The UCMS Employee's Co-Op. Thrift & Credit Society Ltd.

UCMS & GTB HOSPITAL, DILSHAD GARDEN, DELHI – 110 095

(Regd. No. 544-U)

APPLICATION FOR LOAN

The President/Secretary,
The UCMS Employee's Co-Op. Thrift & Credit Society Ltd.,
UCMS & GTB HOSPITAL,
DILSHAD GARDEN, DELHI – 110 095

Dear Sir/s

I _____ S/o, W/o Sh. _____ Member of the above said Society and holding _____ Shares and wish to apply for a loan of Rs. _____ at the prescribed rate of interested per annum OR such other rate of interest as may be fixed by the Society from time to time and agreed to repay this loan together with the interest in _____ months installments which if I fail to pay regularly, the society may recover the loan in lump-sum from my personal movable and immovable properties and also from my heirs, successors and representatives.

Yours faithfully

Date: ____/____/_____

_____
(Signature of the Applicant)

Name (In block letters) _____ Phone no. _____
Designation _____ Department _____
Date of Birth _____ Date of Retirement _____
Reason for loan _____
Total Pay per month _____ Membership A/c No. _____
Loan outstanding, if any, Rs. _____ at the time of applying.

FOR OFFICE USE ONLY

No. of Share Holding _____ Loan sanction Rs. _____
(Rupees_____.

_____
PRESIDENT/SECRETARY

(Note: Incomplete Application form summarily stands rejected)