

PRELIMINARY CREDIT FACILITY APPLICATION FORM iSMART Domestic Educational Loans iSMART International Educational Loans Please Affix Please Affix Education Loans (Excluding iSMART Institutes) Recent Recent PO Program Education Loans Passport size Passport size Photograph Photograph Date: (Self attested) (Self attested) Loan Amount Required : 1 2 For Bank Use Only Existing Relationships with ICICI Group Update Application Type* ___ New Loans Credit Card Bank Account **KYC Number** Account Type* Normal Simplified(for low risk customers) SOL ID RM Name Ref. by Employee No. DSA name DSE name CRM ID DSA Code **Channel Name** Ref by PB/ VB/ SALARY/ WEALTH/ BLG/ BRANCH/ FOREX Personal Details of the Applicant (for students) Middle Name Prefix First Name Surname Name Father's / Spouse Name Mother's Name Applicant's Maiden Name Y Gender: ☐ Male ☐ Female ☐ Transgender Marital status: Married Single Others Date of Birth Professional Diploma Holder Under Graduate/ Matriculate Education: **Customer Category:** General SC ST OBC MBC Others Religion: Muslim Sikh Zoroastrian Christianity **Current Address** State Code City/ Town/ Village Nearest Landmark Permanent Address STD Code Nearest Landmark City/ Town/ Village Location Category: Rural Email ID Mobile No. ☐ Foreign National Residential status: Resident Individual **Course Details** Institution/ University(N) Name of the Course Country: Mths **Duration of Course** Level of Course: Graduate Post Graduate Professional Diploma Date of commencement of course

Course Approved by: UG	Govt. AICTE Other Course Stream: Medical Engineering	Management Others			
Type of course: Part tim	E Full time Executive				
Education Loan Detail					
COURSE COST DETAILS	FUNDS AVAILABLE DETAILS				
Tuition Fees	Own Source				
Examination Fees	Scholarship				
Cost of Study Materials	Others				
Traveling Expenses					
Others if any	TOTAL 2				
TOTAL 1	GRAND TOTAL (TOTAL 1 + TOTAL 2)				
Applicant Occupation	A Detaile				
Applicant Occupation					
Occupation: Salar	1 3 1	d U Others			
Employer / Business Detail Designation _	Exp. in Current job/ Business Yrs MonthsTotal Exp. in	n job/ Business YrsMonths			
Emp. ID	Previous Employers Name				
Comp. / Employers(N)					
Company/ Employers					
Address					
City	PIN Co				
City State	Count				
Tel(0)	Mobile C				
Personal Details of the Co-applicant					
i ci sonai Details di til	e Co-applicant				
r craonar Details of th	Prefix First Name Middle Name	Surname			
Name	•••	Surname			
	•••	Surname			
Name	•••	Surname			
Name Father's / Spouse Name	•••	Surname			
Name Father's / Spouse Name Mother's Name	Prefix First Name Middle Name	Surname			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name	Prefix First Name Middle Name				
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth	Prefix First Name Middle Name	tatus: Married Single Others			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education:	Prefix First Name Middle Name	tatus: Married Single Others			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education:	Prefix First Name Middle Name	tatus: Married Single Others			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Pin Pin			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Pin Pin			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is:	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Pin Pin			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is: No. of years at above residen	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Pin Pin			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is: No. of years at above resider Residence type:	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is: No. of years at above resider Residence type:	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is: No. of years at above resident Residence type: Permanent Address Nearest Landmark City/ Town/ Village	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Code Pin Tel Pin Code Code Code Pin Code Code Code Code Code Code Code Code			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is: No. of years at above resider Residence type: Permanent Address	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Code Pin Tel Code Pin Tel Tel Tel Tel Tel Tel Tel Te			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is: No. of years at above resident Residence type: Permanent Address Nearest Landmark City/ Town/ Village	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Code Pin Tel Code Pin Tel Tel Tel Tel Tel Tel Tel Te			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is: No. of years at above resident Residence type: Permanent Address Nearest Landmark City/ Town/ Village Mobile No.	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Code Pin Tel Code Pin Tel Tel Tel Tel Tel Tel Tel Te			
Name Father's / Spouse Name Mother's Name Co-applicant's Maiden Name Date of Birth Education: Current Address City/ Town/ Village Nearest Landmark Residence is: No. of years at above resider Residence type: Permanent Address Nearest Landmark City/ Town/ Village Mobile No. No. of Dependents	Prefix First Name Middle Name	tatus: Married Single Others er Graduate/ Matriculate Code Pin Tel Code Pin Tel Tel Tel Tel Tel Tel Tel Te			

