

The Managing Director

## **OVERDRAFT LOAN APPLICATION FORM**

## (PLEASE USE BLOCK LETTERS, FILL UP THE REQUIRED SECTION ONLY & CROSS OUT UNUSED SECTIONS)

Date: D

Industrial and Infrastructure Development Finance Company Limited Chamber Building (6th Floor), 122-124 Motijheel C/A, Dhaka-1000.												
Dear Sir, With due respect, I/We request you to approve an overdraft loan against the fixed deposit that I/We maintained with vour esteemed organization as detailed below:												
Loan Application Details:												
Applicant Name:												
Contact Address:												
Contact No.:	1. 2.											
Loan Amount:	Tk. (in words:											
Purpose of Loan:												
Loan Tenure:	Up to Maturity Date of the liened Deposit.											
Repayment Mode:	On or before maturity date. If unpaid, please adjust the loan with my deposit at maturity point.											
Security Details:												
In consideration of granting me/us the above loan, I /We (jointly and severally) guarantee to you repayment of the loan facility with all interest due thereon and all applicable charges. By way of security, I/we are hereby giving to you a lien and/or right of set off against the balance in my/our account mentioned below. I/we agree that you are entitled to adjust the security as per process without notifying me/us in the event of renewal/maturity date, if the loan not fully adjusted by me/us.												
Deposit Account No:												
Account Title:												
Deposit Amount:												
Present Interest Rate:												
Please deposit the loar		t after y	our a	pprova	l as pe	er follo	wing	detai	ils:			
Issue an Account Pa	yee ch	eque or	Elect	tronic	Fund	Trans	fer					
Account Name:												
Bank & Branch Name:												
Account Number:									Routing No.:			
Authorization (if any	Authorization (if any)											
I/We hereby authorize Mr./Ms mobile no whose signature is attested below to collect the cheques/ instrument/ documents of my/our deposit on my/our behalf from IIDFC Limited.												
Signature of Authorized Person												
I/we have applied for the aforesaid loan, execute the security and provide IIDFC Limited all the authority as undertake above. I/we authorized the above instructions and agreed to the relevant Terms and Conditions of IIDFC Limited.												
Signature of 1	st Annlic	ant/Δuth	10rize	d Perso	n			Sian	atuv	re of the Joint Applicant/Authorized Person		

Note: All joint – account holders are required to sign regardless of mode of operation.

For Office Use:											
Verification Details:											
[Fill-up by Liability Op	erations]										
Loan Applicant(s) Signature Verified and Matched with Specimen Signature as per IIDFC Record											
Original Instrume	nt Received										
CIB Status				Report Date							
Any Loan Against	the Same Security	YES	NO								
If Yes, Present Ou	tstanding of the Loa	n Account	Tk.								
Principal Deposit:	Tk.			Present Value:	Tk.						
Eligible SOD Limit (%):			Elig	ble SOD Limit:	Tk.						
Loan Approval Detai											
[Fill-up by Liability Op	erations]										
SOD Amount:				Loan Re	commended/ Not Recommended						
% of Principal:											
Amount Proposed:	As Per Policy	Special			Head of Operations						
SOD Term:				Loan Re	ecommended/ Not Recommended						
Deposit Rate:											
SOD Rate:					CFO						
Spread/Margin:				Loan Ap	pproved/ Not Approved						
Rate Proposed:	As Per Policy	Special									
					Managing Director						

Approved on:

Liability Operations