



### LOAN APPLICATION FORM – BUSINESS LOAN

Fill in block letters in blue / black Pen only

	Applicant		Co-Applicant		Guarantor	
	Customer ID (if existing customer) _____		Relationship with applicants: _____		Relationship with applicants: _____	
	Customer ID (if existing customer) _____		Customer ID (if existing customer) _____		Customer ID (if existing customer) _____	
<b>Entity</b>	<input type="checkbox"/> Individual	<input type="checkbox"/> Non-Individual	<input type="checkbox"/> Individual	<input type="checkbox"/> Non-Individual	<input type="checkbox"/> Individual	<input type="checkbox"/> Non-Individual
<b>Constitution</b>	<input type="checkbox"/> Self Employed <input type="checkbox"/> Salaried <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others _____	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership firms <input type="checkbox"/> LLP <input type="checkbox"/> HUF <input type="checkbox"/> Trust/Society/ NGO <input type="checkbox"/> Private Limited <input type="checkbox"/> Public Limited Govt <input type="checkbox"/> Institutions <input type="checkbox"/> Others _____	<input type="checkbox"/> Self Employed <input type="checkbox"/> Salaried <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others _____	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership firms <input type="checkbox"/> LLP <input type="checkbox"/> HUF <input type="checkbox"/> Trust/Society/ NGO <input type="checkbox"/> Private Limited <input type="checkbox"/> Public Limited Govt <input type="checkbox"/> Institutions <input type="checkbox"/> Others _____	<input type="checkbox"/> Self Employed <input type="checkbox"/> Salaried <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others _____	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership firms <input type="checkbox"/> LLP <input type="checkbox"/> HUF <input type="checkbox"/> Trust/Society/ NGO <input type="checkbox"/> Private Limited <input type="checkbox"/> Public Limited Govt <input type="checkbox"/> Institutions <input type="checkbox"/> Others _____

### DETAILS OF INDIVIDUALS

<b>Name</b>	First: _____ Middle: _____ Last: _____	First: _____ Middle: _____ Last: _____	First: _____ Middle: _____ Last: _____																								
<b>Gender</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender																								
<b>Differently abled</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																								
<b>Date Of Birth</b>	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y																				
D	D	M	M	Y	Y	Y	Y																				
D	D	M	M	Y	Y	Y	Y																				
<b>Father's Name</b>	First: _____ Middle: _____ Last: _____	First: _____ Middle: _____ Last: _____	First: _____ Middle: _____ Last: _____																								
<b>Mother's Maiden Name</b>	First: _____ Middle: _____ Last: _____	First: _____ Middle: _____ Last: _____	First: _____ Middle: _____ Last: _____																								
<b>Marital Status</b>	<input type="checkbox"/> Single <input type="checkbox"/> Married No. of Dependents: Adult ___; Child ___	<input type="checkbox"/> Single <input type="checkbox"/> Married No. of Dependents: Adult ___; Child ___	<input type="checkbox"/> Single <input type="checkbox"/> Married No. of Dependents: Adult ___; Child ___																								
<b>Spouse Name (if married)</b>	First: _____ Middle: _____ Last: _____	First: _____ Middle: _____ Last: _____	First: _____ Middle: _____ Last: _____																								
<b>Religion</b>	<input type="checkbox"/> Hindu <input type="checkbox"/> Christian <input type="checkbox"/> Sikh <input type="checkbox"/> Muslim <input type="checkbox"/> Other _____	<input type="checkbox"/> Hindu <input type="checkbox"/> Christian <input type="checkbox"/> Sikh <input type="checkbox"/> Muslim <input type="checkbox"/> Other _____	<input type="checkbox"/> Hindu <input type="checkbox"/> Christian <input type="checkbox"/> Sikh <input type="checkbox"/> Muslim <input type="checkbox"/> Other _____																								
<b>Category</b>	<input type="checkbox"/> General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> MBC <input type="checkbox"/> Other _____	<input type="checkbox"/> General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> MBC <input type="checkbox"/> Other _____	<input type="checkbox"/> General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> MBC <input type="checkbox"/> Other _____																								
<b>Place of Birth</b>	_____	_____	_____																								
<b>Nationality</b>	_____	_____	_____																								

