



**YES MICRO CREDIT REVOLVING LOAN
APPLICATION FORM**

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Type of loan: Individual Group

1. Detail of loan applicant

a) Name: DOB: Age:
S/o, D/o RC. No. GB No.
Contact No: Address:
.....

b) Name: DOB: Age:
S/o, D/o RC. No. GB No.
Contact No: Address:
.....

c) Name: DOB: Age:
S/o, D/o RC. No. GB No.
Contact No: Address:
.....

2. Purpose of the Loan:

3. Enterprise location address:

4. Background Information: (Enterprise/Business plan):
.....
.....
.....

5. Financial plan:

Total budget required to start the enterprise Rs.

Own investment in the enterprise: Rs.

(It should be more than 15% of the total budget)

Loan required: Rs.

Loan Refund Duration:

Loan along with interest will be fully repaid within..... Years and..... Months starting from the day of issue of loan.

Applicant's Signature:

Verified by: (Office Accountant)

a)

Approved by:

b)

.....

c)

Settlement Officer
(Seal & sign)



Please note: *Submission of incomplete form will result in delay or rejection of loan approval*