PAN/ GIR No. of First Applicant																						
Form 60/61 Declaration (to be filled in by those who do not have either PAN or GIR)																						
PAN Card (Applicant) PAN Card (Co-Applicant) PAN Card (Co-Applicant)																						
Occupational Details																						
Occupation: S	alaried	Self emplo	yed/ Busine	ss [S	Self emp	oloyed	l profes	ssional			Retir	ed		Otl	hers .						
Employer / Business D	etails																					
Designation	E	xp. in Curre	nt job/ Busin	ess		Yrs		Jonths		_Tota	al Exp	p. in j	job/ E	Busir	ness.		Yı	S	N	onth	าร	
Emp. ID	Previous Employers Name																					
Comp. / Employers(N)																						
Company/ Employers																						
Address																						
							_			_			_	<u> </u>						_ L		
Landmark							_				_ _								<u> </u>			
City L							_			_	_		Code						_			
State							╬				╡.		untry						_	<u> </u>	<u> </u>	
Tel(0) Official e-mail ID							╁					Mobile Other		lL	inco	 ma			L_	_	_	
Г	Self Own					D-1-4:						\neg		uny								_
Office Ownership		ea L	_ Parental			Relativ	es		Rental			Pa	agdi				ther	S				
Assets & Liabilitie	es																					
Assets	Applica		Co-appl				abiliti						Appli	ican	ıt			Co-a	pplic	ant		
D 1 D 1	Bank1	Bank 2	Bank1	Ba	nk 2			.oan Ba														
Bank Balance								oan Ar														\dashv
BB Amount Bank Deposit								/ PL Ba														\dashv
BD Amount							L Ban	/ PL Ar	lount													\dashv
Immovable properties								on Loa	n Amo	unt												\dashv
Mutual Funds						С	redit (Cards														\exists
Others						0	thers															
Bank Account det	alls																					
Particulars	.ans		Applicar	nt								Co-ap	nnlica	ant								
Account number			пррпса	11								oo a _k	эрпсс	unt								
Type																						_
Name of the bank																						_
Bank Branch																						
	offered																					
Details of security offered																						
Security offered : Yes No																						
Type of Property: Residence Commercial Plot FD Others Specify																						
Project approved by ICICI Bank, Yes No																						
Property Owned by _	Property Owned by Current Value																					
Address																						
Proof of Address (POA) Applicant																						
CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Certified copy of any one of the following POA needs to be submitted)																						
Address Type Residential / Business Residential Business Registered Office Unspecified																						
Proof of Address Aadhar* Driving licence Passport Voter ID Card NREGA Job Card Other																						
	Simplified M	-																				
(*c	(*other OVDs are applicable only where the address mentioned in Aadhaar is not the current address of the customer)																					