<b>Citizenship</b>			
<b>Preferred Language For Communication</b>	<input type="checkbox"/> English <input type="checkbox"/> Others _____	<input type="checkbox"/> English <input type="checkbox"/> Others _____	<input type="checkbox"/> English <input type="checkbox"/> Others _____
<b>Communication Address:</b>	_____	_____	_____
	_____	_____	_____
	Land mark:	Land mark:	Land mark:
	City/ Town:	City/ Town:	City/ Town:
	District:	District:	District:
	State:	State:	State:
	Pin Code:	Pin Code:	Pin Code:
<b>Mobile No:</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Alternative Mobile No:</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Tel. No.:(R)</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Tel. No.:(O)</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>E-mail ID:</b>			
<b>Permanent Address:</b>	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	Land mark:	Land mark:	Land mark:
	City/ Town:	City/ Town:	City/ Town:
<input type="checkbox"/> Same as Communication Address:	District:	District:	District:
	State:	State:	State:
	Pin Code:	Pin Code:	Pin Code:
<b>Residence</b>	<input type="checkbox"/> Owned <input type="checkbox"/> Rented/ Leased	<input type="checkbox"/> Owned <input type="checkbox"/> Rented/ Leased	<input type="checkbox"/> Owned <input type="checkbox"/> Rented/ Leased
<b>No. of years of Stay</b>	_____Years	_____Years	_____Years
<b>Education</b>	<input type="checkbox"/> SSC <input type="checkbox"/> HSC <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Other _____	<input type="checkbox"/> SSC <input type="checkbox"/> HSC <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Other _____	<input type="checkbox"/> SSC <input type="checkbox"/> HSC <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Other _____
<b>If self employed / professional, Nature of Business</b>	<input type="checkbox"/> Manufacturing <input type="checkbox"/> Professional <input type="checkbox"/> Service Provider <input type="checkbox"/> Agriculture <input type="checkbox"/> Trader <input type="checkbox"/> Jewellers/Bullion <input type="checkbox"/> Real estate business <input type="checkbox"/> Stock brokers <input type="checkbox"/> Others _____	<input type="checkbox"/> Manufacturing <input type="checkbox"/> Professional <input type="checkbox"/> Service Provider <input type="checkbox"/> Agriculture <input type="checkbox"/> Trader <input type="checkbox"/> Jewellers/Bullion <input type="checkbox"/> Real estate business <input type="checkbox"/> Stock brokers <input type="checkbox"/> Others _____	<input type="checkbox"/> Manufacturing <input type="checkbox"/> Professional <input type="checkbox"/> Service Provider <input type="checkbox"/> Agriculture <input type="checkbox"/> Trader <input type="checkbox"/> Jewellers/Bullion <input type="checkbox"/> Real estate business <input type="checkbox"/> Stock brokers <input type="checkbox"/> Others _____
<b>If Salaried, employment details</b>	Company Name:_____	Company Name:_____	Company Name:_____
	Designation:_____	Designation:_____	Designation:_____
	Tenure of employment:_____	Tenure of employment:_____	Tenure of employment:_____
	CTC per annum:_____	CTC per annum:_____	CTC per annum:_____
<input type="checkbox"/> PAN OR <input type="checkbox"/> Form 60	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>CKYC ID</b>			
<b>GSTIN</b>			
<b>UDYAM</b>			

**KYC- DOCUMENT SUBMITTED FOR ID & ADDRESS PROOF (INDIVIDUALS)**

**Any one for ID Proof & One for Address Proof**

<b>PROOF OF AADHAAR</b>	<input type="checkbox"/> No _____ Expiry Date - _____	<input type="checkbox"/> No _____ Expiry Date - _____	<input type="checkbox"/> No _____ Expiry Date - _____
<b>DRIVING LICENSE</b>	<input type="checkbox"/> No _____ Expiry Date - _____	<input type="checkbox"/> No _____ Expiry Date - _____	<input type="checkbox"/> No _____ Expiry Date - _____
<b>PASSPORT</b>	<input type="checkbox"/> No _____ Expiry Date - _____	<input type="checkbox"/> No _____ Expiry Date - _____	<input type="checkbox"/> No _____ Expiry Date - _____
<b>VOTER ID CARD</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____
<b>MNREGA</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____
<b>NPR Letter</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____

