



HOME LOANS

Loan Application Form

Please fill in all the required details in BLOCK LETTERS. Tick boxes as applicable.

Fields marked with "*" are mandatory fields.

Application Form No. _____

Requested Loan Amount ₹ Tenure in Months

Purpose of Loan

Type of Loan Facility

Home Loan Home Improvement Loan Home Extension Loan

Plot Purchase Loan Home Construction Loan Loan Against Plot

Plot + Home Construction Loan Commercial Purchase

Loan Against Property - Residential Loan Against Property - Commercial

Lease Rental Discounting Other_____

Transaction Type New Refinance Top Up Refinance + Top Up Others_____

Applicant
Please paste latest color passport size photograph here with signature across

Co-Applicant/
Guarantor
Please paste latest color passport size photograph here with signature across

Application Type New Existing

Personal Detail*

Name

Father's / Spouse Name

Maiden Name

Mother Name

Date of Birth/Incorporation

Gender

Marital Status

Citizenship

Residential Status

CKYC No.

Category

Religion

Qualification

Applicant

PR EF IX F I R S T N A M E

M I D D L E N A M E

L A S T N A M E

PR EF IX F I R S T N A M E

M I D D L E N A M E

L A S T N A M E

PR EF IX F I R S T N A M E

M I D D L E N A M E

L A S T N A M E

PR EF IX F I R S T N A M E

M I D D L E N A M E

L A S T N A M E

D D M M Y Y Y Y

Male Female Transgender

Single Married

Indian Others_____

Resident Individual Non Resident Indian

Foreign National Person of Indian Origin

Gen SC ST OBC EWS Other_____

Co-Applicant

Guarantor

PR EF IX F I R S T N A M E

M I D D L E N A M E

L A S T N A M E

PR EF IX F I R S T N A M E

M I D D L E N A M E

L A S T N A M E

PR EF IX F I R S T N A M E

M I D D L E N A M E

L A S T N A M E

PR EF IX F I R S T N A M E

M I D D L E N A M E

L A S T N A M E

D D M M Y Y Y Y

Male Female Transgender

Single Married

Indian Others_____

Resident Individual Non Resident Indian

Foreign National Person of Indian Origin

Gen SC ST OBC EWS Other_____

Relation with applicant _____

Contact Detail*

Tel. (Res)

Mobile

Email ID

TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA

ADDITIONAL DETAILS REQUIRED (Mandatory only if above option is ticked)

ISO 3166 Country Code of Jurisdiction of Residence

Tax Identification Number or equivalent (If issued by jurisdiction)

Place / City of Birth

ISO 3166 Country Code of Birth

Address*

Preferred Mailing Address Current Office Permanent (Pls specify the reason for this selection)

Address Type Residential / Business Residential Business Registered Office Unspecified

Proof of Address Passport Driving Licence UID (Aadhaar) Voter Identity Card NREGA Job Card Others (Pls Specify)

District _____ State/UT _____

Pin / Post Code

State / U. T Code ISO 3166 Country Code

(In case of multiple correspondence / local addresses, please fill 'Annexure A1')

No of yrs at above address Y Y M M

No of years at current city Y Y M M

Residence type Owned Rented Others (Pls Specify)

Permanent Address Same as Current / Overseas Address details

District _____ State/UT _____

Pin / Post Code

State / U. T Code ISO 3166 Country Code

Address in the Jurisdiction Details where Applicant is Resident Outside India for Tax Purposes Permanent / Overseas Address details Same as Correspondence / Local Address details

District _____ State/UT _____

Pin / Post Code

State / U. T Code ISO 3166 Country Code

Number of Related Persons (Please refer instruction E at the end)

Employment Detail*

Occupation Type Private Sector Public Sector Government Sector Professional Self Employed Retired Housewife Others _____

Designation

Company / Business Name

Industry Type

Business Constitution if Self-Employed Pvt. Ltd. Partnership Proprietor Public Ltd. Others _____

off. ph. with STD Code Extn. No.

Official Email ID

Total yrs in present occupation years Total Work Experience years

Total Monthly Income ₹

Other Monthly Income ₹

Annual Household Income ₹

Business Type Trader Manufacturer Service Retailer Others _____

State/UT _____ Pin

Co-Applicant Guarantor

Occupation Type Private Sector Public Sector Government Sector Professional Self Employed Retired Housewife Others _____

Designation

Company / Business Name

Industry Type

Business Constitution if Self-Employed Pvt. Ltd. Partnership Proprietor Public Ltd. Others _____

off. ph. with STD Code Extn. No.

