No 21, Sir Razik Fareed Mawatha, Colombo 01, Sri Lanka Phone 0112 353 353

## PERSONAL LOAN APPLICATION (SRI LANKAN RUPEE)



Individual Joint Application type **Applicant** Joint Applicant Relationship with the bank Existing customer with borrowings Existing customer with borrowings Existing customer without borrowings Existing customer without borrowings **New Customer New Customer Account Number Account Number** Branch Branch **Personal Details** Other Title Other Title Mrs Ms Ms Name in Full Name in Full DD/MM/ DD/MM/ YYYY Date of Birth Date of Birth Nationality Sri Lankan Non Sri Lankan \* Nationality Sri Lankan Non Sri Lankan \* \* For Non Sri Lankan \* For Non Sri Lankan Availability of residence visa Yes No Availability of residence visa Yes No Date of expiry of residence visa DD/MM/YYYY Date of expiry of residence visa DD/MM/ Civil Status Civil Status Permanent Address (Local / Overseas) Permanent Address (Local / Overseas) Residential Address (if differs from the permanent address, only) Residential Address (if differs from the permanent address, only) Residence Residence Mobile Mobile Office Office E-mail F-mail NIC No. NIC No. Passport No. Passport No. If applicant is residing overseas contact person in Sri Lanka If applicant is residing overseas contact person in Sri Lanka Name Mobile Name Mobile Relationship Relationship **Employment / Professional Details Employment Type Employment Type** Salaried Salaried Professional Salaried Salaried Professional Self Employed Professional Self Employed Professional Profession Profession Present Position (Designation) Present Position (Designation) Name of Employer Name of Employer Address of Employer Address of Employer **Employment Status Employment Status** Permanent over 02 years Probation Permanent over 02 years Probation Permanent below 02 years Contract Permanent below 02 years Contract Length of service in previous employment Years Months Length of service in previous employment Years Months

Loan Details									
Loan Amount Rs.	Repayment Period Months								
Purpose of the loan									
Repayment Option Fixed Installments Reducing Installments Interest type Fixed Rate Floating Rate									
Monthly Financial Details									
Primary Applicant <u>Inco</u>	Dome Joint Applicant								
Basic Salary Rs.	Basic Salary Rs.								
Fixed Allowances Rs.	Fixed Allowances Rs.								
Professional Income Rs.	Professional Income Rs.								
Variable Income Rs.	Variable Income Rs.								
Income Source (Variable income)	Income Source (Variable income)								
Ехре	enses enses								
Payee Tax Rs.  Existing loan repayments with ComBank and other Banks  Rs.	Payee Tax Rs. Existing loan repayments with ComBank and other Banks  Rs. Rs.								
Credit Cards with ComBank and other Banks	Credit Cards with ComBank and other Banks								
Bank Limit (Rs)	Bank Limit (Rs)								
Salary credited to ComBank (Applicable only for existing customers)  Yes  No	Salary credited to ComBank (Applicable only for existing customers) Yes No								
Availability of Guarantors Yes No									
Declaration									
1. The information given above is true and accurate to the best of my / our knowledge and belief and I / we agree that the bank may from time to time, after receipt of this application make inquiries about my / our affairs as it may think fit. 2. I / We do not have any overdue advances with any Bank or Financial Institution.									
Signature (Primary Applicant)  DD/MM/YYYY  Date	Signature (Joint Applicant)  DD/MM/YYYY  Date								

## CREDIT CARD APPLICATION (PLEASE FILL THE FOLLOWING FOR A FREE CREDIT CARD)



The Manager Commercial Bank of Ceylon PLC (Branch Name)

