



Daivadnya Sahakara Bank Niyamit

H. O. : 1169, Saraf Gall, Shahapur, BELAGAVI - 590 003.

BRANCH.....

APPLICATION CUM UNDERTAKING FOR LOAN AGAINST DEPOSIT

To,
The Manager
Daivadnya Sahakara Bank Niyamit
.....Branch.
BELAGAVI.

Date : _____

Sir,

Ref : My.....Deposit Nofor Rs.....

I/we, the undersigne

request you to grant me/us a loan Rs.....(Rs.....
.....) against the above deposit.

The Deposit receipt duly discharged is enclosed herewith.

Signature/s

Name & Address

SANCTION ORDER

A Loan of Rs.....Is sanctioned against Deposit No.....with present
balance of Rs@.....interest p.a. compounded quarterly.

Date :

Accountant

Manager

UNDERTAKING

I/We.....have
availed a loan of Rs.....(Rupees.....
.....) on my/our Deposit No.....from Daivadnya
Sahakara Bank Niyamit.....Branch . I/We hereby promise to repay the said loan on
or beforeat the rate of% p.a. compounded quarterly. I/We, hereby
authorize the Bank to close the deposit on maturity/before maturity (if so required and adjust to the loan
account without giving prior notice to me.

Date :

Signature/s