



(Revised January 2018)

THE PRESIDENCY
MINISTRY OF PUBLIC SERVICE, YOUTH AND GENDER AFFAIRS
STATE DEPARTMENT OF PUBLIC SERVICE AND YOUTH

DIRECTORATE OF PUBLIC SERVICE MANAGEMENT
P.O. BOX 30050 – 00100
NAIROBI

APPLICATION FOR AUTHORITY TO USE DEDUCTION CHECK-OFF FACILITY OR SALARY REMITTANCE FACILITY IN THE GOVERNMENT PAYROLL

(This form can be downloaded at www.ghris.go.ke & www.psyg.go.ke.)

Note: All applications must be accompanied by a cover letter.

- 1. Application Date:
2. Name of Applicant (Organization):
3. Business Registration Number:
4. Registration Agency:
5. Regulatory Body:
6. Representation Umbrella Body (if any)
7. P.O. Box Number: Postal code: Town:
8. Location of Business Premise:
9. Indicate the type of payroll facility (deduction check-off/salary remittance/other service(s) you are requesting for (tick as appropriate):



- b. [ ] Social Welfare Subscription (BBF, Sink Fund, etc.)
- c. [ ] Hire Purchase Credit Recovery.
- d. [ ] Insurance Policy Premiums.
- e. [ ] Commercial Loans (Banks and MFIs).
- f. [ ] Save As You Earn (Post Bank).
- g. [ ] Salary Remittance (Banks and SACCO-FOSAs).

10. Number of clients drawn from:

a. [ \_\_\_\_\_ ] Public Service (Ministries, Counties, Departments & Agencies)

b. [ \_\_\_\_\_ ] Teachers Service Commission

Attach list of clients showing Personal number, ID-Card Number, Name, Ministry/Department of Deployment, Date and Duration of Membership with your organization.

11. Indicate the applicant's official signatories and the resolution passed by members:

ID Number	Name & Tel. No.	Title	Signature
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. _____	_____	_____	_____

12. Attach resolutions passed by members indicating the need for the requested payroll facility/service

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Full Name	PF Number	Designation	Date	Signature
Received: _____	_____	_____	_____	_____
Examined: _____	_____	_____	_____	_____

**Remarks**

Approved/ Not

Approved: \_\_\_\_\_

**Remarks**

Allocated: .....

A. Deduction Check-off Identification Number: \_\_\_\_\_

B. Salary Remittance Identification Number: \_\_\_\_\_

**Telegraphic address: "Personnel", Nairobi**

**Telephone: Nairobi 2227411**

**Telex: 23125**

**Fax: 243620**