



**DETAILS OF VEHICLE / EQUIPMENT REQUIREMENT**

Loan towards – Commercial Vehicle  Construction Equipment  Car  Tractor  Others

Type of Vehicle HCV / LCV / MCV / SCV / TIPPER / TRAILER / CE / TRACTOR	New / Used	Name of Dealer	Cost of Vehicle / Equipment / Chassis Rs.	Cost of Body Rs.	Cost of Registration Rs.	Cost of Insurance Rs.	Total Cost on Road Rs.	Finance Required Rs.	Tenure in Months

**TRADE REFERENCE**

(1) Name

Relationship with applicant  Residential Address

City  State

Pin  STD  Phone  Mobile

(2) Name

Relationship with applicant  Residential Address

City  State

Pin  STD  Phone  Mobile

**APPLICANT DETAILS - Co-Applicant  Guarantor  Individual  Non Individual  Beneficial Owner**

Please tell us about yourself : New customer  Existing customer  Loan No.  Relationship with Applicant

Applicant Name

Father's Name

Spouse Name

Mother's Name

Date of Birth  Gender : Male  Female  Are you : Married  Single  No. of dependents :

Education : U G  Graduate  PG & above  Others  Mobile

Religion  SC  ST  OBC  Others  Individual/Firm PAN

Driving License No.  Exp. Date :

Passport No.  Exp. Date :

Aadhaar Card No:  CKYC No.

Voter ID No.  UPI ID/VPA

• Email

**ADDRESS DETAILS**

Present Residence (Tick  one) Owned  Parents  Co. Provided  Rented  Monthly Rent (Rs.)

Present Address (Residence / Business)

City  State

Pincode  STD  Tel.  Years at current : Residence  City

Please tick () in case the permanent address is same as residence address

Permanent Residence (Tick  one) Owned  Parents  Rented  Monthly Rent (Rs.)

Permanent Address (Residence)

City  State

Pincode  Permanent Tel. No. : STD  Tel.

Company Name

Address

City  State

Pin  STD  Tel. No.  Mobile

<b>For Non Individuals only</b>	If Business: Type of company - Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Pvt. Ltd. <input type="checkbox"/> Public Ltd. <input type="checkbox"/> Ltd. Liability Co. <input type="checkbox"/> Other <input type="text"/>
	Nature of business: Manufacturer <input type="checkbox"/> Agriculturist <input type="checkbox"/> Service Provider <input type="checkbox"/> Trade/Distributor <input type="checkbox"/> Retailers <input type="checkbox"/> Other <input type="text"/>
Year of Incorporation <input type="text"/>	CIN no. <input type="text"/>
Official Email ID <input type="text"/>	

Preferred mailing address - Residence  Office

**INCOME DETAILS**

Please tell us about your income Annual Salary / Business Income Rs.

Other Annual Income Rs.  Rental  Agricultural  Others

**Bank details - Name of the Bank**  Year opened

Branch  Customer ID

Account Number  Type of Account : Savings  Current  CC/OD

Details of pending litigation, if any, filed by other financiers / bank Yes  No  If yes, give details \_\_\_\_\_

**APPLICANT DETAILS - Co-Applicant  Guarantor  Individual  Non Individual  Beneficial Owner**

Please tell us about yourself : New customer  Existing customer  Loan No. \_\_\_\_\_ Relationship with Applicant \_\_\_\_\_

Applicant Name

Father's Name

Spouse Name

Mother's Name

**Date of Birth**         Gender : Male  Female  Are you : Married  Single  No. of dependents :

Education : U G  Graduate  P G & above  Others  \_\_\_\_\_ **Mobile**

Religion  SC  ST  OBC  Others  **Individual/Firm PAN**

Driving License No.  Exp. Date :

Passport No.  Exp. Date :

Aadhaar Card No:           CKYC No.

Voter ID No.  UPI ID/VPA

• **Email**

**ADDRESS DETAILS**

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City  State

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Permanent Residence (Tick  one) Owned  Parents  Rented  Monthly Rent (Rs.)

Permanent Address (Residence)

City  State

Pincode  Permanent Tel. No. : STD  Tel.

