

Date:....

Name of Borrower:

Customer ID :

PART - 2

KB- SAHAKARANA MITHRA

KB- SAHAKARANA MITHRA				
Detai	ls of PACS			
1.	Name & Address of the controlling office (Branch/Head Office)			
2.	General Classification of PACS			
3.	Name & Address of the Secretary/ Chief Executive			
4.	Name & Address of the President			
Detai	ls of	Borro	wor	Co-obligant
Detail	15 01	БОПО	wer	CO-Obligant
1.	Date of joining in the service & Completed Year			1.
				2.
2.	Date of Retirement & Remaining Service			1.
				2.
4.	Gross salary drawn during the last month			1.
				2.
5.	Net salary drawn during the last month			1.
				2.
6.	Whether stood as guarantor previously (Yes/No, If Yes specify details:			1.
				2.
Declaration of the Applicant Borrower/Co-Obligant				
I/Wedo hereby agree and declare that I/We shall abide by the rules and regulations governing the sanctioning of KB SAHAKARANA MITHRA to the employees of PACS. The monthly EMI towards the loan account may be recovered from my/our salary by the Secretary/President till closure of the loan account.				
Signature of Applicant/ Co-Applicant/Obligants:		Signature of Branch Manager		
1.				
2.				
3.				
Place:				