



APPLICATION FOR PERSONAL CREDIT FACILITIES

For quicker processing please fill all cages in **BLOCK LETTERS**
 Contact the Officer who issued this form if assistance is needed
 Please type or write letters and use extra papers if necessary

FOR BANK USE ONLY

Branch :

Date Issued :

Date Received :

PERSONAL DATA	Primary Applicant	Joint Applicant / Spouse																
Name in Full :																		
Date of Birth :	<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											
NIC No./ DL No. / PP No. :																		
Civil Status :																		
Profession :																		
Address :																		
Contact No. :	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 100px; height: 20px;">Telephone</td> <td style="width: 100px; height: 20px;">Mobile</td> </tr> </table>	Telephone	Mobile	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 100px; height: 20px;">Telephone</td> <td style="width: 100px; height: 20px;">Mobile</td> </tr> </table>	Telephone	Mobile												
Telephone	Mobile																	
Telephone	Mobile																	
E-mail Address :																		
No. of Children and other Dependents (Specify other Dependents) :																		

DETAILS OF EMPLOYMENT	Primary Applicant	Joint Applicant / Spouse				
Employer / Business / Enterprise Name & Address :						
Contact details of above :	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 100px; height: 20px;">Telephone</td> <td style="width: 100px; height: 20px;">Fax</td> </tr> </table>	Telephone	Fax	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 100px; height: 20px;">Telephone</td> <td style="width: 100px; height: 20px;">Fax</td> </tr> </table>	Telephone	Fax
Telephone	Fax					
Telephone	Fax					
Nature of Business :						
Designation :						
No. of years Work Experience :						

DETAILS OF PROPOSED FACILITY	
Amount of Facility Requested : Rs.	No. of Months required for payment :
Exact Purpose of Facility :	
Details of Security Offered (Type & Value) :	

APPLICANT'S INCOME / EXPENSES					
Current Monthly Income	Primary Applicant (Rs.)	Spouse (Rs.)	Current Monthly Expenses	Primary Applicant (Rs.)	Spouse (Rs.)
Basic Salary			House Rent		
Allowances			Electricity and Water/Utilities		
Profits / Dividends			Household Expenses		
Others			Loan Repayment		
			Others		
Total Income			Total Expenses		

APPLICANT'S BANK ACCOUNT DETAILS - CURRENT/SAVINGS/FIXED DEPOSITS					
Bank	Branch	Account Type	Account No.	Present Balance (Rs.)	Account of Primary / Jt Applicant or Spouse

CREDIT CARD DETAILS		
Name of Cardholder	Credit Card Issuing Bank	Credit Limit (Rs.)

EXISTING FACILITIES (TERM LOAN/ LEASING/ HIRE PURCHASE/ OTHER)								
	Branch	Type of Facility	Original Amount (Rs.)	Amount Outstanding (Rs.)	Arrears if any (Rs.)	Securities Offered	Guarantor/ Indemnifier	Facility of Primary / Jt Applicant or Spouse
Amāna Bank								
Other Financial Institutions								

ASSETS OWNED BY THE APPLICANT/S						
Land & Property	Name & Location of Property		Extent (Acres/Perches)	Mortgage, if any	Estimated Value (Rs.)	Assets of Primary / Jt Applicant or Spouse
Life Insurance Policy <small>(Attach a letter from the Insurance Company if policy is given as security)</small>	Name of Company		Policy No. & Amount (Rs.)	Name of Assured / Beneficiary (if any)	Surrender Value (Rs.)	Policy of Primary / Jt Applicant or Spouse
Shares / Bonds	Name of Company		No. of Shares	Market Value (Rs.)		Shares of Primary / Jt Applicant or Spouse
Stocks	Stocks in Trade		Type of Stocks		Insured Value (Rs.)	Stocks of Primary / Jt Applicant or Spouse
Motor Vehicles	Brand / Model		Reg. No.	Year of Manufacture	Present Value (Rs.)	Vehicle of Primary / Jt Applicant or Spouse
Other Assets (Such as Machinery / Equipment / Furniture & Fittings / Jewellery etc.)					Value (Rs.)	Assets of Primary / Jt Applicant or Spouse

DETAILS OF A RELATIVE NOT LIVING WITH APPLICANT

Name :			
Relationship :			
Contact Details :	Tel.		Mobile
	E-mail Address		

PARTICULARS OF INCOME TAX FOR THE LAST THREE YEARS (IF A TAX PAYER)

Year of Assessment	Primary Applicant			Joint Applicant / Spouse		
	20__	20__	20__	20__	20__	20__
Statutory Income						
Assessable Income						
Taxable Income						
Tax Paid						

LIST OF DOCUMENTS TO BE SUBMITTED WITH THE APPLICATION FORM

- | | |
|--|---|
| <input type="checkbox"/> Latest Utility Bills | <input type="checkbox"/> Evidence of current Banking facilities (if available) |
| <input type="checkbox"/> Bank Statements of applicant/s and guarantors for the past 6 months | <input type="checkbox"/> Photocopies of NIC/Passport of applicant/s |
| <input type="checkbox"/> Evidence of current salary/other earnings (pay slips) of applicant/s and guarantors, if any | <input type="checkbox"/> Past 3 Years Tax returns of applicant/s and guarantors |

DECLARATION

I/We, the undersigned, hereby declare and undertake as follows:

1. That the above information is true and correct as at the date hereof.
2. Any material error, omission or misrepresentation subsequently discovered shall entitle Amāna Bank Limited to cancel any approvals or facilities granted pursuant to this application and to demand and recover all monies due on such facilities.
3. To immediately notify Amāna Bank Limited in the event of any change in the information provided herein that the Amāna Bank Limited may deem material.
4. Amāna Bank Limited is hereby authorised to obtain any information additional to which is hereby provided from the employer, bankers, auditors of the undersigned or from any other source that the Bank deems relevant and such parties so approached by the Bank for such purpose shall be hereby authorised to release all or any of such information without requiring any further authorisation from the undersigned.
5. This application remains the property of Amāna Bank Limited regardless of whether the facilities hereby applied for are granted or not and Amāna Bank Limited reserves the right to reject this application at its sole discretion without stating any reason thereof.

Name of Primary Applicant : _____ Signature : _____ Date : _____

Name of Joint Applicant : _____ Signature : _____ Date : _____