



STATE MORTGAGE AND INVESTMENT BANK PERSONAL LOAN APPLICATION FORM

Photograf of the
applicant/s

1). PERSONAL DETAILS

	Applicant I	Applicant II/ Spouse
Full Name (Mr./Mrs./Miss.)		
Date of Birth (dd/mm/yyyy)		
Civil Status	Single	Single
NIC/DL/Passport No.		
Residential Address		
Length of stay at present Address		
Telephone (Home/Mobile)		
Verified By		
Academic & Professional Qualification		
Number of children and other dependents & their names In full		

2). EMPLOYMENT DETAILS

Name of the Employer or Business		
Designation/Profession		
Permanent/Contract/Other)		
Nature of Business		
No of years in Service/Business		
Address		
Telephone /Fax		
Email address		
Previous employment details (If less than 3 years in present employment)		

03). BANK ACCOUNTS MAINTAINED BY THE APPLICANT/S & SPOUSE

Name of Bank & Branch	Name of Account Holder	Type of Account	Account No.	Present Balance

4). MONTHLY INCOME & EXPENDITURE (Please furnish documentary evidence)

Income			Expenditure		
Source	Applicant I	Applicant II	Source	Applicant I	Applicant II
Profession/ Employment			House hold expenses		
Business			Travelling		
Interest			Medical		
Dividends			Loans/Lease/ Credit card		
Commissions			Tax Provision		
House rent			Utility Bills		
Lease			Insurance		
Other			Rent		
			Other		
Total			Total		

05). FACILITY REQUIRED

Purpose of Loan (Strike what is inappropriate)	Purchase of land/ Construction of a house/ Purchase of a house property/ Purchase of land & Construct a house/ Renovations & Repairs/ Purchase of an apartment/ Transfer of housing loan/ Redeem of debt/Purchase a Vehicle/ Agriculture & Industrial Industry					
Loan amount required (Rs.)						
Repayment period (Yrs)	1	2	3	4	5	Other
Purchase price/ Total estimated cost (Bill of Quantity Value)						
Applicant's contribution						

06). TAX PARTICULARS FOR THE PAST 3 YEARS (Provide relevant tax receipts)

Year of assessment	Year		Year		Year	
	Applicant	Applicant II	Applicant	Applicant II	Applicant	Applicant II
Statutory Income						
Assessment Income						
Taxable Income						
Tax Paid						

07). EXISTING FACILITIES WITH SMIB (IF ANY)

Loan No.	Type of facility	Original amount	Present outstanding	Interest rate	Monthly installment	Securities offered	Remaining repayment period (in months)

08). FACILITIES WITH OTHER BANKS/ INSTITUTIONS

Bank & Branch	Type of facility	Original amount	Present outstanding	Interest rate	Monthly installment	Securities offered	Remaining repayment period (in months)

9). ASSETS DECLARATION**9.1). Land & Buildings**

Property	Deed No.	Attested By	Date of Attestation		
	Prior Registration (Division & folio)				
	Plan No.	Lot No.	Name of the land		
	Name of Surveyor				
	Village/ Street	Extent	Value	Mortgaged (if any)	

9.2). Motor Vehicles

Registered number	Make & Model	Owned by	Market Value (Rs.)	Mortgages (if any)

9.3). Shares/ Treasury bills/ Fixed deposits

Name of Company	Shares/ Treasury Bills/ Bonds/Fixed Deposits	Value	Credit Facilities (if any)

9.4). Savings Account / Current Account

Name of account holder	Institution & Branch	Account no.	Date of opening	Balance

10) Security
GUARANTOR – 1

NAME IN FULL: MR / MRS / MS /DR.....

GUARANTOR – 2

NAME IN FULL: MR / MRS / MS /DR.....

11). DECLARATION

I/We hereby declare that the above information given by me/us is/are true and correct and the bank reserves the right to reject the application at it's sole discretion without providing any reason.

(1) Name of Borrower:.....

(1) Signature:.....

(2) Name of Co-borrower:.....

(2) Signature:.....

Date:.....

Date:.....

