Personal Finance

Aditya Birla Finance Ltd.



PROTECTING INVESTING FINANCING ADVISING

Personal Loan Application Form (Individual)

Please fill in all the required d	letails in BLOCK LETTERS. Tick 🗹 boxes as applicable.	All Fields Mandatory
Personal Loan Business	s Loan Doctor's Loan	
Application Form NoRequested Loan Amount ₹Type of Loan New	Tenure in Months	Applicant Please paste passport size photograph here with signature across Co-Applicant Please paste passport size photograph here with signature across
For office use only Application Type* New KYC Number Account Type* Norm	Update Simplified (for low risk customers) Small	
Demographic Details		
Personal Detail	Applicant	Co-Applicant / Guarantor
Name*	PRIEFIX FIRST NAME	PRIEFIX FIRST NAME
Name	MIDDLE NAME	M I D D L E N A M E
Fatharia / Coassa Nama*		
Father's / Spouse Name*	PREFIX FIRST NAME	PREFIX FIRST NAME
	MIDDLE NAME	M I D D L E N A M E
	LAST NAME	L A S T N A M E
Mother Name*	PREFIX FIRST NAME	PREFIX FIRST NAME
	MIDDLE NAME	M I D D L E N A M E
		L A S T N A M E
Date of Birth*	D D M M Y Y Y	D D M M Y Y Y Y
Gender*	Male Female	Male Female
Marital Status*	Single Married	Single Married
Citizenship*	Indian Others ISO 3166 Country Code	Indian Others ISO 3166 Country Code
Residential status*	Resident Individual Non Resident Indian	Resident Individual Non Resident Indian
	Foreign National Person of Indian Origin	Foreign National Person of Indian Origin
Occupation Type*	Service Private Sector Public Sector	Service Private Sector Public Sector
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Government Sector	Government Sector
	Others Professional Self Employed	Others Professional Self Employed
	Retired Housewife Student	Retired Housewife Student
	Business Not Categorised	Business Not Categorised
PAN*		
Qualification*		
Qualification		
		Relation with applicant

Current Address				
	District	District		
	Pin / Post Code	Pin / Post Code		
	State / U.T Code ISO 3166 Country Code	State / U.T Code ISO 3166 Country Code		
No. of years at current address				
No. of years in current city				
Current Residence	Self Owned Rented Other (Please specify)	Self Owned Rented Other (Please specify)		
Correspondence / Local address details	Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')	Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')		
	District	District		
	Pin / Post Code	Pin / Post Code		
	State / U.T Code ISO 3166 Country Code	State / U.T Code ISO 3166 Country Code		
Employment Detail	Applicant	C. A. I'm J. C.		
Occupation	Salaried Self Employed Professional	Co-Applicant / Guarantor Salaried Self Employed Professional		
Occupation				
Occupation Designation				
Occupation Designation Company / Business Name	Salaried Self Employed Professional	Salaried Self Employed Professional		
Occupation Designation Company / Business Name Industry Type	Salaried Self Employed Professional			
Occupation Designation Company / Business Name Industry Type Business Type	Salaried Self Employed Professional	Salaried Self Employed Professional		
Occupation Designation Company / Business Name Industry Type Business Type	Salaried Self Employed Professional Trader Manufacturer Service	Salaried Self Employed Professional		
Occupation Designation Company / Business Name Industry Type Business Type Office Address	Salaried Self Employed Professional	Salaried Self Employed Professional Trader Manufacturer Service		
Occupation Designation Company / Business Name Industry Type Business Type	Salaried Self Employed Professional Trader Manufacturer Service Pin	Salaried Self Employed Professional Trader Manufacturer Service Pin		
Occupation Designation Company / Business Name Industry Type Business Type Office Address	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor		
Occupation Designation Company / Business Name Industry Type Business Type Office Address	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID Total yrs in present occupation	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID Total yrs in present occupation Total Work Experience	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID Total yrs in present occupation Total Work Experience Total Monthly Income ₹	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID Total yrs in present occupation Total Work Experience Total Monthly Income ₹ Other Income ₹	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID Total yrs in present occupation Total Work Experience Total Monthly Income ₹ Other Income ₹ Total ₹ Contact Details	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID Total yrs in present occupation Total Work Experience Total Monthly Income ₹ Other Income ₹ Total ₹ Contact Details Tel. (Off)	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID Total yrs in present occupation Total Work Experience Total Monthly Income ₹ Other Income ₹ Total ₹ Contact Details Tel. (Off) Tel. (Res)	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		
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Occupation Designation Company / Business Name Industry Type Business Type Office Address Business Constitution Off. Ph. with STD Code Extn. No. Official Email ID Total yrs in present occupation Total Work Experience Total Monthly Income ₹ Other Income ₹ Total ₹ Contact Details Tel. (Off) Tel. (Res)	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.	Salaried Self Employed Professional Trader Manufacturer Service Pin Public Sector Pvt. Ltd. Partnership Proprietor Public Ltd. Central Govt. State Govt.		

