

You are applying as a Salaried - Individual Self-Employed - Professional Self-Employed - Others							_	
Are you an existing AXIS Bank Customer?	Yes	No (If	Yes, Provide	Account No	0.:			ر ا_
Dear Sir / Madam,								
I/We request you to sanction me/us a loan of Rs.			for the pu	rnose of				
	months by way of F	Post-dated C	•	•	calary by on	anlover (check	(-off facility) / ECS / S	
терауале пт	TIOTHITS BY WAY OF F	osi-uaicu Ci	ieques / Deu	uction nom	Salaly by Cil	ipioyei (check	CONTRACTINEY// ECS/ 3	1.
	Personal Details	s (For indiv	iduals Only)				
Name of the Applicant :								
Title Surname		First Nan	e			Middle Name		_
Preferred Name :		<u> </u>	Date of Birth :	: DD:	MM:	YYYY:		
Father's / Spouse's Name :								Ш
Mother's Maiden Name :								
Residence Address :								
	Landmark :				City:			
State: Pin Code: Nationality:								
Tel.: (O)	1 1 1 1	(R) Fax :			Mobile No).:		Ħ
Pager No.: E-mail:								Ħ
								H
Permanent Address :					Cit.			Н
	Landmark : L				City:			=
State:	Pin Code	:		Tel.:				Ш
Other Details (Please Tick)								
Sex : Male Female Marital Status :	Single Marr	ied N	o. of Children	:		No. of Deper	ndents :	
Education: SSC / HSC Graduate Post Graduate	e institut e	e / University	·: 🔲					П
PAN Card No.: Passport No				ort Expiry D	ate :]/ []/		
Voter's ID Card No.:		g Licence No		TÍÍ				П
Occupation : Doctor Lawyer CA MBA		thers (speci						Ħ
House Owned by: Self-Owned Rented / Self-Lease			Parents	Paying Gu	ıest			
If Rented / Self-Leased, the Monthly Rent Is Rs.:				at Current F	-			\Box
Vehicle(s) Owned : Yes No If yes, please provide	lo other details							ш
Tes Tito II yes, preuse provie	o. of Vehicle(s) Ow	med ·				Hypothecate	ed : Yes N	0
	o. or vehicle(3) ow		do 2]/		•
Vehicle 1 Model :		Vehic						7
								i
Make : L L L L L L L L L L L L L L L L L L		Make						1
Year of Purchase :			of Purchase					╣
Hypothecated to :		Нурс	thecated to	: 🗆 🗆				_
	Со-арј	plicant Det	ails					
Co-applicant : Yes No If Yes, whether :	Spouse Parer	nts Oth	ers (please sp	ecify) :				
Name of the								
Co-Applicant: Title Surname (Note: For Co-applicant cases, please fill the separate Co-applicants		t Name			Middle Nam	e		
If Salaried, Type of Organisation : Govt. ,	Employment Public Sector	t / Busines	s Details Pvt. Ltd.		Public Ltd.	[MNCs	
If Self-Employed, Type of Organisation : Pvt. Ltd	d. Public Ltd	. Part	nership F	Proprietorsh	ip Othe	ers (specify) :		
Name of Current Employer / Business :								
Office Address :								\Box
Office Additions .			++++		City .			Щ
	Landmark :			To! '	City:	<u> </u>	Fvt	H
State:	Pin Code	-		Tel. : (0	<i>-</i> //		Ext.:	\dashv
Fax : Mobile No.:		E-n	nail :					\sqcup

Date of joining (for salaried individuals) : DD: MM: YYYY: Designation : No. of Years in Current Employment / Business : Type of Business : In case Self-Employed, please provide the business commencement date : DD:

Name & Address of Previous Employer / Bus City: State: Designation:	Pin Code :	Tel.: (O) : rs in Previous Employment / Busines	55:
Name of the Spouse : She is He / She an Earning Member ? If Yes, pleat Office Name & Address : She is the interval of the Spouse is the Spouse is the interval of the Spouse is the interval of the Spouse is the Sp	Spouse Des	Date of Birth : Di	D:MM:
Salaried Gross Monthly Salary : (Rs.) Net Monthly Salary : (Rs.) Other Income (If any) : (Rs.) Investment in Shares / Units / Bank Deposit Total Investment In Value : (Rs.)	Financial De	Self-employed Gross Monthly Income : (Rs.) Net Monthly Income : (Rs.) Other Income (If any) : (Rs.)	es No
	Bank and Credit C	ard Details	
	Bank 1 - Primary	Bank 2	Bank 3
Bank Name			
Bank Branch			
Account Type			
Account No.			
Estimated Balance in all Accounts : (Rs.) Do you have Credit Cards ? Yes	No If yes, no. of Credit Cards :	As on dated : DE	Card 3
Visa / Master Card / Amex / Diners Club / Others			
Name of the Bank			
Card No.			
Valid from (mm/yy)			
Valid upto (mm/yy)			
Type of Card			
Credit Limit			
Credit Outstanding			
Do you have any other Existing Loan(s) ?	Loan Servicing Yes No (If yes, please provide	Details e the following details)	
Loan 1 Loan Type : Name of Financier : Monthly Instalment : Loan Amount : Current Outstanding : Balance Months to go : Date of Loan Availed : Purpose of Loan : Have any additional Loan(s) Servicing ?	Yes No	Loan 2 Loan Type : Name of Financier : Monthly Instalment : Loan Amount : Current Outstanding : Balance Months to go : Date of Loan Availed : Purpose of Loan : Total Monthly Debt Service	amount : Rs.

Loan Request
Loan Amount Requested : Rs. Tenure Requested : (Months) EMI : (Rs.)
Mode of receiving Processing Fees: By Cheque Deduct from Disbursement Amount
Upfront Processing Fees : (Rs.) Cheque No. : Date of Receipt :
Drawn on : No. of Upfront Instalment(s) :
Payment To: Customer Bank (In case of Takeover Cases) Other (specify):
Credit in A/c (AXIS Bank customers only)
No. of PDCs Received : Date of PDCs 5 th 20 th
PDCs No.: Bank Name / Address :
PDCs No.: Bank Name / Address :
PDCs No.: Bank Name / Address :
Guarantor Details The of Currenter - Undividual Corporate - Polationship with Applicant - Polati
Type of Guarantor: Individual Corporate Relationship with Applicant:
Name of Guarantor : Date of Birth : DD: MM: YYYY: YYYY:
Residence Address:
City:
State : Pin Code : Tel. : (O) (R)
Fax : Pager No.: E-mail :
Office Address :
State :
Fax: Pager No.: F-mail: F-mail:
Designation: No. of Years in Current Employment / Business: No. of Years in Current Employment / Business:
In case Self-Employed, please provide the business commencement date : DD: MM: YYYY: Stress Manual Turneyor (Pa)
Gross Monthly Salary / Income : (Rs.) Gross Annual Turnover : (Rs.)
Net Monthly Salary / Income : (Rs.) Net Monthly Income : (Rs.)
Investment in Shares Bonds / Units Bank Deposits NSC Others (Please specify):
Total Investment In Value : (Rs.) Bonds / Units Bank Deposits NSC Others (Please specify) : Yes No
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No Would you like to avail of any other facility offered by the Bank ? Yes No If yes, Please tick on relevant boxes.
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No Would you like to avail of any other facility offered by the Bank ? Yes No If yes, Please tick on relevant boxes. Personal Power Power Power Power Study Power Financial Advisory Services
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No Would you like to avail of any other facility offered by the Bank ? Yes No If yes, Please tick on relevant boxes. Personal Power Power Power Power Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No Would you like to avail of any other facility offered by the Bank ? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services iConnect TM International Debit Card Medical Equipment
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No Would you like to avail of any other facility offered by the Bank ? Yes No If yes, Please tick on relevant boxes. Personal Power Power Power Power Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No Would you like to avail of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services iConnect TM International Debit Card Medical Equipment Card Power Asset Power
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No Would you like to avail of any other facility offered by the Bank ? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services iConnect TM International Debit Card Medical Equipment
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No Would you like to avail of any other facility offered by the Bank ? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services iConnect TM International Debit Card Medical Equipment Card Power Asset Power Security Document Details Security Document: Date of Purchase : Date of Purc
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No Would you like to avall of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services iConnect TM International Debit Card Medical Equipment Card Power Asset Power Security Document : Date of Purchase: Security Document: Date of Purchase: Security Document: Date of Purchase:
Total Investment In Value : (Rs.) Are you a Tax Payer ? Yes No Would you like to avail of any other facility offered by the Bank ? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services iConnect TM International Debit Card Medical Equipment Card Power Asset Power Security Document Details Security Document: Date of Purchase : Date of Purc
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No Would you like to avall of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services iConnect TM International Debit Card Medical Equipment Card Power Asset Power Security Document : Date of Purchase: Security Document: Date of Purchase: Security Document: Date of Purchase:
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No Would you like to avail of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services IConnect TM International Debit Card Medical Equipment Card Power Asset Power Security Document: Ref. No.: Date of Purchase: Security Document: Date of Purchase: Security Document: Date of Purchase: Date of Purchase: Security Document: Security Document: Date of Purchase: Security Document: Securit
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No Would you like to avail of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Deposits Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services Iconnect International Debit Card Medical Equipment Security Document: Ref. No.: Date of Purchase:
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No Would you like to avail of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services IConnect™ International Debit Card Medical Equipment Security Document: Ref. No.: Date of Purchase: Total Value of Securities given: Rs.
Total Investment In Value: (Rs.) Are you a Tax Payer? Yes No Would you like to avail of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/C Current A/C Finansh 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services IConnect TM International Debit Card Medical Equipment Security Document Security Document Ref. No.: Date of Purchase: Security Document: Ref. No.: Date
Total Investment In Value: (Rs.)
Are you a Tax Payer? Yes No Would you like to avail of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services IConnect™ International Debit Card Medical Equipment Card Power Asset Power Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Ref. No.: Ref. No.: Security Document : Ref. No.: Ref. No.: Ref. No.: Security Document : Ref. No.: Ref. No.: Ref. No.: Ref. No.: Security Document : Ref. No.:
Total Investment In Value: (Rs.)
Are you a Tax Payer? Yes No Would you like to avail of any other facility offered by the Bank? Yes No If yes, Please tick on relevant boxes. Personal Power Power Homes Consumer Power Power Drive Study Power Financial Advisory Services Savings A/c Current A/c Encash 24 Fixed Deposits Recurring Deposits Salary Power Business Classic NRI Services Depository Services IConnect™ International Debit Card Medical Equipment Card Power Asset Power Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Date of Purchase : Security Document : Ref. No.: Ref. No.: Ref. No.: Security Document : Ref. No.: Ref. No.: Ref. No.: Security Document : Ref. No.: Ref. No.: Ref. No.: Ref. No.: Security Document : Ref. No.:
Total Investment In Value: (Rs.)