**KYC- DOCUMENT SUBMITTED FOR ADDRESS PROOF, IF ABOVE DOCUMENTS DO NOT HAVE UPDATED ADDRESS  
Any One for Address Proof (not more than 2 months old & to be updated with OVD within 3 months) -**

<b>Electricity Bill</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____
<b>Telephone/ Postpaid Mobile Bill</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____
<b>Gas/Water Bill</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____
<b>Property/ Municipal Tax receipt</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____
<b>Pension Payment orders</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____
<b>Letter of Allotment of Accommodation</b>	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____	<input type="checkbox"/> No _____

**DETAILS OF NON-INDIVIDUALS**

	<b>Applicant</b>	<b>Co-Applicant</b>	<b>Guarantor</b>
	Relationship with applicants: _____	Relationship with applicants: _____	Relationship with applicants: _____
	Customer ID (if existing customer) _____	Customer ID (if existing customer) _____	Customer ID (if existing customer) _____
<b>Entity Name:</b>			
<b>Date of Commencement of Business</b>			
<b>Date of Incorporation</b>			
<b>Country of Incorporation</b>			
<b>Registration Number</b>			
<b>PAN</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>CKYC</b>			
<b>UDYAM</b>			
<b>CIN/ Partnership Reg No.</b>			
<b>GSTIN</b>			
<b>LEI Code</b>			
<b>Darpan ID (Incase of Trust/Society/ NGO)</b>			



**In case of a Trust, the certificate copies of each of the following documents to be obtained:**

- Registration Certificate
- Trust Deed
- PAN Card
- Names of the Beneficiaries, trustees, settlor, and protector (if applicable).
- Registered Office Address of the trust
- Document relating to beneficial owner holding an attorney to transaction on behalf of the Trust

**In case of a Unincorporated Association or Body of Individuals, certified copies of each of the following documents to be obtained:**

- Resolution from the Managing Body of the association or body of individuals
- PAN of Association
- Power of Attorney granted to persons authorized to transact on behalf of the association
- Additional documents required to establish the legal existence of the entity.

**In case of a Society, certified copies of each of the following documents to be obtained:**

- Registration certificate & Bye Laws/Agreement/ Rules/ Constitution documents
- Document showing the name of the person authorized to act on behalf of the entity
- Additional documents required to establish the legal existence of the entity.

**In case of HUF, certified copies of each of the following documents to be obtained:**

- Deed of Declaration of HUF or HUF Letter having Name and Signature of all Adult Male and Female Co-parceners
- PAN of HUF

**DETAILS OF CONTACT PERSON**

<b>NAME</b>			
<b>DESIGNATION</b>			
<b>MOBILE</b>			
<b>PAN</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>AADHAAR NO.</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>EMAIL ID</b>			

**ADDITIONAL DETAILS OF NON-INDIVIDUAL APPLICANT**

**DETAILS OF SHAREHOLDING PATTERN IN PARTNERSHIP FIRM / PRIVATE LIMITED / PUBLIC LIMITED**

Name of Shareholder	No. of Shares	% Holding	Relationship with Promoters

**DETAILS OF ASSOCIATE / GROUP COMPANIES & FIRMS**

Name of Shareholder	No. of Shares	% Holding	Relationship with Promoters

**PARTNERS / DIRECTORS DETAILS (Branch Manager to verify all the partner details)**

<b>Name of Partner/s / Director/s</b>			
<b>Address of Partner/s/ Director/s</b>			
<b>Relationship with Promoters</b>			
<b>Date of Birth</b>			
<b>Education</b>			
<b>Experience in Industry</b>			
<b>PAN</b>			
<b>Annual Income</b>			
<b>Mobile No.</b>			
<b>Email id</b>			
<b>Telephone No.</b>			