Card Type						
Mastercard UnionPay VISA						
Personal Details						
Name on Card (Please include surname - 19 characters including spaces):  NIC No  Date of Birth  Mobile  * I wish to obtain free SMS alerts to my above mobile  *Note: All correspondence and the PIN will be mailed to the above address.  If you wish to receive a printed statement too via post please mark  (As a standard practice you will receive your statement as a secured e-statement)						
Supplementary Card						
Please issue a Supplementary Card to the person named hereunder, must be an immediate family member above 18 years.  Title Mr Mrs Miss Dr Others (Specify)  Name in Full (as in NIC)  Name on Card (Please include sumame - 19 characters including spaces):  Date of Birth DD/MM/YYYYY  Supplementary Limit 25% 50% 75% 100% Others  NIC No Relationship						
Card Delivery and Payment Date						
Please deliver my/our card(s) to branch/collection from Card Centre.						
Select <b>one</b> convenient monthly <b>payment date.</b> 5 <sup>th</sup> 10 <sup>th</sup> 15 <sup>th</sup> 20 <sup>th</sup> 25 <sup>th</sup> 31 <sup>st</sup>						
Special Benefits for Commercial Bank Account Holders						
Special Benefits for Commercial Bank Account Holders  Do you wish to settle card bills on the due date automatically by debiting your account at Commercial Bank?  Settlement Account No  (Important) Settlement of  5% * 100% Others (Specify)  *Interest will not be charged to your card account on 100% settlement on or before the due date (In case of joint accounts the consent of all parties to be given in writing.)						
Do you wish to settle card bills on the due date automatically by debiting your account at Commercial Bank?  Settlement Account No  (Important) Settlement of  5% * 100% Others (Specify)  9						
Settlement Account No (Important) Settlement of Set						
Settlement Account No (Important) Settlement of 5% 8 100% Others (Specify) 0 9  **Interest will not be charged to your card account on 100% settlement on or before the due date (in case of joint accounts the consent of all parties to be given in writing)  **Declaration**  This declaration is made to Commercial Bank.  By signing below live ask that an account be opened for me'us and Credit Card(s) be issued. I/We further request that you renew and replace (in them until I/We surrender my/our right to use the Card(s) by custing the Card(s) in 4 pieces and returning all piec to you. I/We authorize my/our bankers or any other sources to release any information to you or you representables that you renew and replace (in them until I/We surrender my/our right to use the Card(s) by custing the Card(s) in 4 pieces and returning all piec to you. I/We authorize my/our bankers or any other sources to release any information to you or your preperentables that you may require from time to them without reference to metals. I all page to accept and the bound by the terms and conditions of the commercial Bank of Ceylon PLE from time to time in future, retaining to credit Card(s) and Supplementary Credit Cards (if We am/are awave that deposits or transfers to my credit card a condition and of this application. In the time in future, retaining to Credit Card(s) and Supplementary Credit Cards (if We am/are awave that deposits or transfers to my credit card such and in the card is and in the card in Single Bank and the card in Single Bank and the card in Single Bank and the special card in Single Bank and the card in Single Bank and the special s						

Authorised Officer's Declaration									
To: Director - Department of Foreign Exchange I, as the Authorized Officer of the bank have carefully examined the information together with relevant documents given by the applicant/s and satisfied with the bona-fide of these information and documents. Further, I as the Authorized Officer of the bank undertake at all times, to exercise due diligence on the transactions carried out by the cardholder on his/ her EFTC in foreign exchange and to suspend the availability of foreign exchange on the EFTC if reasonable grounds exist to suspect that foreign exchange transactions which are not permitted in terms of Directions No. 03 of 2021 dated 18 March 2021 issued under the provisions of the Foreign Exchange Act, No. 12 of 2017 are being carried out on the EFTC, in violation of the undertaking given by the card holders and to bring the matter to the attention of the Director - Department of Foreign Exchange.									
Signature Date									
Approved Limit	Rs	Officer Code Branch Mgr							
LOS Ref			G0 2.G						
Other Remarks									
			28762						
			Scan for ComBank Card						
			Offers & Rewards						
		Card Center Use Only							
		Details of a Relative							
(Please note: Relative mentioned belo	ow should	not be living with you and he/she will be contacted by the Card Centre during the verification process.)							
Relationship									
Home Address		<u> </u>							
		Mobile/ Residence							
Office name and address									
		Office							

## DOCUMENTS TO BE SUBMITTED (WHERE APPLICABLE)

- √ Loan Application
- √ Letter from the employer confirming Employment, Salary & Deductions with the undertaking to the account at Commercial Bank. (Specimen please refer below)
- $\sqrt{\phantom{a}}$  Bank statements of other banks for the past 06 months, where salary is being credited at present.
- $\sqrt{\phantom{0}}$  Salary slips for past 03 months.
- √ Copy of National Identity Card / Valid Passport/ Valid Driving License
- Copy of utility bill (Water / Telephone / Electricity) indicating applicant's name and address. (If current address differs from address given in NIC)
- $\sqrt{}$  Guarantor Statements (if applicable only).

			Specimen - Sa	alary Confirmati	on Letter for Personal Loa	ans
			(1)	Must be on a com	pany letter head)	
The Senior Manage Commercial Bank o						
Date						
Dear Sir/Madam,						
PERSONAL LOAN	TO MR / M	RS /MS				
to Commercial Ban the prior consent o	nk of Ceylon of the Bank.	Plc for	credit of his / her accour		onthly salary / allowances co	ommencing from and shall not change this arrangement withou
We confirm the fol	lowing part	iculars o	of our employee.			1
1) Present Position	n	F				
2) Date Joined		F				]
3) Date confirme						]
4) a) Basic Salar	-	Rs.				]
Deduction	S	Rs. Rs.				
Net Salary b) Allowance	s		Fixed Allowances Rs	5.		
,			Variable Allowances Rs			
We also note to proterminated by us.	omptly info	rm the	Bank, in the event the b	orrower submits	a notice of resignation, retir	res from the organization or his / her employmen
Yours Faithfully,		_				
Authorized Signatu	ıre					
Name						
Designation L Contact No						]
COTTACT INO						1