Official Email ID

Total yrs in present occupation years Total Work Experience years

Total Monthly Income ₹

Other Monthly Income ₹

Annual Household Income ₹

Business Type Trader Manufacturer Service Retailer Others _____

State/UT _____ Pin

Total ₹	<input type="text"/>	<input type="text"/>
GST	<input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable <input type="checkbox"/> Exempted	<input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable <input type="checkbox"/> Exempted
GSTIN/UIN	<input type="text"/>	<input type="text"/>
GST Exemption Notification No.	<input type="text"/>	<input type="text"/>
Date of Commencement of Business	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Place of Incorporation/Formation	<input type="text"/>	<input type="text"/>
Country of Incorporation	<input type="text"/>	<input type="text"/>

Proof of Identity (PoI)* (Please refer instruction B at the end)

PAN No.	<input type="text"/>	<input type="text"/>
Aadhaar No.	X X X X X X X X <input type="text"/>	X X X X X X X X <input type="text"/>
Voters ID	<input type="text"/>	<input type="text"/>
Passport No.	<input type="text"/>	<input type="text"/>
if passport, passport expiry date	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Driving License	<input type="text"/>	<input type="text"/>
if DL, DL expiry date	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
NREGA Job Card	<input type="text"/>	<input type="text"/>
Others (Pls Specify) (any document notified by the central government)	<input type="text"/>	<input type="text"/>
Simplified Measures Account - Document Type code	<input type="text"/>	<input type="text"/>
Identification Number	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Officially valid document(s) in respect of person authorised to transact <input type="checkbox"/> Certificate of Incorporation/Formation <input type="text"/> <input type="checkbox"/> Memorandum and Articles of Association <input type="text"/> <input type="checkbox"/> Resolution of Board / Managing Committee <input type="text"/> <input type="checkbox"/> Activity Proof -1 (For Sole Proprietorship Only) <input type="text"/>		<input type="checkbox"/> Registration Certificate <input type="text"/> <input type="checkbox"/> Partnership Deed <input type="text"/> <input type="checkbox"/> Trust Deed <input type="text"/> <input type="checkbox"/> Power of attorney granted to its manager, officers or employees to transact on its behalf <input type="text"/> <input type="checkbox"/> Activity Proof -2 (For Sole Proprietorship Only) <input type="text"/>

Details of Property to be Mortgaged/Purchased* Property Identified Property Not Identified (PNI)

Type of property	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed <input type="checkbox"/> Industrial	Property Usage	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed <input type="checkbox"/> Industrial
Property Address	Flat No/House NO. <input type="text"/>	Building Name	<input type="text"/>
Address Line 1	<input type="text"/>		
Address Line 2	<input type="text"/>		
Street Name	<input type="text"/>	Landmark	<input type="text"/>
Taluka/Tehsil	<input type="text"/>	Village/City	<input type="text"/>
Pin Code	<input type="text"/>	Usage	<input type="checkbox"/> Self Occupied <input type="checkbox"/> To-Let/Investment
Property Age	<input type="text"/>	Applicable Market Rate	<input type="text"/>
Property Value	<input type="text"/>	Ares (Sq.Ft)	<input type="text"/>
Land Area	<input type="text"/>	Constructed Area	<input type="text"/>
Current Owner Name	<input type="text"/>		
<small>(Builder Name in case it is a builder purchase)</small>			
Do you propose to rent the dwelling unit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the legal title to the dwelling unit clear?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you the sole owner of the dwelling unit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will ABHFL be able to obtain first mortgage of the dwelling unit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of Dwelling Unit :	<input type="text"/>		

Estimate of Required Funds*

Purchase/Construction Cost ₹	<input type="text"/>
Other Cost ₹	<input type="text"/>
Total Requirement of funds ₹	<input type="text"/>

Estimate Source of Funds*

Loan Requested from ABHFL ₹	<input type="text"/>
Other (Specify:.....) ₹	<input type="text"/>
Total Requirement of funds ₹	<input type="text"/>

Bank Details*

Sr. No.	Name of Account Holder	Name of Bank	Branch	Current/Savings/OD (If OD Please Specify Limit)	Account No.	Banking Since
1.						
2.						

Acknowledgement

Application Form No. _____

Dear Sir/Madam,

This is to acknowledge that ABHFL has received your application form for _____ of ₹ _____ ABHFL shall communicate its decision on your application within 15 working days. This is subject to submission of all documents and conforming to internal guidelines of ABHFL. Terms and conditions are also available on our website : www.adityabirlahaousingfinance.com

Sales Manager: _____ Channel Name : _____ Contact No : _____

Date : _____ Email ID : _____ Signature : _____

