



LOAN APPLICATION FORM

Registered Office:

Edelweiss Housing Finance Limited (EHFL)

Edelweiss House, Off CST Road, Kalina, Mumbai 400098 Tel: +91 22 4009 4400
CIN: U65922MH2008PLC182906 | www.edelweisshousingfin.com

ECL Finance Limited (ECLFL)

Edelweiss House, Off CST Road, Kalina, Mumbai 400098 Tel: +91 22 4009 4400
CIN: U65990MH2005PLC154854 | www.edelweisssretailfin.com

Edelweiss Retail Finance Limited (ERFL)

2A & 2B, Savitri Tower, 3A, Dr. Martin Luther King Sarani,
(Formerly Upper Wood Street), Kolkatta 700017
CIN: U67120WB1997PLC082953 | www.edelweisssretailfin.com

Application No.

Applicant
Affix recent
passport size
Color photograph
with
signature across it

Co-Applicant
Affix recent
passport size
Color photograph
with
signature across it

Co-Applicant
Affix recent
passport size
Color photograph
with
signature across it

Co-Applicant
Affix recent
passport size
Color photograph
with
signature across it

Please fill in all the required details in CAPITAL LETTERS. Tick ☒ boxes as applicable.

Branch Name		Associate Code		Associate Name		Date	
-------------	--	----------------	--	----------------	--	------	--

DETAILS OF LOAN FACILITY APPLIED

Type of Loan	<input type="checkbox"/> Purchase of Residential Property	<input type="checkbox"/> Purchase of Commercial Property	<input type="checkbox"/> Lease Rental Discounting	<input type="checkbox"/> Loan Against Property
	<input type="checkbox"/> Construction of Residential property	<input type="checkbox"/> Balance Transfer: Bank / Institution name _____		
Type of Property	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Mixed Usage	
Status of the Property	<input type="checkbox"/> Self Occupied	<input type="checkbox"/> Rented	<input type="checkbox"/> Vacant	
Purpose of Loan	<input type="checkbox"/> Loan Consolidation	<input type="checkbox"/> Property Purchase	<input type="checkbox"/> Business Use	<input type="checkbox"/> Personal Use
	<input type="checkbox"/> Others specify _____			
Required Loan Amount	₹ <input type="text"/>	Required tenure in years	<input type="text"/>	
Value of the Property	₹ <input type="text"/>	Built-up Area	<input type="text"/>	Sq.ft. <input type="text"/>
Property Address	<input type="text"/>			
Landmark	<input type="text"/>			Pin Code <input type="text"/>
City	<input type="text"/>			State <input type="text"/>
Stage of Construction	<input type="checkbox"/> Fully Constructed	<input type="checkbox"/> Under Construction	<input type="checkbox"/> Progress _____%	Property Identified <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N.A.
Owner of property	<input type="checkbox"/> Applicant	<input type="checkbox"/> Co-applicant	<input type="checkbox"/> Jointly	
If jointly pls. mention owner's name _____				

