Application Form

Yuvaan Micro India Foundation

Applicant Id	Advisor Name	Date: 5-11-22
ABOUT ME		
Title Mr. 🗌 M	s. Mrs.	
Name	सूत्राम वमा	
Father's Name	किलाया रेगर	nt
Aadhaar No.	823214156649	
Customer Address	: जाठीक्षासीड स्रिशेष मगर देवली	
MY REQUIREMEN	NTS	ŧ
Loan amount Rec		
Loan Tenure Red	quired (Days/Months) 100 Day	*
RESIDENCE ACCOMODATION		
• OWNERSHIP	Company Provided Rental Parents/ Relatives	
	☐ Self owned ☐ Other	
ADDRESS DETAILS	<u>s</u>	
• Permanent Re	sidential Address	
	CITY State	
304804	न देवली राजस्थान	

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