



**STATE BANK OF INDIA  
STAFF ASSOCIATION CO-OPERATIVE SOCIETY LTD.  
11, ABDUL HAMID STREET , KOLKATA – 700 069**

**APPLICATION FOR LONG TERM LOAN**

Fresh /Renewal

To  
The Chairman

-- **Attach current pay Slip**

C/A or SB A/C. No.....

Sir,

I would like to apply for a Long term loan of Rs..... (Rupees .....only ) for ..... purpose subject the Bye- Laws and rules of the Co-operative Society. The necessary undertaking and particulars are given below.

1. Full Name ( In block Letters).....
2. Father's / Husband's Name .....
3. Designation ..... Branch ..... Br. Code .....
4. Permanent Address .....
5. Date of appointment ..... Date of Birth.....
6. Period of Service..... Contact No.....  
Net amount payable by the Bank after all deductions.....
7. PF INDEX NUMBER :
8. I hereby confirm that the above information given by me is an absolutely correct and nothing Has been concealed . In terms of Section 58 of M.S.C.S. Act. 1948 . I hereby authorized to the Society to deduct from my salary a sum of Rs.....Next month onwards monthly contribution of my Long term loan instalment .

Yours faithfully ,

(Full signature of the Member/Borrower)

<b>FOR OFFICE USE ONLY</b>	
Original Long term loan	Rs, .....
Present Balance of L.T Loan	Rs,.....
R.B. Fund Deduction	
Checked & found Correct	@ Rs.....
May be sanctioned for	Rs.....
Head Clerk	
Recommended	Sanctioned
CHAIRMAN/ SR. VICE CHAIRMAN /V.C./A.O	
Date of Sanction	.....

Representative of S.B.I.S.A.....Branch/Unit  
Signature in full .....(Signature of Secretary / Representative )

In presence of  
**Seal of Unit Secretary/ Representative**

Particular of Surety  
Surety – I.

Name in Block letters .....Father's Name .....  
Signature in full .....Designation ..... Date of Birth.....  
PF Index No :.....Mobile No:.....Branch .....Br. Code.....

**L O A N B O N D**

**State Bank of India Staff Association Co-operative Society Ltd.**  
**11,Abdul Hamid Street Kolkata – 700 069**

Under the provision of the MSCS Acts & Rules ,1984 , I authorise State Bank of India (my employer ) to deduct from my salary or any other money payable to me including subsistence Allowance such amount on account of instalments due on this loan, as may be furnished to them by S.B.I.S.A.Co-op Society Ltd. From time to time and pay the same direct to S.B.I.S.A.Co-op Society Ltd. In satisfaction of this loan . I also agreed that I shall not withdraw or be entitled to Revoke the said authority until the whole of my debt to the said Bank is fully liquidated and I shall sign all papers and statements that may be required by my employer , in this connection.

I further authorise State Bank India ( my employer) in the event of my retirement or death or having been placed under suspension or termination of my service for any cause whatsoever before this loan and the interest due thereon have been fully repaid , to deduct from the moneys due to me or standing to my credit or due to my estate or my Provident Fund or Gratuity or pension to which I may become entitled such amount as will be sufficient to liquidate balance of this loan and interest thereon up to the date of repayment and to pay the same direct to S.B.I.S.A.Co-operative Society Ltd. In satisfaction of this loan .

Witness

Name .....  
Signature in full .....  
P.F. No.....  
Phone No./Mobile No..... (Full Signature of borrower ) .