## BANK ACCOUNT DETAILS (APPLICANT / CO-APPLICANT)

Category	Name of The Bank	Branch	Account Type	Account No.	Account Since	IFSC Code	Avg. Debit Per Month	Avg. Credit Per Month
Applicant								
Co-Applicant								

## DETAILS OF PROPERTIES OWNED BY APPLICANT / CO-APPLICANT

Vehicle	Registration	Make & Model	Applicant Declared Value	Financed By / Free
Applicant	1.			
	2.			
Co-Applicant	1.			
	2.			

\* if more number of vehicles, details may be furnished separately.

**Other Movable Property**      **Investment Bonds, FD's etc Specify** \_\_\_\_\_ **Total Value in Rs** \_\_\_\_\_

Immovable Property for future loan requirements of Business Loan / working Capital Loan)	Asset Type	Extent of Property (Sq.ft/Acres)		Applicant Declared Value	Remarks
		Built up Area	Land Area / UDS		
Applicant	1. Vacant Land				
	2. Apartments				
	3. Building Residential				
	4. Building Commercial				
	5. Others, if any (Pl. mention)				
Co-Applicant	1. Vacant Land				
	2. Apartments				
	3. Building Residential				
	4. Building Commercial				
	5. Others, if any (Pl. mention)				

## MONTHLY CASH FLOWS

Particular	Present Cash Flows	Projected Cashflows
Turnover/ Revenue From Sales		
Income From Other Sources		
<b>Total (A)</b>		
<b>Business Expenses</b>		
Building Rent		
Salary To Employees		
Material Costs		
Taxes Payable		
Maint.exp (Water/elec/tel)		
<b>Total (B)</b>		
<b>Net Income (A-B)</b>		
Maximum Emi Payable Capacity (As Per Guidelines)		
Existing Emis		
<b>Balance After Deducting Existing Emi (C)</b>		

## COLLATERAL DETAILS

<b>Primary Collateral</b>	<input type="checkbox"/> Inventory <input type="checkbox"/> Receivable
Description	
Total Value	
Address Where Inventory is Stored	

<b>Secondary Collateral</b>	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Non Agri Land <input type="checkbox"/> Agri Land <input type="checkbox"/> Others(Specify)		
Property Owners Name, Address & Contact Details			
Address Of Property			
Details Of Collateral			
Relationship with Property owner			
Location Of Property As Per Schedule In Property Documents			

<b>Financial Highlights (Rs. in Lacs)</b>	<b>Year1</b>	<b>Year2</b>	<b>Year3</b>
Capital			
Long Term Loans			
Current Liabilities			
Total			
Fixed Assets			
Investments			
Current Assets			
Total			
Sales Turnover			
Net Sales			
Net Profit			
Depreciation			
Cash Profit			

**Financials Statements to be attached:**

1. Copy of Latest IT Return with Memo of Statement of Income
2. Profit & Loss Account and Balance Sheet with Schedules for the last 3 years – Audited

**PROPOSAL DETAILS**

**LoanType:**  Term/TF  Floating  Trade Advance ( New Vehicle / Used Vehicle / Tyre )  Lap

<b>LoanAmount</b>	Rs	Tenure	
<b>End use of Fund</b>	<input type="checkbox"/> Working capital <input type="checkbox"/> Purchase of Asset <input type="checkbox"/> Business expansion <input type="checkbox"/> Debt Consolidation <input type="checkbox"/> Others_____		
<b>Annualized Rate of Interest (Fixed)*</b>	_____ % p.a. compounded on monthly rests	Document Charges**	Rs
<b>Penal charges (PC) ***</b>	_____ % p.a (inclusive of applicable taxes, if any)	Processing Charges**	Rs