DOCUMENTS TO BE SUBMITTED BY APPLICANT WITH APPLICATION FORM

- If you maintain an account with a Bank/s- originals or certified copies of statements for the last 6 months / Savings A/C Pass book.
- Documentary evidence to confirm employment / Salary, etc.
- Letter of undertaking of salary remittance
- Documentary evidence to prove income / repayment capacity
- Performa Invoice / Quotations /B.O.Q /Sales agreement
- Photocopies of NIC's of applicant
- Copy of Business Registration if applicable.
- Tax payment receipts for past 3 years.
- Photograph of the applicant.
- Documentary evidence to prove Assets
- Copy of a utility bills (other than the mobile phone bill)
- Sketch of the route to the permanent residence

Guarantors

- Bank Statements
- Salary Confirmation & Income details.
- Photocopies of NICs of guarantors.
- Copy of Business Registration if applicable.
- Tax payment receipts for last 3 years.
- Documentary evidence to prove the Assets or Asset & Liability declaration.

**ADDITIONAL SECURITY INFORMATION
GUARANTOR – 1**

NAME OF THE APPLICANT : MR / MRS / MS /DR				
LOAN AMOUNT Rs.				
NAME OF THE GUARANTOR : MR / MRS / MS /DR				
PERMANANT ADDRESS:				
BUSINESS ADDRESS / OFFICIAL ADDRESS:				
NIC NO.	TELE	HOME	OFFICE	MOBILE
OCCUPATION / NATURE OF BUSINESS				
NAME OF EMPLOYER / BUSINESS				
INCOME	SALARY (RS.)	ALLOWANCES	OTHER	

INCOME & EXPENDITURE STATEMENT

SOURCE OF INCOME		NET INCOME (LKR)
ADD	EMPLOYMENT:	
	BUSINESS:	
	OTHER:	
TOTAL INCOME:		
LESS	LIVING EXPENCES:	
	LOAN REPAYMENTS:	
	OTHER:	
NET INCOME:		

PARTICULARS OF ASSETS OWNED

IMMOVABLE ASSETS

LOCATION	EXTENT	VALUE (RS)	MORTGAGES (IF ANY)

MOVABLE ASSETS

PARTICULARS VEHICLES/INSURANCE/SHARES/ FIXED DEPOSITS ETC.	REGISTRATION / POLICY / CERTIFICATE NO	TYPE & QUANTITY	VALUE (RS.)	MORTGAGES (IF ANY)

BANKING & FINANCIAL FACILITIES INCLUDING FACILITIES WITH SMIB BANK

Please mark with (√) as appropriate (L – Leasing / H – Hire Purchase / T – Term Loan / O – Other)

Name of Company / Bank	Type of Facility				Amount Obtained	Amount Outstanding	Monthly Repayment (RS.)	Security
	L	H	T	O				

I hereby declare that the above information given by me is true and correct, and that I am prepared to guarantied the facility required by the above named applicant .

Signature:.....

Date:.....

**ADDITIONAL SECURITY INFORMATION
GUARANTOR – 2**

NAME OF THE APPLICANT : MR / MRS / MS / DR					
LOAN AMOUNT Rs.					
NAME OF THE GURANTOR : MR / MRS / MS / DR					
PERMANANT ADDRESS:					
BUSINESS ADDRESS / OFFICIAL ADDRESS:					
NIC NO.		TELE	HOME	OFFICE	MOBILE
OCCUPATION / NATURE OF BUSINESS					
NAME OF EMPLOYER / BUSINESS					
INCOME		SALARY (RS.)	ALLOWANCES	OTHER	

INCOME & EXPENDITURE STATEMENT

SOURCE OF INCOME		NET INCOME (LKR)
ADD	EMPLOYMENT:	
	BUSINESS:	
	OTHER:	
TOTAL INCOME:		
LESS	LIVING EXPENCES:	
	LOAN REPAYMENTS:	
	OTHER:	
NET INCOME:		

PARTICULARS OF ASSETS OWNED

IMMOVABLE ASSETS

LOCATION	EXTENT	VALUE (RS)	MORTGAGES (IF ANY)

MOVABLE ASSETS

PARTICULARS VEHICLES/INSURANCE/SHARES/ FIXED DEPOSITS ETC.	REGISTRATION / POLICY / CERTIFICATE NO	TYPE & QUANTITY	VALUE (RS.)	MORTGAGES (IF ANY)

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