

APPLICATION FOR ENHANCEMENT IN GUARANTEE COVER

Name and address of the bank

.....  
.....  
.....

Application No .....

Date .....

The Director,  
Agricultural Credit Guarantee Scheme Fund,  
c/o Central Bank of Nigeria,  
P. M. B. 12194,  
LAGOS.

Dear Sir,

Agricultural Credit Guarantee Scheme

We have found it necessary to increase from ₦ .....  
to ₦ ..... the credit facility granted to .....  
name of ..... and  
..... borrower)

guaranteed by you under your Guarantee Certificate No ..  
dated ..... and we hereby apply for an enhancement of  
the guarantee. The final repayment of the enhanced loan is due on .....

The reasons for the need to increase the credit facility are:-

.....  
.....

We certify that the existing facility is being/has been properly utilised and that the enhance-  
ment is being granted to enable the borrower meet the needs of the project.

We understand that the terms of the scheme and the instructions issued thereunder by the  
Fund shall apply to the enhanced guarantee and shall be binding on us.

Yours faithfully,  
For and on behalf of

.....  
(Name of the bank)

Signature: .....

Name: .....

Designation: .....