Proof of Identity (POI)(Certified Copy of anyone of the following POI ne	eeds to be submitted)			
	APPLICANT	CO-APPLICANT			
A - Aadhar No.*	* other OVDs are applicable only where the address mentioned in Aadhaar is not the current address of the customer	* other OVDs are applicable only where the in Aadhaar is not the current address of the			
B - Voter ID Card					
C - PAN Card					
O TANY GUITA	or Form 60 Form 61	or Form 60 Form 61			
E - Passport Number					
Expiry Date	DD MM YYYY				
D - Driving Licence Expiry Date					
F- NREGA Job Card					
Z - Other					
Identification Number					
S - Simplified	Document Type code	Document Type code			
Measures Account Identification Number					
Proof of Address (POA)					
CURRENT / PERMANENT / OVE	RSEAS ADDRESS DETAILS (Certified copy of any o	one of the following POA needs to be s	submitted)		
Address Type Reside	ential / Business Residential Busines	s Registered Office Uns	specified		
Proof of Address Aadha	r* Driving licence Passport	Voter ID Card NREGA Job (Card Other		
Simpli	ified Measures account - Document Type code 🗌				
	VDs are applicable only where the address mention		ess of the customer)		
	ce /local address): State/U T code : ISO 316	•			
Permanent address: State/U.T code: S0 3166 Country code: Overseas Address: ISO 3166 Country code: S1 20 2166 Country code					
	SIDENCE FOR TAX PURPOSES IN JURISDICTION(S)				
Place / City of Birth	60 3166 Country code of Jurisdiction				
iax identification Number of eq	uivalent (if issued by jurisdiction)	ISO 3166 Country	Code of Birth []		
Reference					
1. Name		Relationship			
Address					
E-mail ID		Phone			
(Preferably friend/	colleague) 				
Address Address		Relationship			
E-mail ID					
	eference should be relative)	Phone			
Checklist Of Document	Sharing				
Applicant	Co-Applicant	Additional Co-Applicant	Guarantor		
2 Color Photos	2 Color Photos	2 Color Photos	2 Color Photos		
Photo ID	Photo ID	Photo ID	Photo ID		
Residence Proof	Residence Proof	Residence Proof	Residence Proof		
Date of Birth Proof	Date of Birth Proof	Date of Birth Proof	Date of Birth Proof		
Signature Verification	Signature Verification	Signature Verification	Signature Verification		
Academic Documents	8 Months Bank Statement	8 Months Bank Statement	Income Proof		
Proof of Admission	Income Proof	Income Proof	Collateral Documents		
Fees Structure	Collateral Documents	Collateral Documents			
Relationship Proof		Relationship Proof			

	do hereby confirm that I have met Applicant
uthorised Signatory in person at his / her office / residence on	•
ocuments (as applicable) against original as produced by the applicant. I also	o confirm that Applicant(s) have signed this application form in my presence.
Signature of Ban	nk Official / Outsourced Executive:
eclaration	
	epresentatives to provide me/us information on various products, offers and service uding without limitation through telephone calls/ SMSs/ emails) and authorize ICIG rpose. Please tick Yes or No, as acceptable. Yes No
ommon Declarations	
/ We declare that all the particulars and information and details given/filled in this application form are true, correct, complete and up-to-date in all respects and that //We have not withheld any information whatsoever. hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, mmediately misrepresenting. I am aware that I may be held liable for it. I hereby consent to receiving information from Central KYC Registry through SMSs/ Email on the above registered number/ email address. / We confirm that no insolvency proceedings or suits for recovery of outstanding dues or monies whatsoever and/or any criminal proceedings have been initiated and/or are pending against me/us and that I/We have never been adjudicated insolvent by any court or other authority. No action nor other steps have been taken or legal proceedings started by or against me/ us in any court of law/other authorities for winding up, dissolution, administration or reorganization or for the appointment of a receiver, administrator, administrative receiver, trustee or similar officer or for my/our assets. / We declare that I/We have not made any payment in cash, bearer cheque or kind along with or in connection with this application to the executive collecting my/our application. I/ We shall not hold ICICI Bank liable for any such payment made by us to the executive collecting this application. //We understand and confirm that the Application form and all other documents submitted by me/us to ICICI Bank shall not be returned to me/us to ICICI Bank shall have the right to retain the same in accordance with ICICI Bank Ltd's internal policy and applicable laws and regulations.	 I/We authorize ICICI Bank Limited (ICICI Bank) to exchange, share or part with all the information and details relating to my/our existing loan and/or repaymen history to other ICICI group companies, banks, financial institutions, credit bureaus, statutory bodies, such other Agencies enrolled by ICICI Bank for the purpose of providing the products and services as may be required or they madeem fit and shall not hold ICICI Bank (or any of its Group Companies or its/the agents / representatives) liable for use / sharing of this information. I / We understand and acknowledge that ICICI Bank shall have the absolute discretion, without assigning any reasons (unless required by applicable law), to reject our application and that ICICI Bank shall not be responsible/liable in a manner whatsoever to me/us for such rejection or any delay in notifying me/us of such rejection and any costs, losses, damages or expenses, or other consequences, caused by reason of such rejection, or any delay in notifying musof such rejection, of our application. Except to the extent disclosed to ICICI Bank, no director or relative/near relatic (as specified by RBI) of a director of a banking company (including ICICI Bank) or arelative/near relation (as specified by RBI) of a senior officer of ICICI Bank (as specified by RBI) is: the Applicant(s), or a partner of our concern, or a trustee,member, director, manager, employee of our concern or of our subsidiary, or ourholding company, or a guarantor on my/our behalf, or holds substantial interest inour concern or my/our subsidiary or holding company. I hereby authorize ICICI Bank to validate my Aadhar details from UIDAI.
SPECIMEN SIGNATURE(Applicant)	SPECIMEN SIGNATURE(Co-Applicant)
	· · · · · · · · · · · · · · · · · · ·
Interest Rate *	L % per annum
Processing Fee (one time) *	
Prepayment charges *	
Other charges *	

