



## **ISTIKBAL APPLICATION FORM**

1. Name	Name		ID NO		
2. Mobile Numb	. Mobile Number				
3. Credit Card No.: \( \sum \sum \sum \sum \sum \sum \sum \sum					
4. Furniture item chosenTotal priceTotal					
5. I authorize KCB Card Centre to debit my Credit card account with KES on a monthly basis for Months on the card due date, being payment for the above products I have chosen.					
Repayment period (m		ayment period (months)	Tick your selection		
	3	Months	, , , , , , , , , , , , , , , , , , , ,		
		D. Co. and b. c.			
	4	Months			
	5 6	Months			
	7	Months  Months			
	'	IVIOITUIS			
	8	Months			
	9	Months			
	10	Months			
	11	Months			
	12	Months			
I understand that by signing this request, I have agreed to be fully liable in fully paying for the furniture.					
All furniture purchased shall be checked before accepting delivery and will remain under manufacturer's warranty for stated period on warranty card.  Istikbal showroom where the furniture is purchased/collected					
Signature Date					
(Customer to sign)					
FOR OFFICIAL USE ONLY					
PAYMENT	AM	OUNT (KES)	APPROVAL CODE	SIGN	
1 <sup>ST</sup> Instalment					
Balance					
Signature			Date		

(KCB Card Center official to sign)