



LITTLE RED APPLICATION FORM

1. Name.....ID NO.....

2. Mobile Number Email address.....

3. Credit Card No.: XXXX . (Only first 4 and last 4 digits).

4. KCB account Number (if applicable)

5. Fill the table below for Little Red products you are purchasing (*refer to invoice*)

| Product type e.g. footwear, Menswear etc. | Cost |
|---|------|
| | |
| | |
| Total Cost | |

I authorize KCB Card Centre to debit my credit card account with Kes on monthly basis for..... Months on the card due date, being payment for the above products I have chosen.

| Repayment period (months) | Tick your selection |
|---------------------------|---------------------|
| 3 Months | |
| 4 Months | |
| 5 Months | |
| 6 months | |

I understand that by signing this request, I have agreed to be fully liable in fully paying for the products. All goods purchased shall be checked before accepting delivery and will remain under manufacturer’s warranty for stated period on warranty card.

Little Red Branch..... (Where products are being purchased)

Signature Date.....
(Customer to sign)

Signature Date.....
(KCB Card Center to sign)

FOR OFFICIAL USE ONLY

| PAYMENT | AMOUNT (KES) | APPROVAL CODE | SIGN |
|----------------------------|--------------|---------------|------|
| 1 ST Instalment | | | |
| Balance | | | |