DETAILS OF THE INDIVIDUAL APPLICANT

Name	<input type="text"/>											
Father's/Spouse's Name	<input type="text"/>											
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
No. of dependents	<input type="text"/>	Are you a citizen of India		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Caste	<input type="checkbox"/> General	<input type="checkbox"/> ST	<input type="checkbox"/> SC	<input type="checkbox"/> Others _____		
Residence Address	<input type="text"/>											
Landmark	<input type="text"/>								Pin Code	<input type="text"/>		
City	<input type="text"/>								State	<input type="text"/>		
Residence is	<input type="checkbox"/> Owned	<input type="checkbox"/> Rented	<input type="checkbox"/> Company provided	<input type="checkbox"/> Others (pls specify) _____	No. of years at above residence	<input type="text"/>	<input type="text"/>	No. of years in current city	<input type="text"/>	<input type="text"/>		
Permanent Address	<input type="text"/>											
Landmark	<input type="text"/>								Pin Code	<input type="text"/>		
City	<input type="text"/>								State	<input type="text"/>		
STD Code	<input type="text"/>		Tel No.	<input type="text"/>								
Mobile	<input type="text"/>		PAN No.	<input type="text"/>								
E-mail	<input type="text"/>											
Correspondence Address	<input type="checkbox"/> Residence	<input type="checkbox"/> Office	<input type="checkbox"/> New Property									
Educational Qualification	<input type="checkbox"/> Under Graduate	<input type="checkbox"/> Graduate	<input type="checkbox"/> Professional	<input type="checkbox"/> Post-Graduate	<input type="checkbox"/> Others (pls specify) _____							
If Professional	<input type="checkbox"/> CA	<input type="checkbox"/> Doctor	<input type="checkbox"/> Architect	<input type="checkbox"/> Engineer	<input type="checkbox"/> Lawyer	<input type="checkbox"/> Others (pls specify) _____						
Occupation	<input type="checkbox"/> Salaried	<input type="checkbox"/> Self Employed- Professionals			<input type="checkbox"/> Self Employed- Others			<input type="checkbox"/> Others _____				
Company/Firm Name	<input type="text"/>											
Office Address	<input type="text"/>											
Landmark	<input type="text"/>								Pin Code	<input type="text"/>		
City	<input type="text"/>								State	<input type="text"/>		
STD Code	<input type="text"/>		Tel No.	<input type="text"/>			Extn. No.	<input type="text"/>				
Yrs with current Employer/ Business	<input type="text"/>		Yrs of total experience	<input type="text"/>								
Company/Business type	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Pvt. Ltd. Company	<input type="checkbox"/> Public Ltd. Company	<input type="checkbox"/> Public Sector (PSU)	<input type="checkbox"/> Central Government						
	<input type="checkbox"/> Others _____											
If Salaried, fill details:	Designation	<input type="text"/>								If Self Employed, fill details:	Office Details	<input type="checkbox"/> Owned
	Department	<input type="text"/>										<input type="checkbox"/> Leased

DETAILS OF THE INDIVIDUAL CO-APPLICANT

Name																							
Father's/Spouse's Name																							
Relationship with Applicant																							
Date of Birth	D	D	M	M	Y	Y	Y	Y	Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	Gender	<input type="checkbox"/> M	<input type="checkbox"/> F									
No. of dependents			Are you a citizen of India				<input type="checkbox"/> Yes	<input type="checkbox"/> No	Caste	<input type="checkbox"/> General	<input type="checkbox"/> ST	<input type="checkbox"/> SC	<input type="checkbox"/> Others										
Residence Address																							
Landmark																Pin Code							
City																State							
Residence is	<input type="checkbox"/> Owned	<input type="checkbox"/> Rented	<input type="checkbox"/> Company provided	<input type="checkbox"/> Others (pls specify)	No. of years at above residence					<input type="checkbox"/> Y	<input type="checkbox"/> Y	No. of years at current city					<input type="checkbox"/> Y	<input type="checkbox"/> Y					
Permanent Address																							
Landmark																Pin Code							
City																State							
STD Code						Tel No.																	
Mobile											PAN No.												
E-mail																							
Correspondence Address	<input type="checkbox"/> Residence	<input type="checkbox"/> Office	<input type="checkbox"/> New Property																				
Educational Qualification	<input type="checkbox"/> Under Graduate	<input type="checkbox"/> Graduate	<input type="checkbox"/> Professional	<input type="checkbox"/> Post-Graduate	<input type="checkbox"/> Others (pls specify)																		
If Professional	<input type="checkbox"/> CA	<input type="checkbox"/> Doctor	<input type="checkbox"/> Architect	<input type="checkbox"/> Engineer	<input type="checkbox"/> Lawyer	<input type="checkbox"/> Others (pls specify)																	
Occupation	<input type="checkbox"/> Salaried	<input type="checkbox"/> Self Employed- Professionals	<input type="checkbox"/> Self Employed- Others	<input type="checkbox"/> Others																			
Company/Firm Name																							
Office Address																							
Landmark																Pin Code							
City																State							
STD Code						Tel No.						Extn. No.						Fax No.					
Yrs with current Employer/ Business						Yrs of total experience																	
Company/Business type	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Pvt. Ltd. Company	<input type="checkbox"/> Public Ltd. Company	<input type="checkbox"/> Public Sector (PSU)	<input type="checkbox"/> Central Government	<input type="checkbox"/> Others																
If Salaried, fill details:	Designation											If Self Employed, fill details:	Office Details	<input type="checkbox"/> Owned	<input type="checkbox"/> Leased								
	Department																						