**INSURANCE**

Refer to Annexure

<b>Fire Insurance Policy Opted:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Sum Insured: _____ Insurer Name: _____ Premium Amount: _____ Policy Period: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<b>Term Life Insurance Opted:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Sum Assured: _____ Insurer Name: _____ Premium Amount: _____	
<b>Business Protector Policy Opted:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Sum Insured: _____ Insurer Name: _____ Premium Amount: _____ Policy Period: <input type="checkbox"/> 1	<b>Life Insurance (Flat Cover):</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Sum Assured: _____ Insurer Name: _____ Premium Amount: _____	
Nominee Name:	Nominee Relationship:	Nominee Age:
Appointee Name (If Nominee is less than 18 years)	Appointee Relationship:	Appointee Age:

**Income/Other Details**

<b>Source of income</b> <input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Agriculture <input type="checkbox"/> investment <input type="checkbox"/> Sale of Asset <input type="checkbox"/> Others_____	<b>Annual income</b> <input type="checkbox"/> Upto Rs.3 lakhs <input type="checkbox"/> Rs.3-6 lakhs <input type="checkbox"/> Rs.6-15 lakhs <input type="checkbox"/> Rs.15-30lakhs <input type="checkbox"/> Above Rs.30 lakhs
<b>Annual Household income</b> <input type="checkbox"/> Upto Rs.3 lakhs <input type="checkbox"/> Rs.3-6 lakhs <input type="checkbox"/> Rs.6-15 lakh <input type="checkbox"/> Rs.15-30lakhs <input type="checkbox"/> Above Rs.30 lakhs	
<b>Whether the Applicant is a 'Farmer'</b> <input type="checkbox"/> Yes <input type="checkbox"/> No if Yes please attach any one: <input type="checkbox"/> Agriculture land document <input type="checkbox"/> Lease agreement for leased out land <input type="checkbox"/> Kissan Passbook <input type="checkbox"/> Kissan Card <input type="checkbox"/> Land book <input type="checkbox"/> Pattadar pass book	

**Whether the Applicant is owning Agriculture Land**  Yes  No if Yes,  
 Below 2.5 Acres  Between 2.5 to 5 Acres  Above 5 Acres please attach land holding document

\* The rate of interest is arrived at based on a comprehensive approach to gradation of risk based on demography, the profile, the cost of funds, margin, risk premium, external ratings, cash flow, track record, nature and value of collateral if any, Loan to value, future potential, tenure, competition, industry trends and credit risk. The rate of interest applicable to a loan may therefore vary from one customer to another taking into consideration the combination of the above parameters, the market information, the field report and the information provided by the borrower.

\*\* In the event of cancellation of Proposal/Sanction, upfront charges shall not be refunded.

\*\*\* PC shall be charged on all amounts that are due yet unpaid (principal/interest/expenses). There shall be no capitalization or compounding of PC

## REFERENCE DETAILS

### 1. Reference Name

If Existing customer, Customer id \_\_\_\_\_

Relationship with the Applicant \_\_\_\_\_

Knows the Applicant for \_\_\_\_\_ Years

Reference address : \_\_\_\_\_

\_\_\_\_\_

Pin code: \_\_\_\_\_

City/District/State: \_\_\_\_\_

Phone/Mobile: \_\_\_\_\_

### 1. Reference Name

If Existing customer, Customer id \_\_\_\_\_

Relationship with the Applicant \_\_\_\_\_

Knows the Applicant for \_\_\_\_\_ Years

Reference address : \_\_\_\_\_

\_\_\_\_\_

Pin code: \_\_\_\_\_

City/District/State: \_\_\_\_\_

Phone/Mobile: \_\_\_\_\_

## DISBURSEMENT REQUEST

**DATE:** \_\_\_\_\_

With reference to My Loan Application Number \_\_\_\_\_ Dated \_\_\_ / \_\_\_ / \_\_\_ towards Loan Amount of Rs \_\_\_\_\_ against the asset \_\_\_\_\_ and subsequent sanction of the same from your Company, I hereby request and authorize to disburse said sanction amount to the below mentioned beneficiaries.

Beneficiary Name	Bank Name	IFSC Code	Account Number	Payable at	Amount Rs.
1.					
2.					
3.					
4.					

