

## Application Form

# Yuvaan Micro India Foundation

Applicant Id.....

Advisor Name.....अमित

Date: 6-11-22

### ABOUT ME

Title Mr. ☐ Ms. ☐ Mrs. ☐

Name

रशीद

Father's Name

शकुल

Aadhaar No.

540727714169

Customer Address:

मुस्लिम गली न वार्डन देवली



### MY REQUIREMENTS

Loan amount Required for Rs.

20  
10000

Loan Tenure Required (Days/Months)

100 Day

### RESIDENCE ACCOMODATION

- **OWNERSHIP** ☐ Company Provided ☐ Rental ☐ Parents/ Relatives  
☐ Self owned ☐ Other

### ADDRESS DETAILS

- **Permanent Residential Address**

मुस्लिम गली न वार्डन देवली टोक राजस्थान डोगली कांलोरी

PINCODE

CITY

State

304804

देवली

राजस्थान

20000 - 1200 - 1200 = 17600/-  
list file