DETAILS OF THE INDIVIDUAL CO-APPLICANT

Name																							
Father's/Spouse's Name																							
Relationship with Applicant																							
Date of Birth	D	D	M	M	Y	Y	Y	Y	Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	Gender	<input type="checkbox"/> M	<input type="checkbox"/> F									
No. of dependents			Are you a citizen of India				<input type="checkbox"/> Yes	<input type="checkbox"/> No	Caste	<input type="checkbox"/> General	<input type="checkbox"/> ST	<input type="checkbox"/> SC	<input type="checkbox"/> Others										
Residence Address																							
Landmark																Pin Code							
City																State							
Residence is	<input type="checkbox"/> Owned	<input type="checkbox"/> Rented	<input type="checkbox"/> Company provided	<input type="checkbox"/> Others (pls specify)	No. of years at above residence					<input type="checkbox"/> Y	<input type="checkbox"/> Y	No. of years at current city					<input type="checkbox"/> Y	<input type="checkbox"/> Y					
Permanent Address																							
Landmark																Pin Code							
City																State							
STD Code						Tel No.																	
Mobile											PAN No.												
E-mail																							
Correspondence Address	<input type="checkbox"/> Residence	<input type="checkbox"/> Office	<input type="checkbox"/> New Property																				
Educational Qualification	<input type="checkbox"/> Under Graduate	<input type="checkbox"/> Graduate	<input type="checkbox"/> Professional	<input type="checkbox"/> Post-Graduate	<input type="checkbox"/> Others (pls specify)																		
If Professional	<input type="checkbox"/> CA	<input type="checkbox"/> Doctor	<input type="checkbox"/> Architect	<input type="checkbox"/> Engineer	<input type="checkbox"/> Lawyer	<input type="checkbox"/> Others (pls specify)																	
Occupation	<input type="checkbox"/> Salaried	<input type="checkbox"/> Self Employed- Professionals	<input type="checkbox"/> Self Employed- Others	<input type="checkbox"/> Others																			
Company/Firm Name																							
Office Address																							
Landmark																Pin Code							
City																State							
STD Code						Tel No.						Extn. No.						Fax No.					
Yrs with current Employer/ Business						Yrs of total experience																	
Company/Business type	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Pvt. Ltd. Company	<input type="checkbox"/> Public Ltd. Company	<input type="checkbox"/> Public Sector (PSU)	<input type="checkbox"/> Central Government	<input type="checkbox"/> Others																
If Salaried, fill details:	Designation											If Self Employed, fill details:	Office Details	<input type="checkbox"/> Owned	<input type="checkbox"/> Leased								
	Department																						

