

ASSAM GRAMIN VIKASH BANK

HEAD OFFICE : G.S. Road, Bhangagarh, GUWAHATI-781005

Application for Asomi Sulav Credit Card

Assam Gramin Vikash Bank						
Branch						
Dear Sir, I, on behalf of my family, hereby apply for a ASCC for a limit of Rsonly)						
Gene 1.	Full Name of the applicant / Key		Age	Sex Fath	ner's/Husb	and's name
2.		ost Office		P.S.		listrict
3.	Name of other earning members i) ii) iii) iii)			elationship wi		
4.	Whether belongs to scheduled Castes / Tribe / Backward Class (as per definition in the State)					
5. 6.	Particulars of Identity documents : (Ration Card/Voter I.D. Card/Panchayat or Municipal Tax Receipts of the application key person) Particulars of existing liability, if any, of the applicant / Key person.					
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7.	Income details of the family : Name of the earning Members i) ii) iii)	* * * * * *	Sc	ource	A	mt.
Total income of the family : I hereby declare that the particulars given above are true and correct to the best knowledge and belief.						
I also hereby undertake to take Personal Accident Risk Insurance Coverage & authorize to debit my ASCC A/c by the amount of premium payable. I hereby authorize the Bank to disclose all or any particular or detail of information relating to						

my loan account with the bank to any other financial institution/ Government or any agency as may be considered, necessary or desirable by the Bank. It will be in order for the Bank to disqualify me from receiving of any credit facility from the Bank in case it is proved that the declarations made above contain misrepresentation of facts.

(Applicant's Signature)