(*subject to change as per bank discretion from time to time)

Aadhaar Updation Consent Form

The Branch Manager			Date DD MM YYYY
ICICI Bank Ltd.,			
(Branch N	lame)		
I, Mr./Ms.,	,in my capacity as a	·	thorised Signatory / Beneficial Owner of y voluntarily submit my Aadhaar number
			cified below) and / or linking / updating
Aadhaar No in the below mentioned acc	ount(s). A copy of my duly self-attested a	Aadhaar card is enclosed.	
Customer ID	Bar Code No. / Application No. / Account No.	Account Title	Type of Account
system and obtaining demographic dregarding Aadhaar; and (c) Sharing m law(s). 2 Thave been informed that: (a) my Aad purpose mentioned above or as per re 3 Thereby understand that My request f	etails (including photograph) from UIDAl y Aadhaar details with UIDAl, concerned haar details(including my demographic quirements of law; and (b) my biometric or updation of Aadhaar details will not be	Is for authenticating my identity with UIDA; (b) Use of my registered mobile number diregulatory and / or statutory authorities; and formation) shared by UIDAI will not be uninformation will not be stored by the Bander processed, if (a) Aadhaar details provided there is technical failure while authentical failure while authentic	to receive SMS alerts from ICICI Bank as may be required under applicable used for any purpose other than the k.
	to mismaterior my details with old u, (of there is teermieum undre write uuthenti	outing rudinadi details with oldri.
Sincerely,			
Cinnetine of the Assellment holds			
Signature of the Aaadhar holder	•		
Enclosure: Copy of duly self-attested		0 -	
		·	
Acknowledgment Receip	t		
To,			
ICICI Bank has received your applica			multipotion forms with moneyints documents
In case of queries, please contact:	иг аррисацоп шау таке ирто 15 Могкіг	ig days after receipt of the completed a	pplication form with requisite documents.
Relationship Manager	Number		
Sales Executive/ DSA			
Email-ID		or contact our customer	Authorised Official care

ANNEXURE (Co-Applicant/ Guarantor)