DETAILS OF THE INDIVIDUAL CO-APPLICANT

Name	<input type="text"/>																													
Father's/Spouse's Name	<input type="text"/>																													
Relationship with Applicant	<input type="text"/>																													
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	Gender	<input type="checkbox"/> M	<input type="checkbox"/> F																
No. of dependents	<input type="text"/>	Are you a citizen of India		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Caste	<input type="checkbox"/> General	<input type="checkbox"/> ST	<input type="checkbox"/> SC	<input type="checkbox"/> Others																				
Residence Address	<input type="text"/>																													
Landmark	<input type="text"/>															Pin Code	<input type="text"/>													
City	<input type="text"/>										State	<input type="text"/>																		
Residence is	<input type="checkbox"/> Owned	<input type="checkbox"/> Rented	<input type="checkbox"/> Company provided	<input type="checkbox"/> Others (pls specify)				No. of years at above residence				<input type="text"/>	No. of years at current city				<input type="text"/>													
Permanent Address	<input type="text"/>																													
	<input type="text"/>																													
Landmark	<input type="text"/>															Pin Code	<input type="text"/>													
City	<input type="text"/>										State	<input type="text"/>																		
STD Code	<input type="text"/>				Tel No.				<input type="text"/>																					
Mobile	<input type="text"/>										PAN No.										<input type="text"/>									
E-mail	<input type="text"/>																													
Correspondence Address	<input type="checkbox"/> Residence <input type="checkbox"/> Office <input type="checkbox"/> New Property																													
Educational Qualification	<input type="checkbox"/> Under Graduate <input type="checkbox"/> Graduate <input type="checkbox"/> Professional <input type="checkbox"/> Post-Graduate <input type="checkbox"/> Others (pls specify)																													
If Professional	<input type="checkbox"/> CA <input type="checkbox"/> Doctor <input type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Lawyer <input type="checkbox"/> Others (pls specify)																													
Occupation	<input type="checkbox"/> Salaried <input type="checkbox"/> Self Employed- Professionals <input type="checkbox"/> Self Employed- Others <input type="checkbox"/> Others																													
Company/Firm Name	<input type="text"/>																													
Office Address	<input type="text"/>																													
Landmark	<input type="text"/>															Pin Code	<input type="text"/>													
City	<input type="text"/>										State	<input type="text"/>																		
STD Code	<input type="text"/>				Tel No.				Extn. No.				Fax No.				<input type="text"/>													
Yrs with current Employer/ Business	<input type="text"/>				Yrs of total experience				<input type="text"/>																					
Company/Business type	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Pvt. Ltd. Company <input type="checkbox"/> Public Ltd. Company <input type="checkbox"/> Public Sector (PSU) <input type="checkbox"/> Central Government <input type="checkbox"/> Others																													
If Salaried, fill details:	Designation										<input type="text"/>										If Self Employed, fill details: Office Details									
	Department										<input type="text"/>										<input type="checkbox"/> Owned <input type="checkbox"/> Leased									

DETAILS OF THE NON-INDIVIDUAL APPLICANT

<input type="checkbox"/> Partnership Firm		<input type="checkbox"/> Private Limited Company		<input type="checkbox"/> Public Limited Company		<input type="checkbox"/> Others (pls. Specify)		<input type="text"/>											
Name of the Firm / Company						No. of Partners / Directors						<input type="text"/>							
Legal Address						Date of Partnership Deed / Incorporation						<input type="text"/>							
<input type="text"/>						<input type="text"/>						<input type="text"/>							
Industry Type						PAN No.						<input type="text"/>							
		Name		DOB dd/mm/yy		Nationality		Residential Address						Share holding %*					
Principal Partner 1 / Director / MD																			
Principal Partner 2 / Director / MD																			
Other Partners / Directors (please provide details of all partners) For Partners who are Minors, provide Guardian's name in brackets																			
Partner / Director																			
Partner / Director																			
Partner / Director																			
Partner / Director																			

*Please provide details of share holders holding over 20% share capital.

Details of the contact person in the company		
Name	Designation	Contact No.
<input type="text"/>	<input type="text"/>	<input type="text"/>

DETAILS OF THE NON-INDIVIDUAL CO-APPLICANT

<input type="checkbox"/> Partnership Firm <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Public Limited Company <input type="checkbox"/> Others (pls. Specify) _____					
Name of the Firm / Company				No. of Partners / Directors	
Legal Address				Date of Partnership Deed / Incorporation	
Industry Type		PAN No.			
	Name	DOB dd/mm/yy	Nationality	Residential Address	Share holding %*
Principal Partner 1 / Director / MD					
Principal Partner 2 / Director / MD					
Other Partners / Directors (please provide details of all partners) For Partners who are Minors, provide Guardian's name in brackets					
Partner / Director					
Partner / Director					
Partner / Director					
Partner / Director					

*Please provide details of share holders holding over 20% share capital.

Details of the contact person in the company		
Name	Designation	Contact No.