Pro	oof of Identity (Pol)*							
PΑ	AN No.			Aadh	ar No.				
GS	ST No.			Voter	s ID				
	ssport No.				sport, passport	expiry date	e DDMM	YYYY	
	iving License			•	DL expiry date	o.,p.,, aac.			
	_					Specify)		<u>' ' ' ' ' </u>	
INF	REGA Job Card			Other	cument notified by th		emment)		
Sir	mplified Measu	ıres Account - Docum	ent Type code	Ident	ification Number	-			
Pro	oof of Address (Po^*							
	ddress Type*	Residential / E	Rusiness Pesi	dential Business	Registere	d Office	Unspecified		
			1			d Office	Orispecified		
Pr	oof of Address		Driving Licence	UID (Aadhaar	/	Pls Specif	(A)		
		Voter Identity			thers	тіз эресіі	y)		
		Simplified Me	asures Account - Do	cument Type code					
Det	tail of Related F	Person (In case of addit	tional related persons	s, please fill 'Annexu	re B1')				
	Addition of	Related Person	Deletion of Related	Person KY0	C Number of Rela	ated Perso	on (if available)		
Rel	lated Person T	ype Guard	ian of Minor	Assignee A	uthorized Repres	entative			
Na	me								
Pro	oof of Identity (Pol)							
	AN No.			Δadh	ar No.				
	oters ID			, add i					
	ssport No.			if pag	sport, passport	ovniny dota		<u> </u>	
	·					ехрігу цац		Y Y Y Y	
	iving License				DL expiry date	Specify)	D D M M	<u> </u>	
NF	REGA Job Card			Other	cument notified by th		emment)		
Sir	mplified Measu	ıres Account - Docum	ent Type code	Ident	ification Number				
Do	marks (If any)								
Rei	iliains (ii aliy)								
Kei	IIIains (II ally)								
Re	mains (ii dily)								
	eferred Mailing	Address	ent Office	Permanent	(Pi	s specify	the reason for this s	selection)	
Pre	eferred Mailing	Address	ent Office	Permanent	(Pi	s specify	the reason for this s	selection)	
Pre	eferred Mailing			Permanent	(PI	s specify	the reason for this s	selection)	
Pre	eferred Mailing	Address Curre	Office Account No.	Permanent Loan Amoun	(Pl	s specify Months	the reason for this s	Selection) Commencement Date	Current Outstanding
Pre	eferred Mailing	Financer's			(Pl	s specify Months			
Pre	eferred Mailing	Financer's			t Tenure N	s specify Months			
Pre	eferred Mailing	Financer's			t Tenure N	s specify Months			
Pre	eferred Mailing	Financer's			t Tenure N	s specify Months			
Pre Exi	eferred Mailing	Financer's			t Tenure N	s specify Months			
Pre Exi	sting Loans Loan/Facility	Financer's Name	Account No.				Interest	Date	Outstanding
Pre Exi	sting Loans Loan/Facility	Financer's	Account No.	Loan Amoun	t Tenure M	Curren			
Pre Exi	sting Loans Loan/Facility	Financer's Name	Account No.	Loan Amoun		Curren	Interest t/Savings/OD	Date	Outstanding
Pre Exi	sting Loans Loan/Facility nk Details r. No.	Financer's Name	Account No.	Loan Amoun		Curren	Interest t/Savings/OD	Date	Outstanding
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Pre Exi	sting Loans Loan/Facility nk Details r. No. 1. 2.	Financer's Name	Account No.	Loan Amoun		Curren	t/Savings/OD ase Specify Limit)	Date	Outstanding
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Re	ference 1	Reference 2				
Name		Name				
Relationship	If Personal Guarantor Yes No	Relationship If Personal Guarantor Yes No				
Current Address		Current Address				
Landmark	City	Landmark City				
State	PIN	State PIN PIN				
Landline		Landline				
Mobile		Mobile				
Declaration						
