TERMS AND CONDITIONS

Read through these terms and conditions carefully BEFORE you sign this and every other form related to your application for credit. In the event that my application for credit is approved I confirm, agree and/or acknowledge that:

- Purchases, Instalment payments, fees, interest and any other charges on this account are
 paid using the ZiG only in cash. For avoidance of doubt US\$ (US\$ notes and coins),
 Pounds, Pula, Rand, or any other currency other than the ZiG may be accepted as a
 method of transacting on this account at the prevailing exchange rate.
- 2. All information supplied by me to Edgars relating to my application for credit is true and correct in every respect. I agree to immediately notify Edgars in writing of any change in my current circumstances, including any change in my address and phone number.
- 3. Notwithstanding the monthly instalment plan that may be initially agreed upon Edgars, in its sole discretion may vary that plan, provided that the number of instalments I shall be required to pay in settlement of any balance due by me shall not be more than nine (6) instalments except in circumstances detailed in clause 9 below.
- 4. I shall pay the total amount due by the due date each month.
- 5. Interest is currently at _____% Interest is charged on the outstanding average daily balance and aggregated at the close of the billing period, which is about one month. All amounts including but not limited to my credit purchases, accrued interest and other charges of any nature shall constitute the principal sum outstanding at the end of the billing period. Overall interest charged on outstanding balance can be reduced by paying monthly instalments early or by paying the total balance earlier.
- NB: Interest is calculated daily on a simple basis by using the following formula the average daily closing balance owing on the account facility multiplied by the applicable interest rate per month divided by the number of days in that month, to determine the interest owing per day. The daily interest is then aggregated for the period between the last billing date and the current due date and then added to the balance owing on the account facility on the date of current billing (billing date). Interest rates will, from time to time, decrease or increase depending on the market conditions. Edgars will let me know of any increase or decrease in interest rates before making changes to interest rates.
- 6. Should I default in payment of the due amount by the due date, I shall be liable for the payment to Edgars of late payment interest charges in ZiG as follows.
 - 6.1 If my account is in arrears, late payment interest charges currently at______% per month, will be charged on the total balance owing, before monthly balance in ZiG
 - 6.2 If my account is in current status, but has an amount past due (APD), late payment interest charges currently at _____% per month, will be charges in clauses 5 above, are charged on the applicable monthly balance in ZiG.

- 6.3 I accept this liability in acknowledgement of administrative costs that Edgars will incur as a consequence of my failure to pay timeously. The current late payment interest charge will be reviewed from time to time and Edgars will let me know of any increase or decrease in charges before making changes.
- 7. Edgars shall be entitled to charge any administration fees, refer to drawer cheque fees and the like, at rates to be determined from time to time and Edgars will inform me of any changes.
- 8. The late payment interest charges to be debited to my account shall be added to the monthly balance of the account, as defined in clause 4 & 5 above, and capitalized for the purpose of calculating future interest.
- 9. In the event that I do not settle in full the amount due under any monthly billing by the due date reflected thereon, Edgars shall have the right to claim immediate payment in ZiG of the total balance due at the date of default, together with the aforesaid late payment interest charge on the whole amount then due, at the rate of interest as determined by Edgars (refer to clauses 4 & 5 above).
- 10. I shall be liable to reimburse Edgars any costs in ZiG it incurs in recovering any sum due and owing by me, including any tracing fees and administration costs, collection charges and all legal costs in the scale as between legal practitioner and client including Legal Practitioner's collection commission.
- 11. In the event of any legal proceedings instituted against me l;
 - 11.1 consent to the jurisdiction of any Magistrate's Court in Zimbabwe or the Magistrate's Court in any country in the event that | leave Zimbabwe notwithstanding that the amount due by me may exceed the jurisdiction of that court.
 - 11.2 hereby choose as my domicile citandi et executandi my residential address appearing on the credit application form submitted herewith or such other address in Zimbabwe of which I will immediately notify Edgars in writing.
- 12. Edgars may disclose my confidential and consumer credit information to registered credit bureau, credit registry and any Government agencies.
 - 12.1 |understand that I may at any time contact any credit bureau or credit registry and request that my consumer credit information be disclosed to me.
- 13. I hereby give my spouse, whose full names appear on the application form submitted herewith, and whose signature appears at the foot hereof ,my authority to purchase goods from Edgars under this credit facility on my behalf and agree to personally and fully settle all debts so incurred on my behalf in terms hereof, (Delete this clause if not applicable)

Customer Signature
Spouse Name
Spouse ID No
Spouse Signature
Witness
Date
Staff check list: Have you explained? (Tick)
• Interest Charges
Credit Scheme Type
 Definition of Total due Revolving Credit BuyingPower/Credit Available Late Payment Interest Charge Policy Instalment Calculations Instalment Due Date Arrears Follow Up Payment Options (ZiG) Trading Calendar Statement option (SMS/Email)
Revolving Credit
BuyingPower/Credit Available
Late Payment Interest Charge Policy
Instalment Calculations
Instalment Due Date
Arrears Follow Up
Payment Options (ZiG)
Trading Calendar
Statement option (SMS/Email)
Prompt/Early Repayments Benefits
I certify that I have read and understood <u>and agree to be bound by</u> the terms and conditions above
Customer's Signature Date
Staff Member Name Date
Signed (STAFF MEMBER)