DETAILS OF THE NON-INDIVIDUAL CO-APPLICANT

<input type="checkbox"/> Partnership Firm <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Public Limited Company <input type="checkbox"/> Others (pls. Specify) _____					
Name of the Firm / Company				No. of Partners / Directors	
Legal Address				Date of Partnership Deed / Incorporation	
Industry Type		PAN No.			
	Name	DOB dd/mm/yy	Nationality	Residential Address	Share holding %*
Principal Partner 1 / Director / MD					
Principal Partner 2 / Director / MD					
Other Partners / Directors (please provide details of all partners) For Partners who are Minors, provide Guardian's name in brackets					
Partner / Director					
Partner / Director					
Partner / Director					
Partner / Director					

*Please provide details of share holders holding over 20% share capital.

Details of the contact person in the company		
Name	Designation	Contact No.

DETAILS OF THE NON-INDIVIDUAL CO-APPLICANT

<input type="checkbox"/> Partnership Firm <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Public Limited Company <input type="checkbox"/> Others (pls. Specify) _____					
Name of the Firm / Company				No. of Partners / Directors	
Legal Address				Date of Partnership Deed / Incorporation	
Industry Type		PAN No.			
	Name	DOB dd/mm/yy	Nationality	Residential Address	Share holding %*
Principal Partner 1 / Director / MD					
Principal Partner 2 / Director / MD					
Other Partners / Directors (please provide details of all partners) For Partners who are Minors, provide Guardian's name in brackets					
Partner / Director					
Partner / Director					
Partner / Director					
Partner / Director					

*Please provide details of share holders holding over 20% share capital.

Details of the contact person in the company		
Name	Designation	Contact No.

DETAILS OF EXISTING LOANS BEING SERVICED

Loan Type	Institution Name	Account No.	Loan Amount	EMI	Outstanding Principal	Balance Tenure

Please also provide the details of existing relationship/ loan facility, if any availed by your group companies /firm /associates from Edelweiss group in the above table
Please attach a separate sheet if number of existing loans exceed the space provided

BANK ACCOUNT DETAILS

Name of Account Holder	Name of Bank	Branch	A/c Operated Since	Account No.(s)	Individual/Joint A/c

FINANCIAL DETAILS

Income / Expenditure

☐ Gross Monthly Income ₹

☐ Annual Benefits ₹

☐ Other income per month ₹

☐ Gross Monthly household income ₹

☐ Monthly household expenditure ₹

Net Worth

☐ Savings in Bank ₹

☐ Deposits ₹

☐ Life Insurance Policy (ies) ₹

☐ Government Instrument (PPF/NFC) ₹

☐ Current Balance in PF ₹

☐ Shares and Securities ₹

☐ Immovable Property ₹

☐ Others Assets ₹

PROCESSING FEE** DETAILS

Amount : ₹

Instrument No.

Bank Name

Date

REFERENCES (EXCLUDING FAMILY)

	Reference 1	Reference 2
Name		
Address		
City		
Occupation		
Pin Code		
No. of Yrs. known		
Phone		
Mobile		
Relationship		

DECLARATION

- 1) I/We agree that the processing fees collected upfront shall be non-refundable, on any ground whatsoever, regardless my/our application is processed or rejected
- 2) Credit appraisal at the sole discretion of :
 - Edelweiss Housing Finance Limited
 - ECL Finance Limited
 - Edelweiss Retail Finance Limited (earlier known as Affluent Dealcom Private Limited)
- 3) I/We declare that the particulars and information provided by me/us shall form the basis of any loan Edelweiss Housing Finance Limited/ECL Finance Limited/Edelweiss Retail Finance Limited (earlier known as Affluent Dealcom Private Limited) may decide to grant to me/us.
- 4) I/We confirm that no insolvency proceedings or suits for recovery of outstanding dues or monies whatsoever or for attachment of my/our assets or properties and/or any criminal proceeding have been initiated and/or are pending against me/us and nor have I/we ever been adjudicated insolvent by any court or other authority
- 5) I/We confirm that I/we have read the terms and conditions of Loan application and relevant brochures and understood the contents thereof
- 6) I/We are aware that the monthly instalment inter alia comprises of interest and principal and will be calculated on the basis of monthly rests
- 7) I/We understand that Edelweiss Housing Finance Limited/ECL Finance Limited/Edelweiss Retail Finance Limited (earlier known as Affluent Dealcom Private Limited) has the right to reject my/our application and I/We shall not hold them responsible for the same. I/We understand and agree that documents submitted for the processing of my/our application shall form a part of the company's record and shall not be returned to me/us
- 8) I/We agree that Edelweiss Housing Finance Limited/ECL Finance Limited/Edelweiss Retail Finance Limited (earlier known as Affluent Dealcom Private Limited) may take up such references and make such enquiries in respect of this loan application as it may deem necessary which may include and not limited to Credit Information Companies at any point in time
- 9) I/We further agree that my/our loan application and loan shall be governed by the rules of Edelweiss Housing Finance Limited/ECL Finance Limited/Edelweiss Retail Finance Limited (earlier known as Affluent Dealcom Private Limited) which may be in force from time to time
- 10) I/We undertake to inform Edelweiss Housing Finance Limited/ECL Finance Limited/Edelweiss Retail Finance Limited (earlier known as Affluent Dealcom Private Limited) regarding any change in my/our residence/employment and to provide any further information that may be required

