

LOAN APPLICATION FORM

Application No. _____ Date of application

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Instructions

1. Please write all the information in BLOCK LETTERS.
2. Please do not overwrite or use correction fluid.
3. Put cross in the box wherever applicable X
4. All details must be filled in, please write NA if not applicable.
5. Please add another application form if there is more than one co-applicant in the loan.
6. Please ensure all the documents are self-attested by you.
7. Please take photocopies of all the documents that are submitted to Centrum Housing Finance Limited for your personal record.

*Applicant
Please paste
passport size
photograph here
with signature
across

Co-Applicant
Please paste
passport size
photograph here
with signature
across

| Personal Details | Applicant | Co-Applicant / Guarantor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Middle Name | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Gender | <input type="checkbox"/> M <input type="checkbox"/> F Date of Birth <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> | D | D | M | M | Y | Y | Y | Y | <input type="checkbox"/> M <input type="checkbox"/> F Date of Birth <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> | D | D | M | M | Y | Y | Y | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Pin | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> State _____ | | | | | | | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> State _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Present Accommodation | <input type="checkbox"/> Own <input type="checkbox"/> Family <input type="checkbox"/> Rented <input type="checkbox"/> Employer <input type="checkbox"/> Other | Relationship with Applicant _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No. of Years in Current Address | _____ | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mobile No. & Phone No. | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Email ID (Personal) | _____ | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Permanent Address | <table border="1" style="width: 100%; height: 40px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | <table border="1" style="width: 100%; height: 40px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Marital Status | <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Other | <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No. of dependents | <input type="checkbox"/> Children <input type="checkbox"/> Others | <input type="checkbox"/> Children <input type="checkbox"/> Others | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| CKYC No. if available | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Status | <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> PIO | <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> PIO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| Employment Details | Applicant | Co-Applicant / Guarantor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Occupation | <input type="checkbox"/> Salaried <input type="checkbox"/> Professional <input type="checkbox"/> Self-employed <input type="checkbox"/> Other _____ | <input type="checkbox"/> Salaried <input type="checkbox"/> Professional <input type="checkbox"/> Self-employed <input type="checkbox"/> Other _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Address | <table border="1" style="width: 100%; height: 40px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | <table border="1" style="width: 100%; height: 40px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Pin | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> State _____ | | | | | | | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> State _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Phone No. with STD code & Extn.

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Email ID (Official)

Work Experience (in years)

Current Total

Current Total

Company/Business Type

Public Ltd. Pvt. Ltd. Partnership Proprietor

Public Ltd. Pvt. Ltd. Partnership Proprietor

If Salaried, working for

Central govt State govt PSU MNC

Central govt State govt PSU MNC

Educational Inst Other

Educational Inst Other

Designation _____ Department _____

Designation _____ Department _____

Date of Joining

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 Retiring

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 Retiring

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If Professional

Doctor CA CS Architect Other _____

Doctor CA CS Architect Other _____

If Business

Trader Manufacturer Whole-seller

Trader Manufacturer Whole-seller

Other _____

Other _____

Date of Incorporation

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Company PAN

Registered with GST

Yes No If Yes GSTIN _____

Yes No If Yes GSTIN _____

Financial Status

Applicant

Co-Applicant / Guarantor

Gross Monthly Income ₹

| | | | | | | | | | | | | | | | | | | | |
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Net Monthly Income ₹

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Other Income ₹

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 Source _____

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 Source _____

Average Monthly Expenses ₹

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Assets

Saving bank a/c balance ₹

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Value of immovable property ₹

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Current balance in PF ₹

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Value of shares & securities ₹

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Fixed Deposits ₹

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Other Investments/Assets ₹

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Total ₹

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Existing Loans ₹

| Name of Borrower | Financer's Name | Loan/Facility type | EMI ₹ | Current Outstanding ₹ | Availed on |
|------------------|-----------------|--------------------|-------|-----------------------|------------|
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Additional Information

