



Preferred Mailing Address

Current

Office

Permanent

(Pls specify the reason for this selection)

Contact Details

Tel. (Off)

Tel. (Res)

FAX

Mobile

Email ID

Proof of Identity (PoI)\*

PAN No.

UID

Voters ID

Passport No.

if passport, passport expiry date

Driving License

if DL, DL expiry date

NREGA Job Card

Others (Pls Specify)

(any document notified by the central government)

Simplified Measures Account - Document Type code

Identification Number

Proof of Address (PoA)\*

Address Type\*

Residential / Business

Residential Business

Registered Office

Unspecified

Proof of Address\*

Passport

Driving Licence

UID (Aadhaar)

Voter Identity Card

NREGA Job Card

Others (Pls Specify)

Simplified Measures Account - Document Type code

Remarks (If any)

Detail of Related Person (In case of additional related persons, please fill 'Annexure B1')

Addition of Related Person

Deletion of Related Person

KYC Number of Related Person (if available)

Related Person Type\*

Director

Promoter

Karta

Trustee

Partner

Authorised Signatory

Court Appointed Official

Beneficiary

Personal Details

Name\*

Prefix

First Name

Middle Name

Last Name

Father's / Spouse Name\*

Mother's Name\*

Mother's Maiden Name\*

Date of Birth\*

Gender

Male

Female

Transgender

Marital Status

Married

Single

Others

Citizenship\*

Indian

Others (Pls Specify)

Residential Status\*

Resident Individual

Non Resident Indian

Foreign National

Person of Indian Origin

Occupation Type\*

Service

Private Sector

Public Sector

Government Sector

Others

Professional

Self Employed

Retired

Housewife

Student

Business

Not Categorised

Proof of Identity (PoI)\*

PAN No.

UID

Voters ID

Passport No.

if passport, passport expiry date

Driving License

if DL, DL expiry date

NREGA Job Card

Others (Pls Specify)

(any document notified by the central government)

Simplified Measures Account - Document Type code

Identification Number

**Proof of Address (PoA)**

Address Type\*  Residential / Business  Residential Business  Registered Office  Unspecified  
 Proof of Address\*  Passport  Driving Licence  UID (Aadhaar)  
 Voter Identity Card  NREGA Job Card  Others \_\_\_\_\_ (Pls Specify)  
 Simplified Measures Account - Document Type code

**Preferred Mailing Address**  Current  Office  Permanent \_\_\_\_\_ (Pls specify the reason for this selection)

**Existing Loans**

Loan/Facility	Financer's Name	Account No.	Loan Amount	Tenure Months	EMI/ Interest	Commencement Date	Current Outstanding

**Bank Details**

Sr. No.	Name of Account Holder	Name of Bank	Branch	Current/Savings/OD (If OD Please Specify Limit)	Account No.	Banking Since
1.						
2.						

**Reference 1**

Name   
 Relationship  If Personal Guarantor  Yes  No  
 Current Address   
 Landmark  City   
 State  PIN   
 Landline   
 Mobile

**Reference 2**

Name   
 Relationship  If Personal Guarantor  Yes  No  
 Current Address   
 Landmark  City   
 State  PIN   
 Landline   
 Mobile

**Acknowledgement**

Application Form No. \_\_\_\_\_

Dear Sir/Madam,

This is to acknowledge that ABFL has received your application form for \_\_\_\_\_ of Rs \_\_\_\_\_  
 ABFL shall communicate its decision on your application within 15 working days. This is subject to submission of all documents and conforming to internal guidelines of ABFL. Terms and Conditions are also available on our website : [www.adityabirlafinance.com](http://www.adityabirlafinance.com)

Business Development Manager: \_\_\_\_\_ Channel Name: \_\_\_\_\_ Contact No: \_\_\_\_\_

Date: \_\_\_\_\_ Email ID: \_\_\_\_\_ Signature: \_\_\_\_\_