Signature/Thumb Impression of Applicant:

Name:

Aadhaar Number:

Service Agency relationship number:

(e.g., Bank A/C Number or Customer Id etc)

Date: ____/____/20____

Signature/Thumb Impression of Co-Applicant:

Name:

Aadhaar Number:

Service Agency relationship number:

(e.g., Bank A/C Number or Customer Id etc)

Date: ____/____/20____

- 11) I/We declare that I/We are / are not related to Director(s)/employee of :

- Edelweiss Housing Finance Limited
- ECL Finance Limited
- Edelweiss Retail Finance Limited (earlier known as Affluent Dealcom Private Limited)

- 12) I/We confirm that the DSA/DST has not collected from me/us any commission/brokerage or any other fee by way of cash or cheque other than the processing fees

- 13) To the extent appropriate for our relationship with you, personal information may be shared for the following purposes : -

- a) to comply with applicable laws, rules and regulations, including anti-terrorism, KYC, anti-money laundering and tax reporting rules and regulations;
- b) to take up such references and make such enquiries in respect of this loan application as it may deem necessary and to comply with legal process, to respond to requests from public, regulatory or government authorities (including authorities outside your country of residency), and to allow us to pursue remedies and limit damage;
- c) to any of our associate / affiliate / group entities including our service providers performing delegated outsourced function to enable them to perform internal business processes (which facilitate transactions) such as risk management purposes, data analysis, audits, developing and improving new products and services, etc;
- d) to any of our associate / affiliate / group entities to enable them to provide you with appropriate products and services; You have the right to not provide (or to withdraw by written notice at any time) your consent to the collection, use, processing and sharing of your personal information. If you choose to not provide (or to withdraw) your consent, we may not be able to provide you with certain products and services

- 14) Consent for E-KYC: OPTIONAL

[] Mark a tick to provide consent to below option

I hereby state that I have no objection in authenticating myself with Aadhaar based authentication system and consent to providing my Aadhaar number, Biometric and/or One Time Pin (OTP) data (and/or any similar authentication mechanism) for Aadhaar based authentication for the purposes of availing of the Credit facilities from Edelweiss. I understand that Edelweiss shall ensure security and confidentiality of my personal identity data provided for the purpose of Aadhaar based authentication and shall be used in relation to my credit facilities from Edelweiss and for specific consents provided by me

Signature/Thumb Impression of Co-Applicant:

Name:

Aadhaar Number:

Service Agency relationship number:

(e.g., Bank A/C Number or Customer Id etc)

Date: ____/____/20____

Signature/Thumb Impression of Co-Applicant:

Name:

Aadhaar Number:

Service Agency relationship number:

(e.g., Bank A/C Number or Customer Id etc)

Date: ____/____/20____

CUSTOMER CLASSIFICATION

- ☐ High net-worth clients (Having annual income + networth of more than Rs. 1 crore)
- ☐ Trust, Charities, NGOs and organizations receiving donations
- ☐ Company having close family shareholdings or beneficial ownership
- ☐ Civil Servant or family member or close relative of civil servant
- ☐ Bureaucrat or family member or close relative of bureaucrat
- ☐ Current or Former MP, MLA or MLC or their family member or close relative
- ☐ Politician or their family member or close relative

