

## Application Form

# Yuvaan Micro India Foundation

Applicant Id.....

Advisor Name..... (कलदीप)

Date: 21-10-29

### ABOUT ME

Title Mr. ☐ Ms. ☐ Mrs. ☐

Name

सदीप कुर्जर

Father's Name

डॉ. जसराज कुर्जर

Aadhaar No.

48 41 37 19 46 35



Customer Address:

घरियाली अजमेर राजस्थान

### MY REQUIREMENTS

Loan amount Required for Rs.

10000

Loan Tenure Required (Days/Months)

100 Day

### RESIDENCE ACCOMODATION

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

### ADDRESS DETAILS

- **Permanent Residential Address**

घरियाली अजमेर राजस्थान

PINCODE

CITY

State

305407

देवली

राजस्थान

10000 - 600 - 600 = 8800/-  
file kist