

STATUTORY BODIES FAMILY PROTECTION FUND

PERSONAL LOAN

APPLICATION FORM

Surname:.....Name:.....

Department:.....Code No:.....

Personal No.....Tel. Off.....Res.....Mobile

Address:.....

Date of Birth:.....Age:.....

N.I.D. No.

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Post Held:.....Monthly Salary:Rs.....

Date Joined Service:Date Confirmed:.....

Loan Amount Rs.....Interest Rate:.....

Any outstanding loan with other institutions (1) SBFPPF.....
(2) Others

1. I, the undersigned, hereby apply for a loan of Rupees
.....(Rs.....) from the above Fund in accordance with the Regulations of the Personal Loan Scheme of the Fund and hereby authorize the deduction of the monthly loan repayment from my salary/pension.
2. I am not proceeding on leave without pay during the loan period, in any such case I will be liable to pay the amount due.
3. I certify that this is / is not the First loan contracted by me in Year

Signature of Applicant

GUARANTOR

Surname:.....Name:.....

Department:.....Code No:.....

Personal No.....Tel. Off.....Res.....Mobile.....

Address:.....

Date of Birth:.....Age:.....Date Confirmed:.....

N.I.D. No.

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Post Held:.....Monthly Salary:Rs.....

Guarantor for another member: Yes/No

Name of previous borrower (1).....(2).....

Signature of Guarantor

**TO BE FILLED IN AND SIGNED BY APPLICANT AND GUARANTOR
ACKNOWLEDGEMENT : UNDERTAKING TO REFUND BY INSTALMENTS**

I, acknowledge having received from the Fund the sum of Rupees
.....
as loan, subject to the conditions of my membership of the Fund and its rules and
Regulaitons.

1. I, undertake to refund this loan by equal monthly and consecutive instalments of Rs..... in months by deduction from my salary, fees and allowance accruing to me without prejudice to the refund being made otherwise and on being accepted by the Statutory Bodies Family Protection Fund; each such instalment shall be calculated as per the table of the Fund and shall represent an instalment of the principal amount and of interest rate applicable and shall be paid not later than the last day of each month.
2. I, undertake to pay all charges in connection with the loan including an insurance premium, prior to granting of the loan. In case of any default in payment of any instalment at the due date, the entire balance of the loan together with any interest due shall become immediately due and demandable, at the option of the Fund.
3. I voluntarily agree to accept insurance with SICOM Ltd - "Read and approved".
4. I, also undertake to refund any such loan balance, as may be required, together with any interest due in case of a Voluntary Retirement Scheme or early retirement and hereby authorize that the amount due be deducted from my gratuity, lump sum or any amount payable to me by my employer.
5. Whenever I am proceeding on Retirement, on leave without pay or Transferred to another Council I must **IMMEDIATELY** inform the Fund and MAKE NECESSARY ARRANGEMENTS for the repayment of the loan(s) at the offices of the Fund pending the procedures are done.
6. I AGREE to CHECK if the loan repayment has started from my Monthly SalaryPay otherwise I MUST CALL AT OFFICE TO REMEDIATE the situation the soonest.

Applicant's Signature Date/...../.....

As guarantor, I bind myself and in solido to repay in full to the Statutory Bodies Family Protection Fund, through salary deduction, any balance which may be due to the Fund in respect of the Loan and the interest thereon, should the borrower resign, or be dismissed from the service, or otherwise fail to repay the said loan in terms of this agreement.

Guarantor's Signature Date:...../...../.....