

Occupation Details - Applicant / Co-Applicant

- 1. Salaried Self employed Others _____ (Retired/Housewife/Professional/Student)
- 2. Name of Company: _____
- 3. Office Address: _____

City: _____ PIN _____ State _____
STD Code: _____ Tel.: _____ Mobile: _____
Email: _____
- 4. Office Address status: Owned Rented NA 5. Nature of business: _____
- 6. No of years in business/service _____ 7. Type of business premise: Gala Retail Shop Office Others
- 8. Type of company: Sole Proprietorship Partnership Firm Private Ltd Ltd company HUF PSU Govt. MNC
- 9. Date of Incorporation: DD MM YYYY GST No. _____
- 10. Industry Type: Mfg. Trading Service Others _____

Personal Details - Co-Applicant / Guarantor / POA Holder (for NRI)

- 1. Applicant Name Prefix First Name Middle Name Last Name _____
- 2. Mother Name _____
- 3. Father /Spouse Name _____
- 4. Name of authorised signatory: _____
- 5. Date of Birth/Date of Incorporation/Registration: DD MM YYYY Nationality _____
- 6. Gender Male Female Transgender 7. Marital Status: Married Single Others
- 8. Category Gen SC ST OBC Minority Others
- 9. Location Rural Semi Urban Urban Metro
- 10. Residential Status: Resident NRI 11. Number of dependents: _____
- 12. Education: Under-Graduate Graduate Post-Graduate Professional Others _____
- 13. Passport No. _____ Exp. Date _____
- 14. PAN: _____ 15. Driving Lic No. _____ Exp. Date _____
- 16. Voter ID Card No. _____ 17. UID/VID (optional) _____
- 18. Residence Address/Registered Office Address _____

City: _____ PIN _____ State _____
STD Code: _____ Tel.: _____ Mobile: _____
Email : _____
- 19. Permanent Address: _____

City: _____ PIN _____ State _____
STD Code: _____ Tel.: _____ Mobile: _____
Email : _____
- 20. Are you staying together _____ 21. Relationship with applicant _____



Occupation Details - Co - Applicant/Guarantor

- 1. Salaried Self employed Others _____ (Retired/Housewife/Professional/Student)
- 2. Name of Company: _____
- 3. Office Address: _____

City: _____ PIN _____ State _____
STD Code: _____ Tel.: _____ Mobile: _____
Email: _____
- 4. Office Address status: Owned Rented NA 5. Nature of business: _____
- 6. No of years in business/service _____ 7. Type of business premise: Gala Retail Shop Office Others
- 8. Type of company: Sole Proprietorship Partnership Firm Private Ltd Ltd company HUF PSU Govt. MNC
- 9. Date of Incorporation: DD MM YYYY GST No. _____
- 10. Industry Type: Mfg. Trading Service Others _____

10. I/ We expressly authorise/consent to the Company, its group companies and other companies within the Tata group, its various service providers or agents, to contact me / us, through e-mails, telephones, messages, SMS, Whatsapp or other applications or otherwise even if my / our names appear in the Do Not Call or Do Not Disturb Register to inform me / us about the marketing schemes, promotional schemes, various financial and other products and/or offerings of other services, loyalty programs or any other aspect offered by them. I / We agree to the use of e-mails, messages, SMS, Whatsapp and/or other applications for communication or sharing of information or documents, agree to abide by the terms and conditions of such applications and agree to the risks associated with such applications or sharing of information through them. I / We agree that this consent shall continue to be valid even if the loan applied for has been rejected or closed.
11. I/We authorize the Company and all its group companies, their agents and service providers to exchange, share or part with all the information and details (including personal sensitive data or information and any information that requires a consent under the Information Technology Act, 2008 and/or any other statute) relating to my/our existing loans and/or repayment history to other group companies, bank, financial institutions, credit bureaus, information utilities, agencies, statutory bodies etc. as may be required or as they may deem fit and shall not hold the Company or any of its group companies or its agent/ representatives liable for use/sharing of this information.
12. I/ We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/Email address.
13. More particularly, I/ We hereby consent to the Company updating/furnishing my/our KYC data on the Centralised KYC Registry (CKYCR) or such other database or repository as may be prescribed from time to time as also access, download and procure data therefrom and rely upon the same for the purpose of KYC checks and it shall be my/our responsibility to ensure that the data is correct and updated and to immediately intimate in writing in case of any changes to the data. The Company may also verify the data in such manner as it deems fit and seek additional information or perform enhanced due diligence. I consent to receive information/intimation from the Company/CKYCR through SMS/Email on the above registered number/Email address notwithstanding my/ our names and / or numbers appearing in the Do Not Call or Do Not Disturb registry.
14. I/We hereby provide our consent to the Company to obtain and / or submit my / our information from / to Credit Information Company and/or information utility and/ or such institution set up under the provisions of law from time to time, as and when required.
15. The Company has adopted the Tata Code of Conduct ("TCoC") and all our employees and representatives are bound by the same. A copy of the TCoC is available on www.tatacapital.com. In case you notice any violation or potential violation of the TCoC by any of our employees or representatives, you may write to us at ethics@ tatacapital.com intimating us of the same.
16. The company /its Group Companies reserve the right to retain the photographs and documents submitted with the application and will not return the same to me / us.

17. (Tick whichever is applicable): I / We hereby expressly authorize TCHFL's group companies offering insurance products to send me / us communications regarding insurance products through any of the modes of communication referred above.

I / We do not want to receive any communication regarding insurance products

18. I/We hereby declare that I/We have understood and read the terms & conditions given above

Signature of the Applicant

Signature of the Co applicant / Guarantor/POA Holder

Name: _____

Name: _____

In case of Company / Firm: For and on behalf of _____

Name of the Authorised Signatory: _____

Signature

Date: _____ Place: _____

Sourcing Details

Location:

Branch:

DSA/DST/Channel Name:

DSA/DST/Channel Code:

Referrer/Connector Name:

Mobile Number:

Vertical: Normal Home Loan

Affordable Housing Finance

Construction Finance

Home Equity

DSA/DST/Channel Signature

DSA/DST/Channel stamp

TATA CAPITAL HOUSING FINANCE LIMITED

CUSTOMER COPY

ACKNOWLEDGMENT OF LOAN APPLICATION FORM

Dear Sir/Madam,

This to acknowledge receipt of your loan Application No. **TCHFL -** _____ Dated _____

It is our endeavour to process the loan application within 7 days, subject to furnishing of all the necessary documents as required by TATA CAPITAL HOUSING FINANCE LIMITED.

DSA/DST/Channel Name _____ Code _____ Stamp _____