

Arpico Finance Company Limited

APPLICATION FOR A PERSONAL LOAN AGAINST A FIXED DEPOSIT

THE DEPOSITOR'S REQUESTE

I the undersigned wish to obtain a loan of Rs.....
(Rs.....) payable over a period of
months, from.....to.....

As security for the aforesaid loan I pledge Fixed Deposit Certificate No.....
 Issued by Arpico Finance Co Ltd. amounting to Rs.....
(Rs.....) dated and maturing on
earning interest @.....p.a.

Signature: Date.....

INTEREST SET OFF LETTER

I hereby instruct and authorise you to deduct Rs.....being the monthly interest payable
 to you by me on the Loan agreement No.....Dated..... for
 Rs.....executed between myself and yourself "The Arpico
 Finance Company Ltd." off the interest of Rs.....due to me monthly on the
 Deposit certificate No :-.....offor Rs.....

Signature :-..... Date :-.....

OFFICIAL USE ONLY - FIXED DEPOSIT DEPARTMENT

Fixed Deposit Certificate No: -.....Interest Payment:- Maturity / Monthly

Names of the Depositor's : -.....

Date of Deposit : -..... Date of Maturity : -.....

Rate of Interest : -..... Period : -.....

Amount of the Deposit: -..... Value at Maturity: -

 Signature of the Officer Date

FOR OFFICE USE ONLY – ACCOUNTS DEPARTMENT

Details of previous Loans granted on the same Fixed Deposit Certificate No.....

Loan Nos.	Capital Outstanding	Interest Outstanding			Total Outstanding
		Int	T/T	D/L	
1.					
2.					
3.					

Balance Available :-.....

Propose Loan

4. Loan Amount + Interest + T.T
 Final Balance Available:

Recommended by

Loan Officer :-

Fixed Deposit Manager :-

Accountant :-

Approved by :-

.....
Deputy Chairman / Jt. Managing Director

.....
Jt. Managing Director

DETAILS OF THE LOAN REQUESTED

Personal Loan Agreement No: -.....

Date of Signing Agreement :-

Period of Loan :- Loan Rate :-

Deposit Certificate No.....accepted by me for safe keeping.

.....
Signature
(Officer Incharge of Lien Certificates)

.....
Date

Loan Payment Details: -

Mode of payment :- Cash / Cheque

Account payee only.
All Crossing Cancelled

Chq.No: -.....

Amount: -.....

Bank :-

Branch :-

Date :-

Cash/Mode of payment: Bank/All crossings
Cancelled.

Signature :-.....
Accounts Department Officer.

Date: -.....

Signature :-.....
Accountant

Date :-.....