- ☐ Current or Former Head of State or of Governments or their family member or close relative
- ☐ Senior government/judicial/military officers or their family member or close relative
- ☐ Senior executives of state-owned corporations or their family member or close relative
- ☐ Companies offering foreign exchange offerings
- ☐ None

MOST IMPORTANT DOCUMENT

Thank you for your application to Edelweiss Housing Finance Limited/ECL Finance Limited/Edelweiss Retail Finance Limited ("EHFL/ECLFL/ERFL") for Home Loan/Loan Against Property ('LAP'). To ensure that there is clarity regarding EHFL/ECLFL/ERFL's product features you are requested to go through the following and sign your acceptance of the same. Kindly retain the copy of this document for your future reference.

1. **Processing Fee:** ₹ _____/- (non refundable in nature) to be paid along with application form.
2. Rate of Interest : EHFL/ECLFL/ERFL Variable / Fixed rate:.....% Effective floating rate of interest:.....%p.a. (Monthly Rest)

EHFL/ECLFL/ERFL shall at its sole discretion and under intimation to you, be entitled to amend or modify above mentioned charges prospectively and all such amendments or modifications shall be deemed to be effective and binding on you.

By accepting this letter you, (Name of borrower) confirm that you have read and understood the contents of MID as aforesaid. You also confirm that you have not been promised any gifts / discounts or any other commitment whatsoever which is not documented above or any other document. Further, you confirm that no cash has been collected from you with respect to the loan.

You have received the KYC Form giving necessary information on KYC. KYC and Fair Practices Code information is available at all the branches free of cost.

* Above fee and charges are inclusive of service Tax, education cess & other govt. taxes, levies etc.

Date

Applicant Signature:	Co-Applicant Signature:	Co-Applicant Signature:	Co-Applicant Signature:

Write to us at: **Edelweiss Housing Finance Limited** - homeservice@edelweissfin.com | **ECL Finance Limited** - Eclf.grievancecell@edelweissfin.com
Edelweiss Retail Finance Limited - homeservice@edelweissfin.com

Acknowledgement

Registered Office:

Edelweiss Housing Finance Limited / ECL Finance Limited: Edelweiss House, Off CST Road, Kalina, Mumbai 400098 | www.edelweissretailfin.com
Edelweiss Retail Finance Limited: 2A & 2B, Savitri Tower, 3A, Dr. Martin Luther King Sarani, (Formerly Upper Wood Street), Kolkata 700017

Application No. _____

Name of the applicant

Loan Amount Applied Date

Mobile No. of the Sales executive

Note : Credit appraisal at the sole discretion of Edelweiss Housing Finance Limited/ECL Finance Limited (Edelweiss Retail Finance Limited)

MOST IMPORTANT DOCUMENT

Thank you for your application to Edelweiss Housing Finance Limited/ECL Finance Limited/Edelweiss Retail Finance Limited ("EHFL/ECLFL/ERFL") for Home Loan/Loan Against Property ('LAP'). To ensure that there is clarity regarding EHFL/ECLFL/ERFL's product features you are requested to go through the following and sign your acceptance of the same. Kindly retain the copy of this document for your future reference.

1. **Processing Fee:** ₹ _____/- (non refundable in nature) to be paid along with application form.
2. Rate of Interest : EHFL/ECLFL/ERFL Variable/Fixed rate:.....% Effective floating rate of interest:.....%p.a. (Monthly Rest)

EHFL/ECLFL/ERFL shall at its sole discretion and under intimation to you, be entitled to amend or modify above mentioned charges prospectively and all such amendments or modifications shall be deemed to be effective and binding on you.

By accepting this letter you, (Name of borrower) confirm that you have read and understood the contents of MID as aforesaid. You also confirm that you have not been promised any gifts / discounts or any other commitment whatsoever which is not documented above or any other document. Further, you confirm that no cash has been collected from you with respect to the loan.

You have received the KYC Form giving necessary information on KYC. KYC and Fair Practices Code information is available at all the branches free of cost.

