



Applicant Name -

Verification - Workplace / Business

Product Name:

Applicant Details

Name: _____ CNIC #: _____

Co-Applicant Details

Name: _____ Contact #: _____

CNIC #: _____

Office Name: _____ Designation: _____

Office Address: _____

Nearest Landmark: _____

GPS Location: _____

GPS URL: _____

Office Address Details

Was Actual Address Same: _____ Established Time: _____

Correct Address: _____

Works at Given Address: _____ Joining Date: _____

New Address: _____

Was Co-Applicant Available: _____ Reason: _____ Name of Person Met: _____

CNICOS: _____ CNIC #: _____ CNIC # of Person Met: _____

Work Office Details

Type of Business: _____ Other Type of Business: _____

Co-Applicant is a: _____ Mention Other: _____ Mention Rent: _____

Nature of Business: _____ Other Nature of Business: _____

Business Legal Entity: _____ Government Employee: _____

Name Plate Affixed: _____ Size (Approx Area): _____

Business Activity: _____ No. of Employees: _____

Business Established Since: _____ Line of Business: _____

Market Check One

Neighbor's Name: _____

Neighbor's Address: _____

Knows Co-Applicant: _____ Knows {@ApplicantHeading} _____

Neighbor's Comments: _____

Business Established Since (Market Check): _____

Market Check Two

Neighbor's Name: _____

Neighbor's Address: _____

Knows Co-Applicant: _____ Knows {@ApplicantHeading} _____

Neighbor's Comments: _____

Business Established Since (Market Check): _____

Verification Officer: _____ QC Officer: _____

General Comments:

Result of Verification:

*N/A = Not Applicable

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