRB reports	Confirmed		
Cooperative is registered	Confirmed		
Facility applied does not exceed the maximum amount	KSh. 2 million		
30% cash collateral available	Confirmed		
Repayment period requested is within the set limits for the purpose of facility	Confirmed		

<i>Required documentation</i>			
Certificate of registration	Attached		
12 months Bank statements	Attached		
Business permit	Attached		
Copies of PIN certificate of signatories	Attached		
PIN of the cooperative	Attached		
Tax compliance certificate of cooperative	Attached		
CRB report of cooperative	Attached		
CRB reports of signatories	Attached		
Facility application form duly completed and signed by all the required individuals	Attached		

FOURTH SCHEDULE:  
FACILITY OFFER

Date: .....

Name of cooperative/Individual/self-help group:.....

Address: .....

Wajir County, Sub-county....., Ward.....

Dear .....

Re: Facility Offer

We are pleased to inform you that the Board of Wajir County Enterprise Development Fund has approved your facility application. Below are the terms and conditions of the facility offer:

Credit facility Details

1. Facility Amount: .....

2. Purpose of Facility: .....

3. Administration fees: 3% per annum

4. Facility Term.....years

5. Repayment Schedule: (Monthly/Quarterly/Annually) payments of KSh (Payment Amount)

6. First Payment Due Date: .....

Collateral

The facility will be secured by the following collateral:

- *(Description of Collateral)*

Conditions and Covenants

This facility offer is subject to the following conditions and covenants:

1. *Financial Reporting*: The borrower shall provide quarterly business progress reports/financial statements and annual audited financial statements.

2. *Use of Funds*: The facility proceeds shall be used solely for specific stated purpose.

3. *Insurance*: The borrower shall maintain adequate insurance on the collateral for the duration of the facility.

Acceptance of Offer

To accept this facility offer, please sign and return a copy of this letter by (*Acceptance Deadline Date*). Upon receipt of the signed acceptance, we will proceed with the disbursement of the facility funds.

We look forward to supporting your Cooperative/Business/Self-help Group growth and success. If you have any questions or need further assistance, please do not hesitate to contact us at (*Contact Information*).

Thank you for choosing Wajir County Enterprise Development Fund. Sincerely,

Name.....

Board Chair Wajir County Enterprise Development Fund Phone Number (of Wajir County Enterprise Development Fund)

Email Address (of Wajir County Enterprise Development Fund)

.....

FIFTH SCHEDULE  
APPLICATION PROCESS ROLES

<i>Serial No.</i>	<i>Player</i>	<i>Roles</i>
1.	Applicant	<ul style="list-style-type: none"> <li>• Apply for the credit facility by filling the application form</li> <li>• Submitting the filled application and the necessary documents to the Ward Administrator</li> </ul>
2.	Ward administrator	<ul style="list-style-type: none"> <li>• Verify the residency of the applicant</li> <li>• Distribute the application forms to the applicants</li> </ul>
3.	Trade Officer and Co-operative Officer	<ul style="list-style-type: none"> <li>• Collection of the blank application forms from the Fund Administrator</li> <li>• Forwarding of blank application forms to the Ward Administrator</li> <li>• Appraisal of business capability to service the credit facility</li> <li>• Deliver the duly filled application forms to the Sub-county Administrator and the Fund Administrator</li> <li>• Monitor repayment of the credit facilities</li> </ul>
4.	Sub-county Administrator	<ul style="list-style-type: none"> <li>• Confirmation of the residency of the applicant</li> </ul>
5.	Fund Administrator	<ul style="list-style-type: none"> <li>• Verification of the applications</li> <li>• Forwarding the application to the Board</li> </ul>
6.	The Board	<ul style="list-style-type: none"> <li>• Decision making on the credit facility</li> </ul>

SIXTH SCHEDULE  
FACILITY PURPOSE TABLE

<i>Purpose</i>	<i>Repayment Frequency</i>	<i>Administration Fees</i>	<i>Repayment Rate</i>	<i>Minimum Amount</i>	<i>Maximum Amount</i>	<i>Grace Period</i>
WORKING CAPITAL	Monthly	3%	1 year	KSh. 50,000	KSh. 2 million	1 month
ASSET BASED FINANCING	Monthly	3%	1 year	KSh. 50,000	KSh. 2 million	3 months
AGRIBUSINESS	Seasonal	3%	1 years	KSh. 50,000	KSh. 2 million	3 months

Made on the 21st November, 2025.

MOHAMED HASSAN HUSSEIN,  
*County Executive Committee Member for Finance.*