

**TRANS NATIONAL TIMES SACCO SOCIETY LTD**

P.O. BOX 2274 - 30200 **Customer Service No**: 0111050510

Teachers Plaza, First Floor **Website**: www.tntsacco.co.ke

Next to Divisional Police Headquarters **Email**: info@tntsacco.co.ke

Kitale, Kenya.

**FORM: TNT 29 PAYBILL NO:** 533888 **ACCOUNT NO:** WRITE YOUR **ID NUMBER**

**DORMANCY APPLICATION FORM**

I Mr. /Mrs. M/s…………………………………………………………………………..I.D NO………………………………….Mno………….

Hereby submit on this date……………………………………….. A notice of dormancy and I authorize All sums due to me net of any liability to be credited to my FOSA A/C………………………………….

Sign……………………………………………..Date…………………………………………………

**REASONS FOR CLOSURE**

Tick where applicable.

Retirement ( ) Resignation ( ) Poor service ( ) Others ( )

**OFFICIAL USE**

**PLACEMENT DATE…………………… PAYMENT DATE……………………**

|  |
| --- |
| **STAMP** |

**RECEIVED BY ……………………….**

**SIGNATURE ……………………….**



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