

STATE BANK OF INDIA (BHOPAL CIRCLE) ADHIKARI SAHAKARI SAKH SAMITIMARYADIT, BHOPAL

(A Multi State Cooperative Society Regd.No.MSCS/CR/132/2001) C/o State Bank of India, Local Head Office, Mezz Floor, Hoshangabad Road, Bhopal- 462011 Tele No. 0755-2554835, 4288298

APPLICATION FOR FESTIVAL LOAN ON PERSONAL SURETY

To Be Filled In By Applicant

I am a member of the State Bank of India (Bhopal Circle) Adhikari Sahakari Sakh Samiti Maryadit, Bhopal and I wish to avail festival loan. I give below the necessary particulars to enable the Society to grant me the loan.

1.	Name (Block etters)			
	S/o, W/o, D/o			
2.	Designation			
3.	Branch/Br code, District			
4.	Membership No, P.F. No			
5.	Salary A/c No			
5.	Amount of loan required Rs			
7.	Festival for which the loan is required			
3.	Period of payment			
9.	Number of installment			
10.	Mobile No			
Place Date Signature of applicant ON DEMAND, I promise to pay the President, State of Bank of India (Bhopal Circle) Adhikari Sahakari Sakh Samiti, Maryadit, Bhopal the sum of Rupees				
ogeth n cash	er with interest at the rate ofpercent per annu	im for value received		
Rs		Borrower's		
Witnes		Signature		
Name	ure 	Residential Address		
	SS			

OFFICE NOTE

L.F.NO.			LOAN NO.			
The application has been scrutinized and found in order and the same has been recommended to the Managing Committee/Loan Sanctioning Sub-Committee for sanction in their meeting to be held on						
No. of Share Held	-					
Proposed to take	-					
Total No.	-					
Value	-					
10 Times of the above	-					
RESOLVED that the loan of Rs						
MANAGER		PRESIDENT/VICE-	PRESIDENT			
Bhopal						
Dated						

<u>Authority to Deduct Loan Instalment</u>

To,	
The AGM/Chief Manger/Branch Manager/Office Manager	
STATE BANK OF	
INDIA	
Place Date	
Sir,	
I do hereby authorise you to deduct, monthly, installment from m	•
Sum of Rs	ahakari Sakh granted to
In the event of my retirement voluntary or otherwise, death or my discharge or dismissal from my office I hereby authorise you to dedu amount then standing to the credit or my Provident Fund Account, my allowance, bonus, gratuity or any other dues payable to me in respect of and to arrange for the payment of the amount so deducted to the said socie	uct from the salary, leave the said loan
I hereby undertake not to revoke this authority, without the written co Society, until the within mentioned loan with interest, is fully repaid by m	
I hereby authorise you to cancel my previous salary letter of authority for Rssent to you by the Society	
	Yours faithfully,
	(Member Signature)
Witness:	
Signature	
Name	
Branch	
Designation	

Enclosed latest salary slip