



APPLICATION FOR HOUSING LOAN UNDER GRIHA SHOBHA
 (Non-Resident Indians / Persons of Indian Origin)

Please take due care & fill in all the details in **CAPITAL LETTERS** only. A completed & correctly filled in Form will help us in processing your Application faster. An incomplete / incorrect Application is liable to be rejected.

PERSONAL INFORMATION

	APPLICANT	CO-APPLICANT
Full Name	Surname _____ First Name _____ Middle Name _____	Surname _____ First Name _____ Middle Name _____
Father's Name	_____	_____
Date of Birth, Age, & Sex	DD <input type="text"/> <input type="text"/> MM <input type="text"/> <input type="text"/> YYYY <input type="text"/> <input type="text"/> Age: _____ years Male <input type="checkbox"/> Female <input type="checkbox"/>	DD <input type="text"/> <input type="text"/> MM <input type="text"/> <input type="text"/> YYYY <input type="text"/> <input type="text"/> Age: _____ years Male <input type="checkbox"/> Female <input type="checkbox"/>
Passport No. [attach Xerox Copy]	_____ Expiry: DD <input type="text"/> <input type="text"/> MM <input type="text"/> <input type="text"/> YYYY <input type="text"/> <input type="text"/>	_____ Expiry: DD <input type="text"/> <input type="text"/> MM <input type="text"/> <input type="text"/> YYYY <input type="text"/> <input type="text"/>
Place of Birth	_____	_____
Marital Status	Single <input type="checkbox"/> Married <input type="checkbox"/> Others <input type="checkbox"/>	Single <input type="checkbox"/> Married <input type="checkbox"/> Others <input type="checkbox"/>
Exact Educational Qualif. (pl. specify)	_____	_____
NRI / PIO Proof [attach Xerox Copy as applicable]	Visa # _____ Expiry _____ Perm. Res. Card # _____ Expiry _____ PIO Card # _____ Expiry _____	Visa # _____ Expiry _____ Perm. Res. Card # _____ Expiry _____ PIO Card # _____ Expiry _____
Name of Country, where working	_____	_____
Category	SC / ST <input type="checkbox"/> OBC <input type="checkbox"/> Others <input type="checkbox"/>	SC / ST <input type="checkbox"/> OBC <input type="checkbox"/> Others <input type="checkbox"/>
Dependents	Please specify Relation of Co-applicant with Applicant: _____ No. of Dependents: Children _____ Adults _____	
Full Contact Address (In Country of stay)	_____ PIN / ZIP Code: _____ Nearest Landmark _____ Country Code: _____ Area Code: _____ Ph. # _____ Mob. # _____ E-mail ID: _____ Residence Status: Owned <input type="checkbox"/> Rented <input type="checkbox"/> Company Quarters <input type="checkbox"/> No. of years at above Residence _____ If rented, Rent per Month: _____	
Permanent Address in India	_____ Dist. _____ State _____ PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Nearest Landmark _____ STD Code _____ Ph. # _____	
Office Address	_____ PIN / Zip Code: _____ Country Code: _____ Area Code: _____ Ph. # _____ FAX _____	_____ PIN / Zip Code: _____ Country Code: _____ Area Code: _____ Ph. # _____ FAX _____

Details of Loans availed: [Please attach separate sheet if space is insufficient]

Name of Bank / FI / Employer	Sanc. Date, ROI, Term, & Purpose	Details of Security Offered	Sanc. Amt. / Limit	EMI	O/s. Bal. as on Date