				urse Deta				
			(To be filled	by DSA / B	ane Officer)			
Name of Course :				Щ				
Ouration of Course :			Commencement D	Date :		Expected C	ompletion Date	:
Place of Course :	within India	Abroad						
Name of Institute / Co	llege / Univer	rsity:						
Address of Institute / C								
adress of institute / c	Jonege / Cinv	Tersity:						
City:			State :				Pin Code :	
Country :			Tel.:			Fax :		
Break-up of Expected								
	ution /	Examination /	Books /		Maintenance Exp			Insurance
•		Other Recurring	Stationery /	Rent	Board	Clothes Su	ındries	Premia
	Fees	Fees	Equipments					
1st year Course								
2nd year Course								
3rd year Course								
4th year Course 5th year Course								
			(A) : Rs.		<u> </u>			
Expected Total Cost Less : Non-repaybale	Scholarshin		(B) : Rs.					
Repayable Loan Scho		her financial assist						
Funds available from			(D) : Rs.			(E) : Rs.		
Loan Amount Recom	ımended (a-e	2)			·	Rs.		
Academic / Other Q	ualications :							
Qualication	Subject	Institute Name and Address			Month and Year		(%)	Class
					of Passing	Obtained	Obtained	
	<u> </u>							
Date :								
Place :								
			Applicant's Signa	ture			OSA / Bank Offic	er Stamp and Signature
			Acknowleddment fo	r Receint	of Application fo	rm		
Date			Acknowledgment fo	r Receipt	t of Application for	rm		
Date:			Acknowledgment fo	r Receipt	of Application fo	rm		
Date:			Acknowledgment fo	r Receipt	t of Application for	rm		
			Acknowledgment fo	r Receipt	of Application for	rm		
			Acknowledgment fo	r Receipt	t of Application for	rm		
To							lacs.	
AXIS Bank Ltd. has r	received your	application for a _		loar	n of Rs			completed application.
AXIS Bank Ltd. has r	received your quire a proces	application for a _		loar	n of Rs			completed application.
AXIS Bank Ltd. has r	received your quire a proces	application for a _	oximately	loar	n of Rs			completed application.