Bank a/c Details (Applicant & Co-Applicant / Guarantor)

| Name of Account Holder | Name of Bank | Branch | A/c type | A/c No. |
|------------------------|--------------|--------|----------|---------|
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Insurance Details (Applicant & Co-Applicant / Guarantor)

| | Policy 1 | Policy 2 | Policy 3 | Policy 4 |
|------------------|----------|----------|----------|----------|
| Holder Name | | | | |
| Issued by | | | | |
| Policy No. | | | | |
| Policy Type | | | | |
| Maturity Date | | | | |
| Sum Assured ₹ | | | | |
| Annual Premium ₹ | | | | |
| Issue Date | | | | |

Estimate of Required Funds

Purpose of Loan Home purchase Plot + Construction Self construction Upgradation Extension Business Expansion Balance Transfer
 Enhancement Refinance Plot Purchase Other _____

Property Selected Yes No

Ownership Self Joint

Locality Rural Semi-urban Urban

Construction stage Ready Under construction

Property Address

Stage of construction %

Estimated market value of property

City / Town _____

Land type Freehold Leasehold

Pin State _____

Purchased from Builder Society Resale

Land area (sq mtr) Built up area (sq mtr)

Development Authority / Housing Board Self construction

Property Residual Age yrs

Estimate of Required Funds

Estimate of Source of funds

Land cost ₹

Amount spent ₹

Agreement value ₹

Sources of own contribution

Amenities value ₹

Saving ₹

Stamp duty & Registration ₹

Disposal of assets ₹

Cost of construction /Ext/Imp ₹

Family ₹

Incidental cost (if any) ₹

Other ₹

Loan outstanding (for refinance) ₹

Total own contribution ₹

Total requirement of funds ₹

Loan Requirement ₹

Total sources of funds ₹

Preferred Mailing Address Current Permanent Office Property to be financed

Acknowledgement

Application Form No. _____ Date of Application Product _____

We confirm having received upfront login fee* of ₹ _____, favouring 'Centrum Housing Finance Limited' via cheque*/draft no. _____

drawn on _____ from Mr/Mrs./M/s. _____

In case of any queries, please contact us at our toll free number 18001036324

Telephone _____ Mobile _____ Sales Representative _____

Login Fee

| | |
|---|--------------------------------------|
| Instrument Type <input type="checkbox"/> Cheque <input type="checkbox"/> DD | Instrument Date <input type="text"/> |
| Instrument no. <input type="text"/> | Amount (₹) <input type="text"/> |
| Drawn on Bank <input type="text"/> | Branch <input type="text"/> |

