LOAN APPLICATION FORM

(Kindly fill all the columns mentioned below, otherwise the form will be invalid and be rejected)

Location:

Loan Details:

Application Date:

Employee Details:

	Emp.Code		Reason				
	Emp.Name		Proposed Amount	Rs.			
-	Department Division Designation Date of Joining		Terms of Repayment (Not more than 6				
			Months)				
			Remarks:				
	Contact No						
Previous Loan Details:							
	Loan Amount						
MMM-YY (e.g: March-14)							
	Cleared/Pending						
	Pending Amount	Rs.					
Signature of the Applicant							
Terms Procedures							
•	Should be taken or availed	d only once (1 time) a	 Loan Application must be availed from the Corporate HR Department. For Personal Marriage - Attach or enclose a 				
-	calendar year.	soine and Developed Mender					
 Only for Medical Emergencies and Personal Marria Eligibility: Should have completed at least 1 year of 			conv of a Marr	_			
 Eligibility: Should have completed atleast 1 year of Service. 			 For Medical Emergencies - Attach or enclose 				
 Guarantor : He/She should be on an equal or higher 				l Report or Medical Certificate. loan: 10 th to 20 th of every			
grade/Designation.			month, on or b				
 The loan amount shall not exceed 2 months gross salary (Basic+DA+HRA+Con+Spe. Allowance) of the employee. 			Other details ki	indly refer HR Policy			

Gourmet Popcornica LLP

Guarantor Details & Acknowledgement:							
	Employee Code						
	Employee Name						
	Division						
	Department						
	Designation						
	Contact Number						
 I hereby agree to repay the amount sum of Rs							
			Signature of G	iuarantor			
Amount A	the HOD						
For HR Use Only							
I have verified & checked the above details. I declare that the details are true.							
			Signature of S	Site HR			
Amount	Eligible : Rs.		Signature of (Corporate HR			
Amount Approved: Rs.			Head of HR				