	Prefix First Name Middle Name Surname	
Name		
Father's / Spouse Name		
Mother's Name		
Date of Birth	D D M M Y Y Y Y Gender: Male Female Transgender Marital status: Married Single Other	rs
Education:	Post Graduate Professional Diploma Holder Graduate Under Graduate/ Matriculate	
Current Address		
City/ Town/ Village	District State Code Pin Pin	
Nearest Landmark	STD Code Tel Tel	
Residence is:	☐ Self-owned ☐ Rented ☐ Company provided ☐ Other	
No. of years at above resid		
Residence type:	□ Bungalow(B) □ Row House(R) □ Flat(F) □ Other(O) □	
Permanent Address		
	District State Code Pin Pin	
Nearest Landmark	STD Code Tel Tel	
City/ Town/ Village	Location Category: Rural Semi-urban Urban Metro)
Mobile No.	Email ID	
No. of Dependents	Alternate E-mail ID	
Gross Income		
Relationship with applicant	t: Father Mother Brother Spouse Sister Others	
Residential status:	Resident Individual NRI PIO Foreign National UID No.	
Occupational Details		
Occupation Salar	ried Self employed/ Business Self employed professional Retired Others	_
Employer / Business De Designation	etails Exp. in Current Job/ Business Yrs MonthsTotal Exp. in Job/ Business YrsMonth:	21
Emp. ID	Previous Employers Name	J
Comp. / Employers(N)	Trevious Employers Name	٦
comp. / Employers(N)		
Company/ Employers		1
Company/ Employers Address		
Company/ Employers Address		
Address		
Address Landmark	PIN Code Country	
Address Landmark City		
Address Landmark City State	Country Country	
Address Landmark City State Tel(0)	Country Country	
Address Landmark City State Tel(0) Official e-mail ID Office Ownership	Self Owned Parental Relatives Rental Pagdi Others	
Address Landmark City State Tel(0) Official e-mail ID	Self Owned Parental Relatives Rental Pagdi Others	
Address Landmark City State Tel(0) Official e-mail ID Office Ownership PAN/ GIR No. of Co-a	Country Mobile Pagdi Others Applicant / Guarantor Form 60/61 Declaration (to be filled in by those who do not have either PAN or GIR)	
Address Landmark City State Tel(0) Official e-mail ID Office Ownership PAN/ GIR No. of Co-a PAN Card Bank Account details	Country Mobile Pagdi Others Applicant / Guarantor Form 60/61 Declaration (to be filled in by those who do not have either PAN or GIR)	
Address Landmark City State Tel(0) Official e-mail ID Office Ownership PAN/ GIR No. of Co-a PAN Card Bank Account detail: Particulars	Country Mobile Pagdi Others Applicant / Guarantor Form 60/61 Declaration (to be filled in by those who do not have either PAN or GIR)	
Address Landmark City State Tel(0) Official e-mail ID Office Ownership PAN/ GIR No. of Co-a PAN Card Bank Account details Particulars Account number	Country Mobile Pagdi Others Applicant / Guarantor Form 60/61 Declaration (to be filled in by those who do not have either PAN or GIR)	
Address Landmark City State Tel(0) Official e-mail ID Office Ownership PAN/ GIR No. of Co-a PAN Card Bank Account details Particulars Account number Type	Country Mobile Pagdi Others Applicant / Guarantor Form 60/61 Declaration (to be filled in by those who do not have either PAN or GIR)	
Address Landmark City State Tel(0) Official e-mail ID Office Ownership PAN/ GIR No. of Co-a PAN Card Bank Account details Particulars Account number	Country Mobile Pagdi Others Applicant / Guarantor Form 60/61 Declaration (to be filled in by those who do not have either PAN or GIR)	

Proof of Identity (POI)	Co-applicant / Guarantor
(Certified copy of any one of the following POI needs to be submitted)	
	ddress mentioned in Aadhaar is not the current address of the customer)
B. Voter ID Card	C. PAN Card*
D. Driving Licence	Expiry Date DD MM YYYY
E. Passport Number Expiry Date Expiry Date	
F. NREGA Job Card	
Z. Other (any document notified by government)	entification Number
S. Simplified Measures Account- Document Type Code	entification Number
D (. (A 11 (DOA)	
Proof of Address (POA)	Co-applicant / Guarantor
CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Certified copy of any one of the following	
	stered Office Unspecified
Proof of Address Aadhar* Driving licence Passport Voter ID Card Simplified Measures account - Document Type code	d NREGA Job Card Other
(*other OVDs are applicable only where the address mentioned in Aadhaar is	s not the current address of the customer)
Current address (correspondence /local address): State/U T code : ISO 3166 Country code:	
Permanent address : State/U.T code: ISO 3166 Country code: Overseas Address: I	
TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA	
	code of Jurisdiction of Residence
Tax Identification Number or equivalent (if issued by jurisdiction)	ISO 3166 Country Code of Birth
Details of the Charges	
Interest Rate *	L% per annum
Processing Fee (one time) *	
Prepayment charges *	Nil
Other charges *	
(*subject to change as per bank discretion from time to time)	
Deference	0 " 1/0 1
References	Co-applicant / Guarantor
1. Name	Relationship
Address Address	
E-mail ID	Phone Phone
(Preferably friend/ colleague)	
2. Name*	Relationship
Address	
E-mail ID (*Compulsory one reference chould be relative)	Phone Phone
(*Compulsory one reference should be relative)	
Please Affix	
Recent	SPECIMEN SIGNATURE(Applicant)
Passport size	, ,
Photograph (Self attested)	
	SPECIMEN SIGNATURE
3	(Co-applicant/ Guarantor)