Reference 1

Name

Address

City / Town

Pin State

Relationship Known since

Telephone Mobile

Email ID

Reference 1

Name

Address

City / Town

Pin State

Relationship Known since

Telephone Mobile

Email ID

Declaration

I/We apply for sanction of Loan from Centrum Housing Finance Limited ("Lender"). For the purpose of obtaining the Loan applied for, I/we declare, confirm and undertake to the Lender the following: (1) That all the particulars and information given in this application form or submitted to the Lender are true, correct, complete, and updated in all respects; (2) That there are no material and/or relevant information withheld/concealed from the Lender which would have adverse impact on credit decisions of the Lender; (3) That no insolvency or bankruptcy proceedings have been initiated against me/us nor have I/we ever been adjudicated insolvent; (4) That there has never been award or adverse judgment or a decree in a court case involving breach of contract, tax malfeasance or other serious misconduct which shall adversely affect my/our ability to repay the Loan; (5) That I/we have never been a defaulter with the Lender or any other financial institution; (6) That if any discrepancy is found or observed from the information given, the Lender shall have sole discretion to cancel sanction of Loan at any stage and/or recall the Loan if any disbursed, in such an event, the processing fee shall be liable to be forfeited; further, this is without prejudice to the Lender's right to initiate appropriate legal recourse. The Lender shall be under no obligation to refund the registration /upfront /processing /any other fee in any event; (7) That I/we shall inform Lender regarding any change in respect of the above information submitted including change in address, occupation, income, and telephone numbers etc.; (8) That I/we shall pay processing charges as applicable and charged by Lender; (9) That the security /property /assets offered by me/us for obtaining the Loan is free from any encumbrance, lien and has/have marketable title, further I/we have all rights to create charge/security interest on such security /property /assets in favour of the Lender; (10) That I/we authorize the Lender or its agent to carry out credit bureau checks, to make references and enquiries relating to information in this application form which the Lender considers necessary; (11) That I/we authorize Lender to exchange /share/ part with all information relating to my/our Loan to other banks /financial institutions /credit bureaus /agencies as may be required and shall not hold Lender liable for use of this information; (12) That I/we authorize the Lender to exchange /share/ part with all information relating to my/our Loan to third parties which may provide services that I/we may require. I/We shall not hold Lender liable for use of information by third parties and declare that I/we shall not hold the Lender liable for delivery services by such third parties; (13) That I/we shall indemnify the Lender against any loss or damage (which the Lender may suffer) as a result of any action/claim raised by such institutions or any third party for making reference, conducting investigations and/or making disclosures in terms of preceding clauses; (14) That I/we permit the Lender to contact me with respect to the products and services offered by the Lender or by any other person(s) and further allow the Lender to cross sell other products and services offered by such other person(s); (15) That I/we declare that I/we have not made any cash payment to the Direct Sales Executive / Direct Sales Agencies with regard to my/our Loan; (16) That I/we confirm to have read & understood the terms applicable for obtaining the Loan; (17) That I/we confirm that I/we have also been explained the terms applicable for obtaining the Loan in vernacular /language which I/we understand; (18) That I/we have read and understood the terms & conditions relating to Loan Scheme & hereby agree to be bound by the said terms & conditions or by the revised additional terms & conditions which may at any time hereinafter be made while the Loan availed by me/us is still outstanding; (19) That I/we have read and understood the terms pertaining to interest rate /default interest /processing fee /prepayment charges, other charges and terms of the Loan from the Lender; (20) That I/we declare whatever declared above is true and correct and can be relied on by the Lender for sanction of Loan.

| | |
|--|---|
| Applicant's signature <input type="text"/> | Co-applicant's signature <input type="text"/> |
| Date <input type="text"/> | Date <input type="text"/> |
| Place <input type="text"/> | Place <input type="text"/> |

For Office Use Only

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|--|---|-----------------------------------|
| HUB Name & Code. <input type="text"/> | Spoke Name & Code <input type="text"/> | Product <input type="text"/> |
| Source Type <input type="checkbox"/> In- House <input type="checkbox"/> DST <input type="checkbox"/> Connector <input type="checkbox"/> DSA <input type="checkbox"/> Sahayak | | Sub-Product <input type="text"/> |
| Channel / Sahayak Name <input type="text"/> | Channel Code / Lead ID <input type="text"/> | Scheme Group <input type="text"/> |
| DST/RO Name <input type="text"/> | DST/RO Code <input type="text"/> | Scheme <input type="text"/> |
| RM/SM Name <input type="text"/> | RM/SM Code <input type="text"/> | Sub-Scheme <input type="text"/> |

Fees & Charges

Please refer to the schedule of charges for the latest fees and charges updated on our website : www.chfl.co.in
Customers can also make enquiries at any branch of Centrum Housing Finance Limited.

Any GST & other Government levies as applicable on the fees and charges shall be payable by the Applicant.



Centrum Housing Finance Limited

Regd office: Unit 801, Centrum House, CST Road, Vidyanagri Marg, Kalina, Santa Cruz (East), Mumbai - 400098
www.chfl.co.in | CIN: U65922MH2016PLC273826