

**THE ASSAM AGRICULTURAL UNIVERSITY EMPLOYEE'S CO-OPERATIVE
MUTUAL BENEFIT FUND LIMITED; AAU: JORHAT -13**

LOAN APPLICATION FORM FOR CO-TERMINIOUS EMPLOYEE

To,
The Chairman AAUECMBF
Ltd,
AAU, Jorhat-13

MBF A/C No. _____

Sir,

I beg to request you kindly to grant me loan of Rs. _____ (Rupees _____) only from the AAUECMBF LTD. Necessary particulars are furnished herewith for your perusal.

Particulars:

1.	Full name of the Member (in Block letter)	:	
2.	Post held/ Designation	:	
3.	Office Address	:	
4.	Date of Joining in the AAU service	:	
5.	Date of Retirement	:	
6.	Permanent address	:	
7.	MBF Account number	:	
8.	Monthly subscription Amount	:	
9.	Purpose of loan	:	
10.	When the loan is required	:	
11.	Present pay (Basic pay & DA)	:	
12.	Previous loan if any outstanding	:	
13.	Mobile No	:	
14.	AAU Mail Id	:	

Loan Details:

- A) Required Loan Amount: ₹: _____ (Rupees _____) only.
B) Rate of Interest on loan 10% per annum (reducing).
C) Preferable Loan Repayment Tenure: (Please anyone):

<input type="checkbox"/> 6 Months	<input type="checkbox"/> 12 months	<input type="checkbox"/> 24 Months	<input type="checkbox"/> 36 Months	<input type="checkbox"/> 48 Months
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- D) Any other preferable Loan Repayment Tenure, Please specify (Minimum 6 months and Maximum 48 Months): _____.

I, hereby declare that I will repay the loan along with interest amount following all the existing Terms and Conditions of AAUECMBF, LTD. and abide by the same.

Signature of the Member.

Forwarded to the Chairman, AAUECMBF LTD., Jorhat. The loan and interest will be deducted from the monthly pay bill of the person concerned regularly according to the sanctioned order issued by the Secretary AAUECMBF. LTD, Jorhat.

Seal & Signature of the DDO.

**THE ASSAM AGRICULTURAL UNIVERSITY EMPLOYEE'S CO-OPERATIVE MUTUAL
BENEFIT FUND LIMITED; AAU: JORHAT -13**

BILL FOR DRAWL OF LOAN FROM AAUECMBF LTD., JORHAT-13.

Station.....

Adjustment by the deduction from pay bills

Voucher No.....

Date.....

Sl. No.	Name of the member	Designation & Office Address	MBF A/C No.	No. & Date of Sanction	Amount of loan to be withdrawn	Remarks

I do hereby undertake that the amount of loan in this bill utilized solely for the purpose for which it is sanctioned. I will refund the loan amount with interest in the stipulated time. Further, I declare that in the event of any untoward incident i.e. die in harness/compulsory retirement/ voluntary retirement/death or otherwise, the outstanding balance amount of loan with interest can be realized from my retirement benefit /pension benefit /any other mode by the AAUECMBF LTD.

Revenue stamp of Rs. 1.00 with Signature

Signature of the member

Full Name: _____

For Office Use Only

Dated: ____/____/____

Net amount required for payment Rs _____ Rupees _____)

only to Dr./Mr./Mrs./Ms. _____, Designation: _____

MBF Account Number: _____ with an EMI for Rs. _____ within _____ months and with

effect from _____ to _____.

Office Assistant

Secretary
AAUECMBF Ltd,
AAU, Jorhat-13.

Checked & entered.

Secretary
AAUECMBF Ltd,
AAU, Jorhat-13.

UNDERTAKING

(To be submitted by the co-terminous employee/shareholder for availing loan)

I, Sri/Smti.....an employee of....., Assam Agricultural University, Jorhat, Assam and permanent resident ofAssam, Pin..... do hereby declare the followings:

1. That I have gone through all the terms & conditions/guidelines/rules framed by Assam Agricultural University Employees' Co-operative Mutual Benefit Fund Ltd (AAUECMBFL) for availing a loan by any shareholder (in case of co-terminous employee/shareholder).
2. That I am willfully intending to avail a loan amounting to a sum of Rs.....(in words)..... and do hereby assure to refund the same in the stipulated time period as mentioned in the guidelines/terms & conditions and rules framed for the purpose.
3. That I do hereby give my consent that in the event of any untoward incident/unforeseen reason/circumstances like death/compulsory retirement/voluntary retirement/retranchment, the balance/unpaid amount (if any) of my availed loan alongwith the interest amount will be recovered from my retirement benefit/pension benefit or any other mode of deposit (that is or would be) available in my name by AAUECMBFL.
4. That in support my declaration in Para 3 above, I hereby submit/append a blank cheque bearing No..... issued against my Bank Account No.....of SBI,branch to enable the AAUECMBFL to recover my unpaid/balance amount of loan (if any) along with the interest amount.
5. That this declaration is a piece of documentary evidence regarding proof of Para 1 to 4 to the concerned authority/authorities.

That in good and normal conscience and sound health I have signed this declaration on this.....day of, 20....

(Signature)

Full Name:_____

Designation_____

Office address in full_____
