

APPLICATION FOR OVERDRAFTS AND LOANS AGAINST DEPOSITS

Name of the Company	
Account No.	
Addresses of the Company	
Business Registration No	
Name of the Directors	
NIC/PP No/s of the Directors	
Contact No/s of the Company	
Email addresses of the Company	
Type of facility	Overdraft / Loan
Amount	
Purpose of the facility	
Repayment period	
Type of the security	
Amount of the security	
Name of the Security Provider	

We hereby confirm that the details furnished above are true and accurate and no material information have been willfully withheld in completing this application

...... •••••• Director Director/Company Secretary or

Authorized Signatory Company Seal

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Date :

(to be signed by Authorised Signatories / two Directors / one Director and the Company Secretary)