



RETAIL LENDING
Application Form
for **VEHICLE LOAN**
PERSONAL LOAN &
CONSUMER LOAN

Please Affix
Recent
Photograph

ALPHA CODE : _____

Borrower Number : _____

I/We request you to grant me/us a loan facility for Vehicle Purchase
To enable you to consider the proposal, I/We submit the following particulars.

Please complete all sections in BLOCK LETTERS and tick boxes wherever applicable

Name : Dr. Shijith Kumar C

Category : SC/ST/OBC/OTHERS/MINORITY COMMUNITY PAN/GIR No. : AUSPS2875B

Residence Address : D2 Staff Quarters, All India Institute of Speech & Hearing
Manasagangotri, Mysuru PIN : 570 006

Telephone : 0821-2502150 Fax : _____ Mobile No. : 8618667835

No. of Years at Residence : Changed Residence in past 3 years :

Date of Birth : 14 (DD) 05 (MM) 1973 (YYYY) Age :

Permanent Address : Chengottil, Oravil, Naduvannur, Calicut PIN : 570 006

Tel. 0821-2502412 Fax : _____ E-mail : cshijithkumar@gmail.com

About Yourself		Net Worth	
		Applicant	Guarantor
Sex : <input type="checkbox"/> Male <input type="checkbox"/> Female	Education : <input type="checkbox"/> Matric <input type="checkbox"/> Under Graduate <input type="checkbox"/> Graduate <input type="checkbox"/> Post-Graduate <input type="checkbox"/> Doctorate	1. Total Moveable	
Marital Status : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	If Professional : <input type="checkbox"/> Doctor <input type="checkbox"/> Architect <input type="checkbox"/> CA <input type="checkbox"/> MBA <input type="checkbox"/> Engineer <input type="checkbox"/> Lawyer <input type="checkbox"/> Others <u>Library & Information Officer</u>	2. Total Immoveable	
No. of Dependents : <u>Two</u> (Excluding spouse)		3. Total Assets 1+2	
No. of Children : <u>Two</u>		4. Total Liabilities	
		5. Net Assets 3-4	
		6. Amount of Collaterals	
		7. Presence of Guarantor : Yes/No (If yes, give details in above column)	

Credit Card Details :
Credit Cards Owned : _____ Card Issuer : _____
Card No. _____
Bank of Baroda Account No. _____ CA / SB
Branch Name : _____

Other Assets Color TV Refrigerator Car
 Two Wheeler Telephone
 Cellular Phone PC
 Washing Machine

Salaried : Please tell us about your Work :	Self Employed / Professional/Business : Please tell us about your Work :
Name of Organisation : <u>All India Institute of Speech & Hearing</u>	Name of Company : _____
Designation : <input checked="" type="checkbox"/> Executive <input checked="" type="checkbox"/> Managerial <input type="checkbox"/> Clerk	Office Address : _____
Department : <u>Library & Information Centre</u>	Tel. : _____ Extn. No. : _____ Fax : _____
Office Address : <u>Dr. Shijith Kumar C</u>	E-mail : _____
<u>Library & Information Officer, All India Institute of Speech & Hearing, Mysuru</u> PIN : <u>570006</u>	Business Details : <input type="checkbox"/> Pvt. Ltd. <input type="checkbox"/> Partnership
Tel. : <u>0821250</u> Extn. No. : <u>2150</u> Fax : _____	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Others _____
E-mail : <u>cshijithkumar@gmail.com</u>	Established Since : _____
Working with : <input type="checkbox"/> Govt./Public Sector <input type="checkbox"/> Public Ltd. <input type="checkbox"/> Pvt. Ltd. <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> MNC	Designation : <input type="checkbox"/> Executive <input type="checkbox"/> Managerial
Working Since : <u>2010</u> Retirement Age : <u>60</u>	Years in Current Business : <input checked="" type="text" value=">5"/> <input type="text" value="3-5"/> <input type="text" value="1-3"/> <input type="text" value="<1"/>
Years at Current Job : <input type="text" value="Greater than 5 Years"/> <input type="text" value="Between 3 to 5 Years"/> <input type="text" value="Between 1 to 3 Years"/> <input type="text" value="Less than 1 Year"/>	(Greater) (Less)
Gross Monthly Income : Rs. <u>1 lakhs</u>	Gross Monthly Income : Rs. _____

