Application Form

Yuvaan Micro India Foundation

| Applicant Id | Advisor Name | 2dy al | | Date: 2/6/2/ |
|---|--------------|--------|--|--------------|
| ABOUT ME | | | | |
| Title Mr. Ms. Mrs. | | | The same of the sa | |
| Name | 1 Zul May | | | ross your |
| Father's Name | ्रिया विष्पा | | | olicant and |
| Aadhaar No. 434501108523 | | | | |
| Customer Address: Rain Mast Mast Miles | | | | |
| MY REQUIREMENTS Loan amount Required for Rs. | | | | |
| Loan Tenure Required (Days/Months) | | | | |
| RESIDENCE ACCOMODATION | NC | | | |
| • <u>OWNERSHIP</u> Comp | any Provided | Rental | Parents/ Relatives | |
| ☐ Self o | wned | Other | | |
| ADDRESS DETAILS | | | | |
| Permanent Residential PINCODE | Address | 1214) | State | 4 (19/ |
| 304001 | TON | R | RUSYSH | NYL |
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