ZIG CREDIT ACCOUNT APPLICATION FORM

Revolving Credit For Evolving Fashion







ACCOUNT DETAILS
Account Type Months To Pay
Club Plus Loan Yes No
PERSONAL DETAILS
Title: Mr Mrs /Miss Initials First Name Ms/ Dr
Surname Maiden Name (If applicable)
Date of Birth DDMMYY I.D. No.
Driver's licence No.
Passport No.
Nationality
Marital Status Single Married Separated Divorced Widowed
Residential Address
Email Address
Postal Address (If different from above)
Cell Cell Cell Phone
Do you own a house Yes No Mortgage
If no, where do you live Rent Living with parents Employer's Accomodation
Do you own a car Yes No Model Year
Time at Current Y Y M M Time at Previous Y M M Number of Residence
Previous Address
EMPLOYMENT DETAILS
You are employed as Full Time Part Time Casual Student Contractor Pensioner
employed as
Contract Expiry Date DDMMYY Highest Professional Qualification
Occupation (Teacher, lawyer etc) Work Fmail

Mining Banking Ret	
Sector Sector Sector Sec	ctor Service Sector Defence
Councils NGO ZESA	NRZ Communications (State)
Current Company name	
Physical address	
Work Phone	Ext Employee/ Clock No:
	Supervisor/ Time at Current Job
Gross monthly income	Net monthly income
Other Income (Specify)	What date of month do you get paid (18th, 25th etc)
Previous Company Worked Name and Address	
Bank Loans	Other Loans
Monthly Payment ZiG	Monthly Payment ZiG
BANKING DETAILS	
D 1/D 11	
Society	Branch
Acc. No.	Branch
Acc. No. Mastercard/Visa/Other	
Society Acc. No. Mastercard/Visa/Other Card limit Card Expiry D	Date Y Y M M
Society Acc. No. Mastercard/Visa/Other Card limit Card Expiry D	Date Y Y M M
Society Acc. No. Mastercard/Visa/Other Card limit Card Expiry C SPOUSE/NEXT OF K	Date Y Y M M
Society Acc. No. Mastercard/Visa/Other Card limit Card Expiry C SPOUSE/NEXT OF K Title First Name	Oate Y Y M M CIN DETAILS
Society Acc. No. Mastercard/Visa/Other Card limit Card Expiry C SPOUSE/NEXT OF K Title First Name D.O.B	Oate Y Y M M CIN DETAILS Surname ID Number Cell No:
Society Acc. No. Mastercard/Visa/Other Card limit Card Expiry D SPOUSE/NEXT OF K Title First Name D.O.B Relationship	Oate Y Y M M CIN DETAILS Surname ID Number Cell No: Company Phone
Society Acc. No. Mastercard/Visa/Other Card limit Card Expiry C SPOUSE/NEXT OF K First Name D.O.B Relationship Company Address/ Home	Oate Y Y M M CIN DETAILS Surname ID Number Cell No: Company
SPOUSE/NEXT OF K	Oate Y Y M M CIN DETAILS Surname ID Number Cell No: Company Phone Number

DEPENDENT CHILDREN OR OTHER DEPENDENTS' DETAILS 1. Name Relationship Phone D.O.B Male Female Number 2. Name Relationship Phone D.O.B Male Female Number 3. Name Relationship Phone D.O.B Male Female Number 4. Name Relationship Phone D.O.B Male Female Number **DETAILS OF RELATIVES WHO DO NOT LIVE WITH YOU** 1. Full Name Relationship Residential/ Home/Bus **Bus Address** Phone Full Relationship Name Residential/ Home/Bus **Bus Address** Phone **CREDIT REFERENCE DETAILS** 1. Store/ Acc. No. Company Monthly Phone Payment ZiG 2. Store/ Acc. No. Company Monthly Payment ZiG Phone **HOSPITAL CASH PLAN DETAILS** a. Would you like to join the Edgars Hospital Cash plan underwritten by FBC? Yes Already a member **MI-LIFE FUNERAL INSURANCE DETAILS**

a. Would you like to join MI-LIFE, funeral insurance cover underwitten by CBZ

Already a member

Yes

No

E9 MTPUSD (11/2022)

OFFICE USE ONLY										
Account Number										
A B C D E F Bank Statement if no payslip Sign				Accourage Confirmate C	nt mation Code mation de la co	D D Yes Yes	M M	M No No No override,	/ Y	de
ACCOUNT UP	DAT	ΓES								
low would you like to receive account updates?										
mail Address					SM (Phone					
Vhich Social Media platfo	rms a	re you	on?							
Facebook Instagram X (Twitter) Tik Tok										
Please indicate the radio	statio	n you	listen	to:						
certify that the completed Customer Signature								Dat	e	