

Application Form

Yuvaan Micro India Foundation

Applicant Id.....

Advisor Name.....

Date: 12-1-2021

ABOUT ME

Title Mr. ☐ Ms. ☐ Mrs. ☐

Name

कमल मिश्र



Stick across your
Applicant and
(r)

Father's Name

बुल्लु शर्मा शर्मा देव गौडा

Aadhaar No.

966635380949

Customer Address:

काली पल्लव काली पल्लव रोड

MY REQUIREMENTS

Loan amount Required for Rs.

10000-

Loan Tenure Required (Days/Months)

100- - -

RESIDENCE ACCOMODATION

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

ADDRESS DETAILS

- Permanent Residential Address**

कमल मिश्र बुल्लु शर्मा शर्मा देव गौडा काली पल्लव रोड

PINCODE

CITY

State

306001-

बोरो

उत्तराखण्ड