information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. 2.1 /We confirm that no insolvency proceedings or suits for recovery of outstanding due or monies whatsoever and/ or any criminal proceedings have been initiated and of or are pending against me/ us and that I/We have never been adjudicated insolvent by any court or other authority. 3. No action nor other steps have been taken or legal proceedings started by or against me/ us in any court or other authorities for winding up, dissolutions, administration or reorganization or for the appointment of the receiver, administrative, administrative receiver, trustee or similar officer for my/our assets. 4. I/We declare that I/We have not made any payments in cash, baerer cheque or kind along with or in connection with this application to the executive collecting my/our application. 1. I/We shall not hold adity Birla Finance Limited, (hereinafter referred to "ABFL") liable for any such payments made by us to the executive collecting this application. 5. I/We understand and acknowledge that ABFL shall were be absoluted discretion, without assigning any reasons collecting the application and ABFL shall not be responsible in any manner whatsoever to me/us for such rejection or any delay in notifying me /us of such rejection and any costs, losses, damages or expenses, or other consequences, caused by reasons of such rejection, or any delay in notifying me/us of such rejection of such rejection and any costs, losses, damages or expenses, or other consequences, caused by reasons of such rejection, or any delay in notifying me/us of such rejection and any costs, losses, damages or expenses, or other consequences, caused by reasons of such rejection, and any control of such rejection of such rejection and any costs. In addition, and any control of such rejection and any costs. In addition, and any control of such rejection and any costs. In addition, and any control of such rejection and any costs. In additi						
Applicant's Signature Place	Date	Co-Applicant's Signature				
	bmitted documents to be self-attested by the cu					
Dully Filled and signed Application Form (with cross signed photographs of App/Co-App/Guarantor) KYC Documents of all parties to the loan oldentity Proof (Specify) Signature Proof (Specify) Proof of Residence (Specify) Proof of Office (Specify) Proof of Qualification (Specify)	Property is Identified) Details of Limits and Loans availed Copy of PAN Card Repayment Track Record (if applicable) Bank Verification Form Latest Loan outstanding statement for	Additional Documents - Salaried Latest 3 months Salary Slip or Salary Certificate Latest Form 16 Latest 6 months Bank Statement where direct salary is being credited Additional Documents - Self Employed/Professional/Partnership/Company Financial Documents for 2 years ITR along with computation Balance Sheet, P&L, Schedules Tax Audit Report Additional Documents - Salaried Partnership Deed & MOA/AOA List of Directors/Shareholders attested by CA/CS Latest 12 months Bank Statement (Both Business and Savings) VAT/Sales Tax returns for current financial year				
FOR OFFICIAL USE ONLY						
Documents Received Self-Cert	ified True Copies Notary	Risk Category High Medium Low				
In Person Verifica	ation Carried Out By	Institution Details				
Identity Verification Done	Date D D M M Y Y Y Y	Name				
Emp. Name		Code				
Emp. Code						
Emp. Designation						
Emp. Branch		[Institution Stamp]				
[Employe	e Signature]	[datation ording]				
		bsi. ISO 9001				



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