

Kanisa Housing Co-operative Society Ltd,

AACC Desmond Tutu Conference Centre,
Waiyaki Way, Opposite Safaricom House,
P.O Box 1210 – 00606, Sarit Centre, Nairobi.
Telephone : +254-(0)20-4450135
Mobile : +254-(0)702-850319
Email : Info@kanisahousing.org
Website : http://www.kanisahousing.org

KANISA HOUSING CO-OPERATIVE SOCIETY PROJECT REGISTRATION FORM

(Please attach a copy of your National ID and PIN Certificate and Two Passport Size Photos to this form)

KHCS Membership N	lumber (Non-me	mbers specify N/	/A)		
KHCS Project Registr	ation Amount Pa	iid (KES)			
KHCS Project Registr	ation Receipt Nu	mber			
PART A: PERSONAL	<u>DETAILS</u>				
Name					
Date of Birth			Nationality		
ID/PP Number			PIN No		
Telephone No			Mobile No		
Email Address					
Address (P.O. Box)			Postal Code		
City/Town			Country		
PART B: EMPLOYME	NT DETAILS				
Employers Name					
Terms of Service	Permanent		Contract		Self Employed \Box
Employers Address			Postal Code		
City/Town Nature of Self Employment			Country		
PART C: PROJECT DE	TAILS				
Project Name					
Plot(s) Applied For	Cost Per Plot (KES			ES)	
Total Cost (KES)			Payment Mode		
I have read and under agree to abide by the			as stipulated in t	the above proje	ect announcement and I
Signed:				For Official Us	e Only:
					VIICC Ctomp
					KHCS Stamp
Name				Received By	
Date			_	Date	

NB: Please fill in and attach the separate next of kin nomination form if you are not a member of KHCS.