

DAYA UPAYA PELUANG USAHANITA (DAYANG)

**YOUNG WOMEN ENTREPRENEURSHIP PROGRAM:
A STRATEGIC COLLABORATION BETWEEN
SABAH CREDIT CORPORATION (SCC) &
INSTITUTE FOR DEVELOPMENT STUDIES (SABAH) (IDS)**



● 18 - 45 YEARS OLD

● LOAN TENURE OF 1 - 5 YEARS

● LOAN AMOUNT OF RM 10,000 - RM 50,000

- INTEREST RATE 3% PER ANNUM (REDUCING BALANCE)
- MALAYSIANS WHO RESIDE IN SABAH
- WOMEN-OWNED BUSINESSES OF WHICH AT LEAST 51% SHAREHOLDING OWNED AND OPERATED BY WOMEN
- BUSINESS LOCATION IN SABAH
- APPLICANTS ARE TO UNDERGO A MENTORING TRAINING BY INSTITUTE FOR DEVELOPMENT STUDIES (IDS) FOR 18 MONTHS UPON LOAN DISBURSEMENT

CUSTOMER SERVICE

📞 013 - 818 7783 📞 088 - 323 975



REQUIRED DOCUMENTS



**BUSINESS REGISTRATION FORM /
TRADING LICENSE** ✓



**COPY OF THE BUSINESS OWNER'S
IDENTIFICATION CARD** ✓



BUSINESS PLAN AND WORKING PAPER ✓

**OTHER RELEVANT DOCUMENTS
REQUIRED FROM TIME TO TIME** ✓

HQ (Penampang)

Wisma Perbadanan Pinjaman Sabah, Donggongan
New Township, 89500 Penampang Sabah.

Tel: 088-323888 (General Line)

ALAMESRA
Whatsapp : 013-833 7704 / 013-834 7704
Tel : 088-448 900

KUDAT
Whatsapp : 013-811 7748 / 013-816 7748
Tel : 088-622 676

KENINGAU
Whatsapp : 019-875 7704 / 019-885 7704
Tel : 087-331 567

KINABATANGAN (CSC)
Whatsapp : 013-809 7783
Tel : 089-569 868

UTC SABAH
Whatsapp : 013-862 7783 / 019-885 7783
Tel : 088-313 600

LAHAD DATU
Whatsapp : 013-818 7748 / 013-862 7748
Tel : 089-863 885

SANDAKAN
Whatsapp : 013-809 7783 / 013-813 7783
Tel : 089-215 555

TUARAN (CSC)
Whatsapp : 013-8347704
Tel : 088-313155

PAPAR
Whatsapp : 013-863 7748 / 019-801 7748
Tel : 088-913 076

TENOM
Whatsapp : 013-836 7783 / 013-841 7783
Tel : 087-735 655

TAWAU
Whatsapp : 013-848 7783 / 013-850 7783
Tel : 089-777 807

TELUPID (CSC)
Whatsapp : 019-862 7748
Tel : 089-520 003

KOTA BELUD
Whatsapp : 013-862 7704 / 019-861 7704
Tel : 088-976 643

KOTA MARUDU
Whatsapp : 013-801 7748 / 013-808 7748
Tel : 088-663 007

SEMPORNA (CSC)
Whatsapp : 013-850 7783
Tel : 089-788 556

SOOK (CSC)
Whatsapp : 013-815 7783
Tel : 087-364 037

RANAU
Whatsapp : 019-810 7748
Tel : 088-875 200

BEAUFORT
Whatsapp : 013-837 7704
Tel : 087-211 751

SIPITANG (CSC)
Tel & Whatsapp : 013-839 7704

TAMBUNAN (CSC)
Whatsapp : 019-885 7704
Tel : 087-771 129

YOUNG WOMEN ENTREPRENEURSHIP PROGRAM (YunaiBiz) APPLICATION FORM



Amount Applied : RM _____ Loan Tenure : _____ (Months)
Loan Purpose : _____

APPLICANT'S DETAILS

Full Name : _____
MyKad No. : _____ (New) _____ (Old) Gender : ☐ Male ☐ Female
Phone No. : _____ (Mobile) _____ (Home) _____ (Office)
Email Address : _____ Race : _____
Mother Maiden Name : _____
Occupation : _____ Monthly Net Income (RM) : _____
Home Address : _____
Postcode : _____ Town : _____ State : _____
Mailing Address : _____
(If different from home address)
Postcode : _____ Town : _____ State : _____
Marital Status : ☐ Single ☐ Married ☐ Others : _____
Spouse's Name : _____
Mobile Phone No. : _____ Occupation : _____ Monthly Income (RM) : _____

BUSINESS DETAILS

Company's Name : _____
Business' Registration No. : _____
/ Trading License No. : _____
Business' Types : _____ Designation : _____ Operation Period : _____
Mobile Phone No. : _____ Office Phone No. : _____ Fax No. : _____
Office Address : _____
Postcode : _____ Town : _____ State : _____

GUARANTOR'S DETAILS

Guarantor's Name : _____
MyKad No. : _____ (New) _____ (Old) Gender : ☐ Male ☐ Female
Phone No. : _____ (Mobile) _____ (Office)
Relationship : _____ Occupation : _____ Monthly Income (RM) : _____
Home Address : _____
Postcode : _____ Town : _____ State : _____

EMERGENCY CONTACT

Full Name : _____
Relationship : _____
Phone No. : _____ (Mobile) _____ (Home) _____ (Office)
Home Address : _____
Postcode : _____ Town : _____ State : _____

DECLARATION AND AUTHORIZATION

I hereby declare that:-

- 1.The information given above and in the enclosed documents is true to the best of my knowledge and belief and nothing has been concealed herein;
2. I have not been convicted of any offence nor is there any pending case against me in any Court;
- 3.The Corporation has the right to accept or reject this application and to take necessary legal action should any information given above and in the enclosed documents are found to be false;
- 4.I hereby grant the Corporation irrevocable and unconditional authorization to conduct credit checks against me with any business entities or agencies to evaluate, monitor my credit financing worthiness and debt collection purposes;
- 5.I hereby grant the Corporation irrevocable and unconditional authorization to disclose my personal information whether such information is obtained through my facility account with the Corporation or any action taken against me by the Corporation or through credit checks with any business entities or agencies, and I acknowledge that such information disclosed may be made known to other parties.

Applicant's Signature : _____

Date : _____