Have you / your Spouse ever stood as Guarantor? Yes No

If yes, give details: _____

INCOME INFORMATION

	APPLICANT	CO-APPLICANT
Type of Employment	Salaried <input type="checkbox"/> Self-employed <input type="checkbox"/> Professional <input type="checkbox"/> Retired / Homemaker / Student / Others <input type="checkbox"/>	Salaried <input type="checkbox"/> Self-employed <input type="checkbox"/> Professional <input type="checkbox"/> Retired / Homemaker / Student / Others <input type="checkbox"/>
Name & Contact Details of Organisation	_____ _____ _____ PIN / ZIP: _____ Nearest Landmark _____ Dist. _____ State _____ Country Code _____ Area Code _____ Phone No. _____ FAX _____ Web Site: _____ E-mail: _____ Contact Person _____	_____ _____ _____ PIN / ZIP: _____ Nearest Landmark _____ Dist. _____ State _____ Country Code _____ Area Code _____ Phone No. _____ FAX _____ Web Site: _____ E-mail: _____ Contact Person _____
Designation & Employee No.		
Department		
Date of Leaving India	DD <input type="checkbox"/> <input type="checkbox"/> MM <input type="checkbox"/> <input type="checkbox"/> YYYY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	DD <input type="checkbox"/> <input type="checkbox"/> MM <input type="checkbox"/> <input type="checkbox"/> YYYY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Are you sponsored by any Organisation in India?	Yes / No. If yes, give details:	Yes / No. If yes, give details:
Date of Joining Current Job	DD <input type="checkbox"/> <input type="checkbox"/> MM <input type="checkbox"/> <input type="checkbox"/> YYYY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	DD <input type="checkbox"/> <input type="checkbox"/> MM <input type="checkbox"/> <input type="checkbox"/> YYYY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Employment Contract Details	Whether Employment is Contractual? Yes / No. If Yes, specify Date of Expiry of Contract: DD <input type="checkbox"/> <input type="checkbox"/> MM <input type="checkbox"/> <input type="checkbox"/> YYYY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Whether Contract would be renewed? Yes / No.	Whether Employment is Contractual? Yes / No. If Yes, specify Date of Expiry of Contract: DD <input type="checkbox"/> <input type="checkbox"/> MM <input type="checkbox"/> <input type="checkbox"/> YYYY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Whether Contract would be renewed? Yes / No.
Total Experience	_____ Years	_____ Years
Retirement Year		
Proposed length of Service abroad	_____ Years	_____ Years
Gross Annual Income	_____ /- p.a.	_____ /- p.a.
Net Annual Income	_____ /- p.a.	_____ /- p.a.
Exchange Rate	1 _____ (specify Currency) = Indian Rs. _____	1 _____ (specify Currency) = Indian Rs. _____
Expectations on return to India	Nature of Job: _____ Income: Rs. _____ /- p.m.	Nature of Job: _____ Income: Rs. _____ /- p.m.

Note: Salaried Employees should attach copies of last 6 Months Payslips along with Employer's Certificate, copy of Bank Statement reflecting Salary Credits for at least past 6 Months & copy of Tax Return (if applicable) for latest Year, along with a Note on the Nature of Business of the Employer.

LOAN INFORMATION

Loan Required (Rs.):	Type of Rate of Interest: Floating / Fixed-3 / Fixed-5 / Fixed-10		
Term Desired (Max. 15 years):	Mode of Payment of EMI: ECS / PDC		
Due Date of EMI:	Whether to start EMI immediately {required only in case of Const.}? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Purpose of Loan:	Purchase of New Flat	Purchase of Flat Resold	Construction of New House
	Purchase of Ready House	Extension of House / Flat	Improvement / Renovation
	Purchase of Plot	Plot Purchase + House Construction	

FINANCIAL INFORMATION

Particulars	Applicant [Rs.]	Co-applicant [Rs.]	Particulars	Applicant [Rs.]	Co-applicant [Rs.]
Bank Savings / Deposits			Life Ins. Policies / PLI		
Other Properties			Shares & Securities		
Current Balance in PF / PPF			Other Assets (Pl. specify)		

Monthly Expenses: Rs. _____ /- p.m.

Are you a Shareholder of LICHFL? Yes / No

Investment made in India: Rs. _____ /-.

Details: _____

Bank A/c. Details [Please attach copies of Bank Statements for at least past 6 Months in India as well as abroad.]

Name of the A/c. Holder	Name & Address of the Bank	Type of Account	Account No.

Amount usually remitted to India: _____ Frequency of Remittance: _____

PROPERTY INFORMATION [Please attach copies of Title Documents.]

FULL ADDRESS OF THE PROPERTY _____

 Dist. _____ State _____ PIN Nearest Landmark _____

Area of Land / Undivided Share of Land: _____ Sq. Ft. Built-up Area: _____ Sq. Ft. Carpet Area: _____ Sq. Ft.
 Name (s) of Owner (s): _____
 In case of Leasehold Plot: Name of Lessor: _____ Term of Lease: _____ Dt. of Expiry of Lease : _____

Do you propose to Rent out the Dwelling Unit? Yes No If yes, Rent Expected: Rs. _____/- p.m.

