XPRESS CREDIT APPLICATION FORM

STATE BANK OF INDIA _____ BRANCH

PHOTOGRAPH

l) PERSONA	I INFORM	ATION				
•						
	First Nan		Middle Name		Surname/Last Name	
Father's/Spous	e Name :_					
		First Name	Middle Name	Surname/Las	st Name	
			Telephone No.			
(ii) Permanent	Address :					
	City	Pin Code	Telephone No.			
		Self				
. Date of Birth :		Month Year	Age :	Years		
. No. of depende	ents: _	Children		-		
Self Education :			Spouse*	¢		
Laucation			/ Graduate / Post-Gra	 aduate)		

a. Employees of :	
 Govt./Public Sector Undertaking Institution 	/ Public Ltd. Co. / Multi National Company / Repute
b. Self – Employed :	
 MBA / Engineer / Doctor / Archite 	ect / C.A.
- PSU/State /Central Govt. /Public	
	as per copy of relieving letter
Nodatedenclosed	•
8. Name and Address of Employer/Establis	shment:
O Designation :	
9. Designation:	
10. Length of Service:Years N	Months
io. Length of Service :rearsiv	TOTAL
11. Monthly /Annual Income: Self	
Gross Rs. :	
Net Rs. :	
Other Regular Monthly	
Income Rs. :	
Discourse of Comments	
Please specify Source :	
12. Do you own a House : YES/NO	(Tick whichever is applicable)
If Voc. Is the house mortgaged . VCC	/NO /Tiek whichover is applicable)
If Yes, Is the house mortgaged: YES	
Value of House(At Cost): Rs	
12 Vahida : Type of Vahida :	
13. Vehicle: Type of Vehicle: Two Wheeler:	
	Age : Make Age
Owned / Company Provided / Hypothecate	
, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
14. Present Liability : Rs	:
15. Other Assets owned by : Self	
Property (other than House) :	Rs
Bank/Post Office Deposits, NSC's, LIC Po	
•	•
Debentures, Units of UTI /Mutual Funds	n N
Debentures, Units of UTI /Mutual Funds Others:	::

16. Other Liabilities	in Brief :		
Friends and Rela	atives : Rs		
Employers	: Rs		
Banks/F.I.s	: Rs		
Others	: Rs		
Total	: Rs		
17. Purpose of Loan	n :		
18. Loan Amount:		Rs	
		S	
(II) Details of Book	Account , Solf		
(II) Details of Bank A 19. Name of the B			
Telephone No.			
Type of Accourt Account Numb			
Year of Openin			
rear or openin	lg :		
(III) Two Person	al Reference :		
1) Name:		2) Name :	
Address :		Address :	
Tel. No		 Tel. No	
(DA) Davids and a			
(IV) Declaration :	II the particulars an	d information given in the	annlication form are true correct
			e application form are true, correct
•	that they shall form	n the basis of any loan, s	State Bank of India may decide to
grant me/us.	nform Ctata Dank a	findia ragarding change i	n my/our occupation/employment
			, , , ,
		further information that	
•	•	•	s with any bank other thatn that
		•	it facilities with any other bank in
			diately. I/We further authorize the
	· ·	_	e credit in my/our name jointly or
•		•	the funds will be used for stated
	•		firm that we are resident Indians.
		•	execution of documents as per the
•	s. I agree that the	Bank has a right to make	such enquiries about me as it/they
think(s) fit.			
Place :			Signature of Applicant
Date :			

(V) **Documentation**: Please submit the following documents along with your application.

- Latest monthly salary slip showing deductions of Self.
- Latest Form 16 from employer (for employees). of Self
- Copy of IT return for last two years, duly acknowledged by ITO with Computation of income, for Professionals.
- Copy of Passport or Voters ID Card or Driving License for proof of Identity #
- Copy of ration card/Telephone Bill/Passport/Voters I-Card for proof of residence. #
 #(not required from existing customers)
- Latest Passport size Photograph of Self
- Last six months Bank Statement of the account where salary is credited of Self
- Verification of signature from the bank where salary is credited or any employers.
- Relieving Letters of Pensioner from the employer.
- Proof of official address (for other than employees)
- Proof of Professional Qualification: Copy of highest professional degree held.

Place: Date :	Signature of Applicant
	FOR BANK'S USE
Appraisal / Recommended by :	
Date :	
Sanctioned by :	
Date:	