Company Name

Address

City  State

Pin  STD  Tel. No.  Mobile

<b>For Non Individuals only</b>	If Business: Type of company - Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Pvt. Ltd. <input type="checkbox"/> Public Ltd. <input type="checkbox"/> Ltd. Liability Co. <input type="checkbox"/> Other <input type="checkbox"/>
Nature of business	Manufacturer <input type="checkbox"/> Agriculturist <input type="checkbox"/> Service Provider <input type="checkbox"/> Trade/Distributor <input type="checkbox"/> Retailers <input type="checkbox"/> Other <input type="checkbox"/>
Year of Incorporation <input type="text"/>	CIN no. <input type="text"/>
Official Email ID <input type="text"/>	

Preferred mailing address - Residence  Office

**INCOME DETAILS**

**Please tell us about your income** Annual Salary / Business Income Rs.

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**Bank details - Name of the Bank**  Year opened

Branch  Customer ID

Account Number  Type of Account : Savings  Current  CC/OD



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**DECLARATION :**

- I/We declare that I/we am/are we citizen of India and all the particulars and information given in this application form are true, correct and complete and no material information has been withheld or suppressed.
- I/We shall advise HDB Financial Services Limited (hereinafter referred to as "HDBFS") in writing of any change in my/our residential or employment / business address.
- I/We confirm that the funds shall be used for the stated purpose and will not be used for speculative or anti-social purpose.
- I/We authorize HDBFS to conduct such credit checks as it considers necessary in its sole discretion, to make any enquiries with other finance companies/registered credit bureau/other institutions regarding my application and to release such or any other information in its records for the purpose of credit appraisal/sharing for any other purpose. HDBFS reserves the right to retain the photographs and documents submitted with this application and will not return the same to the applicant.
- I/We understand that the sanction of this loan is at the sole discretion of HDBFS and upon my/our executing necessary security (ies) and other formalities as required by HDBFS. I/We further agree that my/our loan shall be governed by the rules of HDBFS which may be in force from time to time.
- Payment: No cash/bearer cheque has been collected from me/us upfront towards processing of the loan application. All payments made to HDBFS shall be in the name of "HDB Financial Services Limited" only.
- I/We will not be entitled to avail of any benefits/discounts/free gifts or any other benefit, which is not documented in the loan agreement.
- I/We confirm that I/We have no insolvency proceedings against me/us nor have I/We ever been adjudicated insolvent.
- Application fees for my/our application is Rs. \_\_\_\_\_ (inclusive of taxes). I/We am/are aware that the application fees plus taxes as applicable collected from me/us are non-refundable under any circumstances.
- I/We confirm that I/We am/are not related to any of the Directors/Senior Officers of HDBFS.
- I hereby consent to receiving information from Central CKYC registry through SMS/EMAIL on the above registered number/email address.
- I/We hereby expressly provides consent to HDBFS to add/update my/our KYC details provided by me to the Company with CKYC registry. I/We also hereby consent to receiving my/our KYC details by HDBFS from CKYC registry.
- I/We understand the Risk Gradation and Interest Rate on a Loan that I have applied for will be based on Loan amount, tenure, down payment, Security / Collateral offered for the Loan, risk parameters, market conditions, cost of funds, loan history with HDB, credit score provided by credit information company, my/our age, income and any other information as may be required for the purpose of credit evaluation.
- I/We am / are aware the normally applicable Indicative interest rate on loans and other charges are available on the website www.hdbfs.com

**DECLARATION FOR COLLECTION OF INSURANCE PREMIUM SHORTFALL**

To,  
The Manager,  
HDB Financial Services Limited

Dated : \_\_\_\_\_

Consent for Adjustment of Insurance Premium Shortfall.

With regards to the financial assistance granted by HDB Financial Services Limited ("HDBFS"), I/We hereby authorize HDBFS to add any shortfall in the premium amount, payable towards the life insurance policy associated with my/our Loan, to the Principal amount of the Loan granted by HDBFS.

I/We acknowledge and agree that such debit(s) shall be limited to the actual shortfall amount necessary to ensure the validity and continuity of the insurance coverage and that no further consent shall be required from us for each such debit.

Name of Applicant \_\_\_\_\_ Name of Co-Borrower(s) \_\_\_\_\_ Name of Guarantor \_\_\_\_\_

Sign of Applicant \_\_\_\_\_ Sign of Co-Borrower(s) \_\_\_\_\_ Sign of Guarantor \_\_\_\_\_

I/ we hereby consent and voluntarily submit my / our Aadhaar number / information / Aadhar card copy to HDB Financial Services Ltd (HDB) to use my / our Aadhaar Number / information / Aadhar card copy and fetch data from UIDAI for verification. HDB shall use my / our Aadhaar Number to update all my / our Loan account(s) with HDB, for KYC purpose and / or for any other purpose and / or as may be required by law.

