## **Application Form**

## Yuvaan Micro India Foundation

Applicant Id	Advisor Name	Date 10 16 W
ABOUT ME		
Title Mr. 🗌 Ms.	. Mrs	
Name 5	स्त्रे लि	
Father's Name	ताल खेल	ross your ilicant and
Aadhaar No.	366963492855	
Customer Address:	Bau 6 5 2 5 2 5 1 5 6 1	
MY REQUIREMENTS Loan amount Required for Rs.  2 6 0 0		
Loan Tenure Required (Days/Months)		
RESIDENCE ACCO	DMODATION	
OWNERSHIP	□Company Provided □ Rental □ Parents/ Relatives	
	☐ Self owned ☐ Other	
ADDRESS DETAIL	<u>s</u>	
Permanent Residential Address		
PINCODE		
30400	TONK	000