

APPLICANT AUTHORISATION TO EMPLOYER



Guaranty Trust Bank (Ghana) Ltd

In consideration of Guaranty Trust Bank (Ghana) Limited continuing to granting me banking and credit facilities as it may from time to time think fit, I _____ of _____ and being a full time employee of _____ hereby authorize you to:

1. Continue to pay my monthly salary and any allowances/benefits through my account number _____ with Guaranty Trust Bank (Ghana) Limited.

2. Pay all my terminal benefits and/or gratuity which I may be entitled to towards the payment of any outstanding credit facility should my employment cease for any reason.

This arrangement will remain in force until written confirmation from Guaranty Trust Bank (Ghana) Limited to the effect that I no longer access any credit facilities from them and that I have no outstanding obligations to them.

Applicant Signature: _____

Date: _____

EMPLOYER UNDERTAKING TO GTBANK

We confirm that the above is a full time employee of this organization and that we shall act in consonance with the written instructions above. In addition, we shall notify you within three (3) working days should this employee's service be terminated by this organization for any reason or should the employee resign from his/her employment. This confirmation is given in good faith and without prejudice to the organization.

We hereby covenant to:

1. To continue to pay all the salaries, benefits, emoluments, and in case of exit from our organization, terminal benefits of the Applicant into account number _____ with Guaranty Trust Bank (Ghana) Limited. This shall continue until we receive written confirmation from Guaranty Trust Bank (Ghana) Limited stating that it has discontinued the extension of any credit facility to the Applicant and that the Applicant has no outstanding obligations to it.

2. Inform you of any loan applied for by the Applicant subsequent to the credit facility taken from Guaranty Trust Bank (Ghana) Limited.

3. Apply any net terminal benefits accruing to the Applicant to his account number _____ in order to discharge whatever obligation is owed to you under the above scheme.

4. Not to accept any instruction from the employee to discontinue salary or loan repayments to Guaranty Trust Bank (Ghana) Limited without prior written confirmation from Guaranty Trust Bank (Ghana) Limited.

Organization: _____

Name of Company Official & Position: _____

Signature: _____

Date: _____

Seal/Stamp _____