### DECLARATION BY APPLICANT / CO-APPLICANT / GUARANTOR :

I consent to the sharing of my personal and KYC details with the Central KYC Registry. I agree to receive information via SMS and email at the registered number and address and I authorize the downloading of information from the Central KYC Registry using the KYC Identifier provided by me.

I hereby declare that I am an Informal Micro Enterprise and provide my consent to Shriram Finance Limited, a designated agency for Udyam Assist, to facilitate my registration through the Udyam Assist Portal as a micro enterprise and enable me to avail benefits under the MSME scheme, which has been clearly explained to me.

I permit Shriram Finance Limited (SFL) to obtain my personal data from Credit Information Companies registered under Credit Information Companies (Regulation) Act, 2005 for purposes of accessing as well as downloading the credit information report including the credit score and accessing and downloading all such information as may be necessary for the purpose of providing the services by SFL.

I permit SFL to use, verify, download, exchange and share all information related to this application with Credit Information Companies registered under Credit Information Companies (Regulation) Act, 2005, Statutory Authorities, Regulatory Authorities, Judicial, Quasi Judicial Authorities or any other authorized third party who are contractually bound to provide its services in relation to service that you have opted from SFL including but not limited to its contractors, regulators and auditors in accordance with laws as may be applicable from time to time.

I/We hereby confirm that all the information pertaining to the proposed loan that affects my/our interest is explained to me/us in my/our preferred language and I/We have understood the same.

I am/We are aware that the indicative interest rates and charges as applicable for various loan products are available in the Company's website [www.shriramfinance.in](http://www.shriramfinance.in)

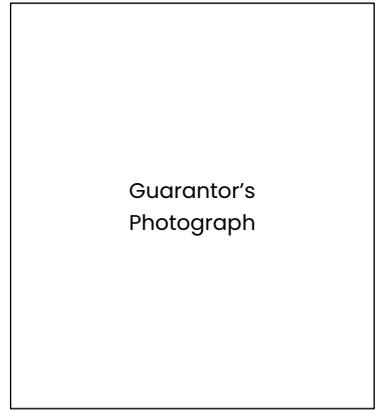
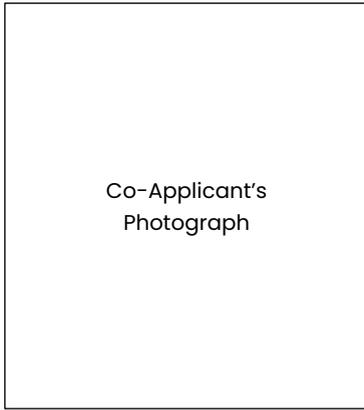
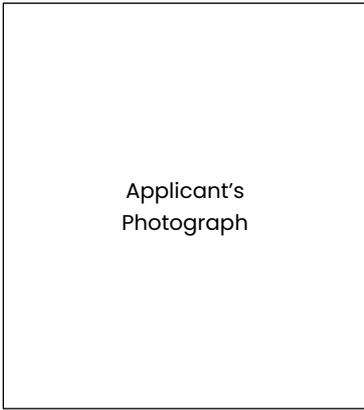
I understand and provide my explicit consent that the information shared by me or as may be collected from the parties as has been mentioned above, may be processed for the following purposes:

- a. To ensure that SFL can perform, maintain, protect, and improve the services and for developing or improvising SFL's services. SFL may use the details as provided under this application form without further consent for non-marketing or administrative purposes (such as notifying you of major changes, for customer service purposes, providing information about updates to our services, billing, transaction notifications, security notifications, Emi dues, cheque bounce, KYC / Re-KYC requirements etc., in connection with this application and transaction;
- b. Information that is shared with any authorized third party shall be processed by such third party only on a need to know basis so as to ensure that such third party is able to provide their services in accordance with the contracted terms with SFL;
- c. To ensure that SFL is able to comply with applicable laws including but not limited to fraud monitoring, Prevention of Money Laundering Act, for establishing an account based relationship with SFL, KYC compliance, compliance with any statutory/regulatory/judicial/quasi-judicial order or decree etc.;
- d. SFL may use the information to investigate and prevent fraudulent activities, unauthorized access to the services, and other illegal activities, undertake analysis of marketing effectiveness and other analytics projects etc.;
- e. For any other legitimate purposes and purposes permitted by law or applicable regulations.

