## LOAN APPLICATION FORM

Public Service Mutual Provident Association – P.O. Box 150 – No 155/5, Castle Street, Colombo 08.

This application has to be	filled in the member's own ha	ndwriting		For (	Office Use	
please bring your National Identity card to collect cash / cho			Vr. No. Date			
Membership No:			1			
Name with initials :					-	
Name denoted by initials					2	
Dept. / Institution :						
Official Address :						
Home Address :	*					
N.I.C. No.			ee No./ Pens	The second second second second second		
Phone Office	Home		Mobile		E-mail	
Nos.						
Monthly Gross Salary	,	. (Please	attach lates	st salary certif	ficate)	
one Type Required				1/800		
Rule	Description		Code N	0.	Rs.	
12	Contribution		140			
13	Salary		141			
13 C	Festival Advance		144			
14 (4)	Mobile phone advance		152			
13	Special book loan		153			
13 J	Laptop loan		154			
	Total of loans require	d				
Payment to be made by	i. Cash Maximum Rs. 10,000/-,	Open Che	que Maximu	m Rs. 20,000	/- Crossed Cheque / Bank li	
	ii. Whether cheque to be collect	cted person	nally / Banke	ed / Posted		
f to be sent to bank (a	a). Bank Account No					
(1	o). Name and address of Bank					
Reasons for Ioan		Requi	ired Amoun	t		
1						
2						
Details of bills or invoice (	If applicable only) Bill No			Dat	e	
Guarantor's details (If me	mbership is below 5 years )	Gu	arantor fron	n annexed		
Name :		Name :				
Office Address:		Office Ad	ddress:			
Private Address:		Private A	ddress:		45-14-1	
Membership No.		Member	ship No.		8	
	mmitted myself in and after the			s paid to any	further loan or advance	
*	nount of deduction from my pa			1.5		
Date	Signature	e of applica	ant member			
	,	negist Fa				
Paraisad from the inint		of rupees				
	secretary and treasurer a sum s/=) bein					
			Г			
				Signature	of member on the	
Date					stamp	
			Į			
	For	Office Us	е			
Signature verified CORRECT / DIFFERS			Stamp			
200 A						
Signature of S.A						