Proposed Loan Details : (To be filled by Branches/Offices)	Income Details :
Tenure Months : _____	1. Gross Monthly Income (Rs.) : 107,640/-
Purpose : _____	2. Salaried Person : 88,400/-
Purchase Price (Rs.) : _____	(i) Monthly Basic (Rs.) : 10
Loan Amount (Rs.) : _____	(ii) % of PF deduction : _____
Rate of Interest % : _____	3. Annual Professional Tax : Rs.2,200
Margin % : _____	4. For Tax Purpose : Nil
	(i) Total Annual Savings Under S/88 : Nil
	(ii) 100% Rebate Amount : Nil
	(iii) Deduction under chapter VI A : Rs.112076
	(iv) Other Rebate/Deduction claimed : Nil
	5. Total Monthly house hold expenses : Rs.10,000/-
	6. Monthly other loan amount : Rs.37,000/-
	7. Net Income of other Family members : Nil

FOR CAR LOANS ONLY (CAR DETAILS) :			1. Make / Model : Tata Altroz
Type of Vehicle :	Greater than 4 Laces	Between 4 to 6 Laces	Greater than 6 Laces
Age of Vehicle :	Less than 1 Year	Between 1 to 3 Years	Between 3 to 5 Years
			2. Name of the dealer (For New Car) : Marina Motors, Calicut, Kerala
			3. For Second Hand Car
			(i) Approx, serviceable age of car : _____
			(ii) Valuation as per garage certificate : _____
			(iii) Name and address of Seller (Attach copy of RC) : _____
			(iv) Engine / Chassis No. : _____

Outstanding Loan Details Source/Type	Amount of Loan	Outstanding	EMI	Default/Overdue Since
1) LIC HFL/ Housing loan	38 lakhs	31 lakhs	32,000/-	Nil
2) Bajaj Finserv/	2.5 lakhs	Rs. 1 lakh	5,000/-	Nil
3) _____	_____	_____	_____	_____

About Your Bank Account (including credit facilities if any)				
Name of the Bank	Branch & Telephone No.	A/c. Type	A/c No.	No. of years account held
Main Bank Bank of Baroda	2514449 Ex232	Savings Bank	98320100001793	10 years
Others				
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____

About your Spouse :		About Guarantor :	
Name	: Mrs. Sinimol P.V.	Name	: _____
Address	: D2 Staff Quarters, All India Institute of Speech & Hearing	Address	: _____
Occupation	: Nil	Occupation	: _____
Phone/Fax	: 9886611548	Phone/Fax	: _____
E-mail	: sinimolpv@gmail.com	E-mail	: _____
PAN/GIR Number	: ETQPS0438K	PAN/GIR Number	: _____
Net Annual Income (Rs.)	: Nil	Net Annual Income (Rs.)	: _____

I/We hereby declare that all the particulars and information furnished in the application form are true, correct and complete and up-to-date in all respects. I/We have not withheld any information. I/We confirm that I/We have had no insolvency proceedings initiated against me/us nor have I/We ever been adjudicated insolvent. I/We also authorize Bank of Baroda or its agent to make references and enquiries relative to information in this application which Bank of Baroda considers necessary. I/We also authorize Bank of Baroda to exchange, share, part with all information relating to my/our loan details and repayment history information to other Banks/Financial Institutions/Credit Bureaus/Agencies as may be required and shall not hold Bank of Baroda liable for use of this information. I/We undertake to inform Bank of Baroda regarding any change in my/our residence/employment/Occupation/Transfer and to provide any other information that Bank of Baroda may require. I/We further agree that my/our loan shall be governed by the rules of Bank of Baroda which may be in force from time to time. Bank of Baroda reserves the right to reject any application without providing any reason.

I/We Undertake to bear processing, service, documentation charges etc. stipulated by the bank from time to time. I/We agree, note and understand that Bank of Baroda shall be entitled at its sole discretion to call back, the entire loan/advance whether due and payable or not at any time without assigning any reason and enforce its rights, remedies and securities.

Yours faithfully,

Place : Manasagangotri _____
Date : 11.03.21 _____

Signature of the Applicant

I am willing to stands as guarantor	
Place : _____	Signature of the Guarantor/s
Date : _____	