In case of Purchase of Plot or Ready-built / Under Construction House / Flat: - Name & Address of Vendor / Builder / Society / Development Authority: _____ _____ Yr. of Const.: _____ % complete: _____ Exp. Completion Dt.: _____ Sale Deed Dt.: _____ Validity (days) _____	In case of House Const. / Extn.: - Const. Stage (% completed): _____ Exp. Dt. of Completion: _____ [Note: Please attach the detailed Construction / Extension Estimates]	In case of Improvement / Renovation: - Year of Construction of the House / Flat: _____ [Note: Please attach detailed Improvement / Renovation Estimates]

Cost / Value of the Property (Rs.):

Cost of Land / Undiv. Share of Land (UDL): _____ Cost of Flat / House (excl. Land / UDL Cost): _____
 Estimated Cost for Const. / Extn.: _____ Estimated Cost for Improvement / Renovation: _____
 Cost of Amenities: _____ **Total Cost:** _____ **Value of Property:** _____

Sources of Funds (Rs.):

Bank Savings: _____ Disposal of Investment / Property: _____ Loan from Employer: _____
 Loan from LICHL: _____ Others: _____ **Total Funds:** _____

LIFE INSURANCE POLICY DETAILS

Policy No.	Name of Insurer & Branch	Name of Policyholder	Type of Policy & Term	Sum Assured (Rs.)	Premium Amount (Rs.)	Mode of Premium Pmt. [M / Q / H / Y]	Dt. of Comm.	Present Surrender Value (Rs.)

REFERENCES – ONE IN INDIA & ONE IN COUNTRY OF STAY / WORK

For India	For Country of Stay / Work
Name: _____	Name: _____
Address: _____	Address: _____
State _____ PIN <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Dist. _____	PIN / ZIP Code: _____ Country Code: _____
STD Code _____ Ph. # (R) _____	Area Code _____ Ph. # (R) _____
Ph. # (O) _____ Mob. # _____	Ph. # (O) _____ Mob. # _____
E-mail ID: _____	E-mail ID: _____

POWER OF ATTORNEY

Loan Procedures shall be completed by: Self Power of Attorney

If Power of Attorney shall complete the Procedures, provide details as below:

<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> Recent Passport-size Photograph of the Power of Attorney with Signature across </div>	Attorney's Specimen Signature: _____ Attorney's Name : _____ Attorney's Address : _____ _____ Nearest Landmark: _____ Dist. _____ State _____ PIN <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> STD Code: _____ Ph. No.: _____ Relation with Applicant: _____
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DECLARATION

I / We am / are Non Resident Indian (s) / Person (s) of Indian Origin & I / we have given my / our Passport & other Identification details above. 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 have no Insolvency Proceedings against me / us nor have I / we ever been adjudicated Insolvent and further confirm that I / we have read the LICHFL Brochure giving details of its Loan Schemes and understood its contents. I / We have understood and selected the Interest Rate Option available. I / We are aware that the option on Interest Rate once selected cannot be changed and change (s) may be permitted only at the sole discretion of LICHFL on such Terms and Conditions as may be decided by LICHFL. I / We agree that LICHFL may take up such references and make enquiries in respect of this Application, as it may deem necessary from my / our Banker (s) or Employer (s) 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. LICHFL may make available any information contained in this Form and other Documents submitted to LICHFL and information pertaining to the Loan to any Institution or Body. LICHFL may seek / receive information from any source / person to consider this Application. I / We further agree that my / our Loan shall be governed by the Rules of LICHFL which may be in force from time to time. I / We understand that the Upfront Fee is not refundable under any circumstances, and the Loan Sanction or Rejection is at the sole discretion of LICHFL, even after payment of such Fee. I / We am / are aware that the Original Title Deeds (including the Chain of Title) in respect of the Property standing in my / our name will have to be deposited to LICHFL as Security for the Loan. In purchase cases, I / we am / are aware that the Loan Cheque will be given in the favour of the Vendor only and I / we agree to this procedure. I / We further undertake to abide by the procedures laid down by the Reserve Bank of India in respect of Housing Loans to NRIs / PIOs from time to time.

Applicant's Signature : _____

Co-applicant's Signature : _____

Place: _____ Date: _____

Recent Passport-size
 Photograph of the
 Applicant with
 Signature across

Recent Passport-size
 Photograph of the Co-
 applicant with Signature
 across

Mail Correspondence to: Residence Address Office Address Permanent Address

Recent Passport-size

Photograph
of the Applicant
With Signature
across

Recent Passport-size

Photograph
of the Co-Applicant
With Signature
across

File No. _____

Agent: _____

HLA/DSA/CRA Code: _____



LIC HOUSING FINANCE LTD.

	APPLICANT			CO-APPLICANT		
Specimen Signature						
Full Name	Surname	First Name	Middle Name	Surname	First Name	Middle Name

Please draw Route Map of the Property in the space provided below.

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FOR OFFICE USE
(To be completed by the Area Office)

S. No.	Date of Visit	Visited by	Observation	Amount Paid, if any	Initials