I/We consent  / do not consent  to receive information / service etc for Marketing purpose through Telephone / Mobile / SMS / Email by HDBFS / its agents.

I / We confirm that I / we have read and understood the above Declaration, and that the details provided on the form are correct.

Paste Photo here and sign across it such that your signature is on the photo as well as on the form

Signature of Applicant - 1\* :

Date : \_\_\_\_\_

Paste Photo here and sign across it such that your signature is on the photo as well as on the form

Signature of Applicant - 2\* :

Date : \_\_\_\_\_

Paste Photo here and sign across it such that your signature is on the photo as well as on the form

Signature of Applicant - 3\* :

Date : \_\_\_\_\_

\*In case Applicant is a firm, provide signatures of the authorised signatory with the firm seal.

**DOCUMENTS**

(The list is not exhaustive only indicative)	Applicant
Certified Financial Statements for the last 2 years	✓
Proof of Residence : (Ration card / Voter ID Card / Utility Bill)	✓
Proof of Identity : (Passport/Driving Licence/Voter's ID Card)	✓
Latest Bank Statement for 6 months	✓
Trip Economics Sheet	✓
Repayment Track Record	✓
RC Book Copies	✓
PAN Card	✓
Aadhaar Card	✓

**INDUSTRY CODES**

- |                          |  |
|--------------------------|--|
| 1. Engineering products  | 12. Pharma & Medicine                  |
| 2. Doctor                | 13. Cloth & Textiles                   |
| 3. Account Consulting    | 14. Insurance Civil Contractor         |
| 4. Agriculture           | 15. Real Estate & Builder              |
| 5. IT & Software         | 16. Freight & Logistics                |
| 6. Media & Entertainment | 17. Contractor / Franchisee            |
| 7. Automobiles           | 18. Advertising & Promotion            |
| 8. Banking               | 19. Chemicals                          |
| 9. Hotel & Hospitality   | 20. Jewelry & Ornaments                |
| 10. Education            | 21. Iron & Steel                       |
| 11. Architect            | 22. Others : _____<br>(please specify) |

**EMPLOYMENT CATEGORY**

- Agriculture & Allied Activity
- Manufacturing 
  - Micro Enterprises (Investment < Rs.25 lakhs)
  - Small Enterprises (Investment Rs.25 lakhs – 5 Crores)
  - Medium Enterprises (Investment Rs.5 – 10 Crores)
- Service 
  - Micro Enterprises (Investment < Rs.10 lakhs)
  - Small Enterprises (Investment Rs.10 lakhs – 2 Crores)
  - Medium Enterprises (Investment Rs.2 – 5 Crores)
- Weaker Sections
- Others

**COMPANY USE ONLY :**

SO Code : \_\_\_\_\_ DSA Code : \_\_\_\_\_

SM Code : \_\_\_\_\_ Dealer Code : \_\_\_\_\_

RM Code : \_\_\_\_\_ Distance from Branch: \_\_\_\_\_ kms

DSE Name : \_\_\_\_\_ DSE PAN : \_\_\_\_\_

Branch : \_\_\_\_\_ PSL : Yes  No

**Category of Customer :**

- CV - FTU  STO  SFO  MFO  LFO  Captive
- CE - FTU  Retail Hirer  Retail contractor
- Large customer Hirer  Large customer contractor
- Quarry owner  Retail Captive  Large Captive
- CAR - Salaried  SEP  SENP
- Transporter & Agriculturist

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**ACKNOWLEDGMENT SLIP**

Name of the Applicant \_\_\_\_\_

Date of Application \_\_\_\_\_ Location \_\_\_\_\_ Date & Time of receipt \_\_\_\_\_

HDB Contact Person Name \_\_\_\_\_ Stamp / Signature \_\_\_\_\_

Application will be processed within 14 working days of receiving the application with all necessary documents, subject to the applicant providing all additional information that HDB Financial Services Ltd. may require solely for the purpose of evaluating the credit worthiness of the applicant.

Contact No. \_\_\_\_\_