KYC	Certification (To be filled by Bank Official / Sourci	ng Agent)
I	with employee ID/ VSTS Code	do hereby confirm that I have met Applicant /
Authori	sed Signatory in person at his / her office / residence on	(mention date) and confirm that I have verified the
copies	of documents (as applicable) against original as produced by the ap	pplicant. I also confirm that Applicant(s) have signed this application form in my
presend	ce. Signature of Bank (Official / Outsourced Executive:
Decla	ration	
I/We ha	ve no objection to ICICI Bank Limited, its group companies, agents/re	epresentatives to provide me/us information on various products, offers and service
provide	d by ICICI Bank Limited/its group companies through any mode (incl	luding without limitation through telephone calls/ SMSs/ emails) and authorize ICIC Yes No
1. I/W	non Declarations /e declare that all the particulars and information and details given/filled	7. I / We authorize ICICI Bank Limited (ICICI Bank) and all its group
and 2. I her of the it. I SN 3. I / V outs hav nev 4. No or a diss record for I / V or col succession 6. I / V doc	is application form are true, correct, complete and up-to-date in all respects of that I/We have not withheld any information whatsoever. The best my knowledge and belief and I undertake to inform you of any changes are in, immediately misrepresenting. I am aware that I may be held liable for hereby consent to receiving information from Central KYC Registry through the reby consent to receiving information from Central KYC Registry through the solven registered number/email address. We confirm that no insolvency proceedings or suits for recovery of standing dues or monies whatsoever and/or any criminal proceedings to be been initiated and/or are pending against me/us and that I/We have been eadjudicated insolvent by any court or other authority. The action nor other steps have been taken or legal proceedings started by gainst me/us in any court of law/other authorities for winding up, colution, administration or reorganization or for the appointment of a server, administration or reorganization or for the appointment of a server, administrator, administrative receiver, trustee or similar officer or my/our assets. We declare that I/We have not made any payment in cash, bearer cheque kind along with or in connection with this application to the executive lecting my/our application. I / We shall not hold ICICI Bank liable for any chipayment made by us to the executive collecting this application. We understand and confirm that the Application form and all other uments submitted by me/us to ICICI Bank shall not be returned to fus and ICICI Bank shall have the right to retain the same.	companies and their agents to exchange, share or part with all the information and details relating to my/our existing loans and/or repayment history to other ICICI group companies, banks, financial institutions, credit bureas, agencies, statutory bodies etc. as may be required or as they may deem fit and shall not hold ICICI Bank (or any of its group companies or it their/ agents/ representatives) liable for use / sharing of this information. 8. I / We understand and acknowledge that ICICI Bank shall have the absolute discretion, without assigning any reasons (unless required by applicable law), to reject our application and that ICICI Bank shall not be responsible/liable in any manner whatsoever to me/us for such rejection o any delay in notifying me/us of such rejection and any costs, losses, damages or expenses, or other consequences, caused by reason of such rejection, or any delay in notifying me/us of such rejection, of our application. 9. Except to the extent disclosed to ICICI Bank, no director or relative/near relation (as specified by RBI) of a director of a banking company (including ICICI Bank) or a relative/near relation (as specified by RBI) of a senior officer of ICICI Bank (as specified by RBI) is: the Applicant(s), or a partner of our concern, or a trustee, member, director, manager, employee of our concern or of our subsidiary, or our holding company, or a guarantor on my/our behalf, or holds substantial interest in our concern or my/our subsidiary or holding company. 10. I hereby authorize ICICI Bank to validate my Aadhar details from UIDAI.
	SPECIMEN SIGNATURE(Applicant)	SPECIMEN SIGNATURE(Co-Applicant/ Guarantor)