I authorize SFL and its group companies to send communication, including sending promotional materials regarding loans, insurance, and related products or services, through phone calls, SMS, emails, mail, bots, or any other electronic platform.

Place: \_\_\_\_\_

Date: \_\_\_\_\_



**Applicant's Signature**

**Co-Applicant's Signature**

**Guarantor's Signature**

**OFFICE USE**

**Please tick any one**

Politically Exposed Person (PEP)       Relative of PEP       Not PEP

**KYC Verification carried out by**

Emp Name: \_\_\_\_\_ Emp code: \_\_\_\_\_ Emp Sign: \_\_\_\_\_ Date: \_\_\_\_\_

**Marketing Agent Name**

Emp Name: \_\_\_\_\_ Emp code: \_\_\_\_\_ Emp Sign: \_\_\_\_\_ Date: \_\_\_\_\_

**Tele Verifiers Name**

Emp Name: \_\_\_\_\_ Emp code: \_\_\_\_\_ Emp Sign: \_\_\_\_\_ Date: \_\_\_\_\_

**Institution Details**

**Name:**

**INSURANCE ANNEXURE**

Insurer Name	Motor	Health	lpa/gpa	Fire/bpp	Ci	Gtli	Life Protector
Bajaj Allianz General Insurance Co. Ltd.	Yes	No	No	Yes	No	No	No
Go Digit General Insurance Co. Ltd.	Yes	Yes	Yes	Yes	Yes	No	No
Hdfc Ergo General Insurance Co. Ltd.	No	Yes	No	No	Yes	No	No
Icici Lombard General Insurance Co Ltd	Yes	No	No	No	No	No	No
Iffco Tokio General Insurance Co. Ltd.	Yes	No	No	Yes	No	No	No
Shriram General Insurance Co. Ltd.	Yes	Yes	Yes	Yes	Yes	No	No
Tata Aig General Insurance Co. Ltd.	Yes	No	No	No	No	No	No
Zurich kotak General Insurance Company Limited	Yes	No	No	No	No	No	No
Care Health Insurance Ltd.	No	Yes	Yes	No	Yes	No	No
Manipal Cigna Health Insurance Co. Ltd.	No	Yes	No	No	Yes	No	No
Bandhan Life Insurance Limited	No	No	No	No	No	Yes	Yes
Shriram Life Insurance Company Limited	No	No	No	No	No	Yes	Yes
Bajaj Allianz Life Insurance Company Limited	No	No	No	No	No	Yes	Yes

Application Form No.: \_\_\_\_\_ Dated. \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Branch Name: \_\_\_\_\_



**Acknowledgement Slip:**

Received from \_\_\_\_\_

application to provide finance for Purchase / Refinance of \_\_\_\_\_

Your application will be processed, and acceptance / rejection notification will be intimated to you within 30 days from date of receipt of completed

Application form along with supporting documents.

**M/s Shriram Finance Limited**

Authorised Signatory

**Note:**

- The receipt of your application form for the loan does not imply automatic approval of your loan by SFL.
- SFL will decide the quantum of the loan at its sole discretion.
- SFL reserves the right to reject any application without assigning any reasons.
- SFL may request for additional documents other than those collected in connection with the application.
- SFL reserves the right to retain the photograph and documents submitted along with the application form and shall not return the same to applicant.
- SFL shall not be liable for loss or delay in receipt of documents.

**Approach to gradation of risk:**

The rate of interest is arrived at based on a comprehensive approach to gradation of risk based on demography, the profile, the cost of funds, margin, risk premium, external ratings, cash flow, track record, nature and value of collateral if any, loan to value, future potential, tenure, competition, industry trends, guarantees and credit risk. The rate of interest applicable to a loan may therefore vary from one customer to another and may also vary for the same customer when fresh loan is extended over a period of time, taking into consideration the combination of the above parameters, the market information, the field report and the information provided by the borrower.