



LIC HOUSING FINANCE LIMITED APPLICATION FOR HOUSING LOAN

FOR OFFICE USE ONLY		
Fee: Rs. _____. Date: _____. Interview by : _____ File No. : ____		
		Space for Applicant's Photograph

Application No.
Space for Co-Applicant's Photograph

1. Personal Information:

	Applicant	Co-applicant																
Name (IN BLOCK LETTERS)																		
Father's/ Husbands Name																		
Date of Birth and Age	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>DD</th> <th>MM</th> <th>YYYY</th> <th>Age</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	DD	MM	YYYY	Age					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>DD</th> <th>MM</th> <th>YYYY</th> <th>Age</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	DD	MM	YYYY	Age				
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Qualification																		
Sex	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Male</td> <td>Female</td> </tr> </table>	Male	Female	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Male</td> <td>Female</td> </tr> </table>	Male	Female												
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Marital Status	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Single</td> <td>Married</td> </tr> </table>	Single	Married	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Single</td> <td>Married</td> </tr> </table>	Single	Married												
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If NRI , which country																		
No. of Dependents	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Relationship</th> <th>Age</th> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	Relationship	Age							<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Relationship</th> <th>Age</th> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	Relationship	Age						
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Address for communication:																		
	Pin:	Pin:																
	Telephone No:	Telephone No:																
	e-mail address :	e-mail address :																
In case of NRI's applicants, Power of Attorney's Address																		
	e-mail address :	e-mail address																
Whether you have taken a housing loan from any other financial Institution : If yes , please give details																		
Have you or your spouse stood as guarantee for loan from LIC Housing Finance Limited or any other loan? If yes , please give details																		

2. Employment Information

	Applicant				Co-applicant			
	Service	Self-employed	Business	Others	Service	Self Employed	Business	Others
Occupation(Income Source)	Profes-sional	Agri-culture	Others		Profes-sional	Agri-culture	Others	
Employer's /Business Name and Address								
If Employed :								
Designation & Employee No.								
Department								
Date of Joining (DD/MM/YYYY)								
Date of Retirement (DD/MM/YYYY)								
Annual Gross Income	Rs. _____				Rs. _____			
Annual Net Income	Rs. _____				Rs. _____			
Other Income : Occupation & Source:	Rs. _____				Rs. _____			
If Self Employed :								
Nature of Business								
No. of years in Business								
Declared Annual Income								



LIC HOUSING FINANCE LIMITED

APPLICATION FOR HOUSING LOAN

2. Loan Information :

Amount: Rs _____	Your Monthly Expenditure : Rs. _____
Term : ____ Years	Instalment you and co-applicant can pay to LIC Housing Finance Limited per month : Rs. _____
Purpose of Loan	Cost of Property(Rs.)
1. Purchase of new flat under construction	1. Cost of land :
2. Purchase of Flat being resold	2. Cost of construction/ Extension
3. Construction of new house	3. Cost of amenities/ Service charges
4. Purchase of house being resold	4. Registration charges
5. Extension of Flat /House	5. Cost of flat /house (II Sales)
	Total Cost (A)
	Source of Funds
	1. Savings in bank
	2. Disposal of Investment/ property
	3. PF(Refundable/Non-refundable)
	4. Others(Specify)
	5. Loan from HFL
	Total funds (B)
Please note that the total requirement of funds (A) should equal the estimated source of funds(B)	
Mode of repayment : EMI For Griha lakshmi: Equated Monthly /Quarterly/ Half-Yearly instalments	

3. Financial Information:

Savings/ investments etc	Applicant	Co-applicant	Loans Proposed / Taken	Applicant Rs.	Co-applicant Rs.		
			Please indicate below loans taken /proposed to be taken from employer / PF/ Others and installment payable per month.				
	Rs.	Rs.	Source	O/s Loan	Monthly instalment	O/s Loan	Monthly installment
1. Savings in Bank			1. Employer				
2. Immovable property			2. Bank				
3. Others(Specify)			3. Credit/ Society				
4.			4. Others(Specify)				

4. Existing Property Details :

1. If you already own a property give full address :	2. Whether this property is / was under HFL Loan : Yes /No	3. If Yes , Loan Amount
Built up Area :	Monthly Commitment :	
File No/ML No.:		

Credit Card / Bank Account Details :

Name of A/ c holder	Name and Address of the Bank	Type of Account	Account No.
1.			
2.			