The Company would endeavor to dispose your loan application within 6 weeks of submitting satisfactory information and documents

* Above fee and charges are inclusive of service Tax, education cess & other govt. taxes, levies etc.

Write to us at: **Edelweiss Housing Finance Limited** - homeservice@edelweissfin.com | **ECL Finance Limited** - Eclf.grievancecell@edelweissfin.com
Edelweiss Retail Finance Limited (ERFL) - homeservice@edelweissfin.com

"The rate of interest applicable to the loan facility availed shall be as prevailing on the date(s) of disbursement(s) and will be based upon inter-alia the Company's evaluation of the customer such as professional qualification, creditworthiness, risk profile, security, repayment track record, external ratings etc. Based on the interest rate model adopted by Company, the rate of interest for the same product and tenor may vary for different customers depending upon the abovementioned factors."



KNOW YOUR CUSTOMER – WHAT YOU MUST KNOW

The Company has framed a 'KYC guidelines, wherein certain personal information of the customer or prospective customer is required to be obtained.

What is KYC and when does it apply?

KYC procedures enable the Company to know/understand their customers and their financial dealings better which in turn help them manage their risks prudently. KYC is ongoing process and start with the beginning of relationship with the customer and run through the life cycle of the customer relationship.

What are the objectives of KYC?

- ensuring that only legitimate and bona fide customers are accepted
- ensuring that customers are properly identified and the risks they may pose
- verifying the identity of customers using reliable and independent source of document
- monitoring customer accounts and transactions to prevent or detect illegal activities
- Implementing processes to effectively manage the risks posed by customers trying to misuse facilities.

Which category of customers are these KYC requirements applicable?

The KYC requirement is applicable to all categories of customers transacting with the Company.

What documents are collected under KYC?

As per KYC Guidelines, minimum one colored photograph, one document of proof of identity and one document of proof of residence is required. The self - attested photocopies of required document are to be submitted and original is required to be shown for verification. An indicative list of KYC documents required for various categories of customers is given below:

Individual	Company	Partnership Firm
Photograph, ID proof i.e. Passport / PAN card / Voter ID card / driving license/ Identity card subject to Company's satisfaction Address proof i.e. Telephone Bill/ Bank A/c statement /passbook, ration card/ letter from employer (subject to Company's satisfaction).	i) Certificate of incorporation and MOA & AOA ii) Resolution of the Board of Directors & Power of Attorney (POA) granted to its managers, officers or employees to transact business on its behalf iv) PAN card or copy of PAN allotment letter v) Any Officially Valid Document in respect of managers, officers or employees holding POA.	i) Registration certificate, if registered ii) Partnership Deed iii) POA granted to a partner or an employee of the firm to transact business on its behalf iv) Any Officially Valid Document identifying the partners and the persons holding the POA and their addresses v) Telephone bill in the name of firm/partners.

Why should I / We comply?

Compliance of KYC requirements is mandatory under Prevention of Money Laundering Act, 2002 and rules made there under.

What if there is any change in KYC documents during life time of loan?

The changes in any of the information under KYC documents are required to be brought to the notice of the Company at the earliest.

What is Prevention of Money Laundering Act, 2002?

In India, the Anti Money Laundering (AML) mechanism is primarily governed by Prevention of Money Laundering Act, 2002 (PMLA). In each country, installation of effective mechanism, to prevent 'Money Laundering' and 'Financing Terrorism' has become an imperative task.

What are the consequences of non-compliance of KYC requirement?

If any application or existing customer profile under review found deficient due to lack of mandatory KYC documentation, further transactions may not be permitted. Also, the application shall be considered as invalid and shall not be processed further.

Disclaimer: This is an informative document prepared with a view to educate the customers about certain FAQs around KYC guidelines and Prevention of Money Laundering Act, 2002. The readers of the document are advised to contact the Company officials for detailed "KYC guideline" and any clarification / interpretation thereunder. Due care has been taken for preparing this document, however, in case of any contradiction the legal interpretation of KYC guidelines, Prevention of Money Laundering Act, 2002 shall be final and binding. Customers are further advised to regularly visit website of National Housing Bank at www.nhb.org.in