



H.O. : 2488498, 2487500, 2488499
Tilakwadi Branch : 2468658
Belgaum Branch : 2461214

Daivadnya Sahakara Bank Niyamit

H. O. : SHAHAPUR, BELGAUM-590 003.

Branch _____

(Application Form for Loan / Overdraft / Cash Credit Against Tangible Securities)

Inward Sr. No. _____

M.R. No. _____

Shares Held _____

1. Full Name of Applicant _____

Emp.No. _____ Designation _____ Age _____

2. Constitution

(If the applicant is in business organisation, names of partners / directors)

1. _____ Age _____ Income _____

2. _____ Age _____ Income _____

3. _____ Age _____ Income _____

3. Activity / Occupation

_____ No. of Years _____
(Service / Business)

4. Address : Office

_____ Tel. No. _____

Residence

(Attach proof of address i.e. ration card/election card etc.)

_____ Tel. No. _____

5. Loan, O/D, C/C Applied :

Rs. _____ Repayment Monthly
proposed _____ Instalment of Rs. _____

6. Purpose :

7. Securities Offered :

Type of Security	In whose Name/s	Particulars (In case of gold Indicate gross/net.wt.)	Value In Rs.
(Please attach separate sheet if required)			Total

8. Income :

Gross Rs. _____ (P.M./P.A.) Net Rs. _____ (P.M./P.A.)

9. Declaration :

- I/We declare that the above statement and information given is true.
- I/We agree to abide by the Rules & Bye-Laws of the Bank which are now in force or may hereafter come into force.

10. Signature of Applicants

Date :

(Please affix rubber stamp if the applicant is business unit)

FOR OFFICE USE

PARTICULARS OF SECURITIES

Sr. No.	Name of Company	No. of Shares	Market Rate	Market Value	Market Value	Card Limit Per Share	Card Value	Advance Value	Initials

REMARKS

Codes for Computer Sec. Purp. P/NP Ind.

- | | | | | |
|--------------------------------------|------------|--|----------|--|
| 1) Amount of loan applied Rs. | | | | |
| 2) Type of Facility | Loan/OD/CC | a) Banking with us since | | |
| 3) Value of Security Rs. | | b) Conduct of account | | |
| 4) Margin | | c) Introduced by | | |
| 5) Permissible Limit Rs. | | d) Repaying capacity | | |
| 6) Rate of Int. & P.A. | | e) Repayment through | | |
| 7) Date of Advice | | f) | | |
| 8) Period | | g) | | |
| 9) Instalment | | Recommended by / Sanctioned by | | |
| 10) Due date | | | | |
| 11) S.R.F. (Security Register Folio) | | | | |
| 12) Ratified On | | Officer/Manager/Chief Manager/A.G.M./D.G.M./M.D. | | |
| | | Emp. No. | Emp. No. | |
| | | Date | Date | |

CERTIFICATION

By Sanctioning Authority : Advance is sanctioned as per the guidelines issued from time to time and as per procedure laid down in the Manual of Instructions Vol. _____ Sec. _____ on advances against _____

Sub. Acct./ Sub Manager / Officer / Br. Manager