

Application Form

Yuvaan Micro India Foundation

Applicant Id.....

Advisor Name.....अंकित.....

Date: 1-1-2022

ABOUT ME

Title Mr. ☐ Ms. ☐ Mrs. ☐

Name

अबदुल हाफिज

Father's Name

मोहम्मद रफीक

Aadhaar No.

710513218184

Customer Address:

काली कालोनी देवली टोक 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**

काली कालोनी देवली टोक राजस्थान

PINCODE

304804

CITY

देवली

State

राजस्थान

10000 = 60 - 60 = 8800/-
list file