5. Property Details :

Property Address Details

Flat No. :	Floor No.	Area of Land	_____sq.ft	For Office Use Only		
Block No.	Door No.	Built-up Area	_____sq.ft			
Plot No.	S.No.	Whether land is freehold?	Yes	No	PA	
Street	Locality	Are you the sole owner of the unit?	Yes	No	PV	
Village /Town	Other Details	Is the legal title to the unit clear?	Yes	No	Bldr Code	
		Will LICHFL be given the first mortgage of the dwelling Unit?	Yes	No	Proj. Code	
City	Pin	Do you propose to rent the dwelling unit?	Yes	No	Page No:	

Name and Address of Builder/ Vendor :

In case of existing flat/house: :

In case of Lease:

Year of construction:	Name of Lessor :
Age of Flat / House:	Name of Lessee :
Date of Sale / Agreement :	Term of Lease :
Valid Upto:	Date of Expiry of Lease

6. LIC Policy Details: IN CASE YOU ARE NOT INSURED, LEAVE THESE COLUMNS BLANK. YOU WILL BE ADVISED ABOUT THE POLICIES TO BE TAKEN TO SUIT YOUR REQUIREMENTS AT THE TIME OF THE INTERVIEW.

Policy No.	Branch No. and name	Life Assured: 1-Applicant 2-Co-applicant 3-Joint	Plan & Term	Sum Assured (Rs.)	Premium Amount (Rs)	Mode of Payment M/Q/H/Y	Date of Commencement	Date of Maturity
1.								
2.								

If more than 2 policies exist, please furnish details in a separate sheet of paper in same format.



LIC HOUSING FINANCE LIMITED

APPLICATION FOR HOUSING LOAN

7. General Details:

Method of Loan Repayment	<input type="checkbox"/> Counter <input type="checkbox"/> Collecting bank <input type="checkbox"/> Post-Dated Cheques <input type="checkbox"/> Salary Savings		
Are you a shareholder of LICHFL:	<input type="checkbox"/> Yes <input type="checkbox"/> No	You got to know LICHFL through	
If Yes 1) Original 2) Transferee Folio No. :		<input type="checkbox"/> Newspaper / Magazine <input type="checkbox"/> Radio / TV	
What other security will you be able to provide, if required?		<input type="checkbox"/> Builder / Developer <input type="checkbox"/> Friends / Relative	
Are you a member of any social Club? e.g. Rotary Club , Lions Club, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> LIC Agent / Development Officer	
8.References : LICHFL may make such enquiries from the referees if it deems necessary			
	1	2	
Name			
Address			
Phone Nos. :	Off :	Res:	Off : Res:

Declaration

I/ We declare that all the particulars and information given in the application form are true, correct and complete and that they shall form the basis of the contract for any loan LICHFL decides to grant to me/us. I/We had no insolvency proceedings against me /us nor have I /We ever been adjudicated insolvent and further confirm that I /we have read LICHFL brochure giving details of its loan schemes and understood its contents. I/We am/are aware that the Equated Monthly Instalment comprising of principal and interest is calculated on the basis of annual rests. I/We agree the LICHFL may take up such references and make enquiries in respect of this application, as it may deem necessary from my/our Bankers or Employers or others. I /We undertake to inform LICHFL regarding any change in my/our occupation / employment and to provide any further information that you may require. I /We also undertake to authorize my/our employer(s) to deduct Equated Monthly Instalments from my /our salary and remit the same to LICHFL directly every month. I /We further agree that my loan shall be governed by the rules of LICHFL which may be in force from time to time . I /We understand that the processing fees and Administrative fees are not refundable under any circumstances and the loan sanction or rejection is at the sole discretion of LICHFL , even after payment of such fees.

In purchase cases, I/We am/are aware that the loan cheque will be given in favour of the vendor only and I agree to this procedure.

WITNESS : Signature		_____ (Signature of Applicant)
Full Name		_____ (Signature of Co-applicant)
Agent / DO Code		_____ (Signature of Power of Attorney (If applicable))
Address		Place : Date :
PIN:		
Telephone		