

## STATE BANK EMPLOYEES' CO-OPERATIVE CREDIT SOCIEITY LTD.[SBHECCS] GUNFOUNDRY: HYDERABAD - 500 001

Estd: 1952 (Regd under Multi State Cooperative Societies Act 2002) Reg No. MSCS\CR\373\2010

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## APPLICATION FOR LONG TERM LOAN [NEW / RENEWAL]

INDEX No.		Date :
Dear Sir,		
I	Son/daughter/wife of Sh	nri
member of State Bank Employ	ee's co-op. Credit Socieity Ltd., Regd. No. MS	$SCS\CR\373\2010$ , apply for a long Term Loan of
	in not more than 120 monthly instalments wi	-
		:
	4. Account No.:	5. Mobile No.:
6. Purpose of loan:		
	use 2. Construction / Extension / Completice. Marriage / Education / Medical / Vehicle	
In case the loan is granted, I is liquidated, together with inte Bye-laws and also as may be an	hereby authorize the Society to recover the erest thereof. I have read the byelaws of the	e monthly installments from my salary till the loan Society now in force and undertake to abide by the
		Signature of Applicant
	DEMAND PROMISSORY	NOTE
	DEMAND I ROMISSORI	Branch:
₹		Date :
ON DEMAND, I, the borrowe	er Shri	
and 1st surety Shri	Designation	Branch
the 2 <sup>nd</sup> surety Shri	Designation	Branch
jointly and severally promise to	pay the State Bank Employee's Co-operative	Credit Society Ltd., Reg.No. MSCS\CR\373\2010,
State Bank of India, Gunfoundry	y, Hyderabad – 500 001, or order a sum of 🔻	•[Rupees
	_ only] together with interest @ 9% at Monthly	rests.
Signature of Surety Index No	Signature of Surety Index No	Revenue Stamp Signature of borrower Index No
HRMS.No.	HRMS.No	HRMS.No
ATTESTED	ATTESTED	ATTESTED
	-	
MANAGER [Seal]	MANAGER [Seal]	MANAGER [Seal]
	LETTER OF AUTHORI	<u>TY</u>
		Branch:
The Asst. General Manager / Ch State Bank of India,	nief Manager / Manager	Date :
	Branch,	
Sir,	on one	
Bye-laws. I hereby authorize y		p-op Credit Society Ltd., Hyderabad, A.P. under their r noted amount from my salary, until the total loan evocable.
In case of my retirement, volung you to recover the dues payable		e complete liquidation of my loan, I hereby authorize ociety from the amount then standing to the credit of
my i rovident i dna Account/ Gr	atorcy / Tension of any other payments received	isio itotti otate batik ut Iliula.
Name : Designation :		SIGNATURE OF APPLICANT

## **PARTICULARS OF EMOLUMENTS AND DEDUCTIONS:**

This is to certify that the applicant Shri/Si Shri	mt/Kum is an Award Staff/Officer of State Ba	Son/Daughter/Wife of
Branch/Department.	is all Award Stally Officer of State Bo	TIK OF ITIGIA
1. Designation:	1. P.F. Loan	₹
		· ·
3. Date of Confirmation:	,	た
		<b>ゃ.</b>
	·	₹
		₹
	7. Total Deductions	₹
_	leductions from the salary and allowances of S	
	any other Co-op. Credit Society and the details	of monthly deductions as aforesaid are
true and correct.		
Branch/ Dept. :	BRANCH MA	ANAGER / HEAD OF THE DEPARTMENT
Date : [ WITH SEAL ]		
b) Present balance で	b) Amount borrowed: を  d) Whether 18 months of borrowing: YES / NO b) Date of Confirmation  b) M.B.F: を。 e) Total Loans Outstanding: を。	completed from the date of last  c) M.R.F:
4. Amount of loan applied for : ₹		
5. Amount of loan eligible : ₹		
NOT ELIGIBLE: PLEASE APPLY ON OR AFT	ER	
DATE:	I EDGED OI EDK	CHECKING DECICIAL
	LEDGER CLERK	CHECKING OFFICIAL
	for ₹	
	Cheque Amount 🗞 Loan	renewed for «·
Checked by Manager		
TREASURER	SECRETARY	PRESIDENT

## NOTE:

- 1. Each member upon completion of 2 years of membership in the society shall be entitled to Long Term Loan upto a maximum of ₹.2,00,000/- for Sub-staff and ₹.3,00,000/- for Clerical/Officer.
- 2. To furnish two acceptable sureties who are members of the Society.
- 3. To renew the loan 18 months time gap is necessary from the date of last borrowing.
- 4. In case of non-receipt of acknowledgment within 20 days please write to us with full particulars.
- 5. In case of any shortfall on account of the required share capital/subscriptions towards MBF/ MRF/ MARF the same shall be adjusted at the time of releasing the loan.
- 6. Default for more than 6 months in M.B.F. account will render the nominee / legal heirs ineligible for the benefits
- 7. Please enclose Latest Payslip