



**ISLAMIC CRESCENT CO-OPERATIVE SOCIETY
SHARED ASSET MURABAHAH FINANCING APPLICATION FORM**

DATE:

NAME MEMBERSHIP NO.....

DATE OF JOINING THE CO-OP NUMBER OF SHAREHOLDING

ITEM(S) REQUESTED FOR

COST OF THE ITEM(S).....

.....

(In words)

PROPOSED SECURITY FOR THE FACILITY

(Please attached evidence)

ANY ON- GOING REPAYMENT OF FACILITY OR LOAN (YES/ NO)

PROPOSED DURATION FOR THE REPAYMENT

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APPLICANT'S SIGNATURE/ DATE

PROFIT MARGIN

MONTH	MARGIN
0 - 8	15%
9 - 18	20%
19 - 24	25%

FOR OFFICIAL USE

FACILITY IS (RECOMMENDED / NOT RECOMMENDED) BY THE INVESTMENT COMMITTEE REASON(S)

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RECOMMENDED DURATION FOR THE FACILITY

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CHIEF INVESTMENT OFFICER
Name, Signature & Date

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MEMBER, INVESTMENT COMMITTEE
Name, Signature & Date