



Date:

Annexure A: Loan Deferment Application form

Branch office.....

1. Personal Information

Name of the borrower			
Gender:	Male <input style="width: 40px; height: 20px;" type="checkbox"/>	Female <input style="width: 40px; height: 20px;" type="checkbox"/>	Others <input style="width: 40px; height: 20px;" type="checkbox"/>
CID No/License/TPN			
Mobile No.			
Email address			
Present address			

2. Loan Details:

SN	Loan Account Number	Full/ Partial Deferment	Treatment of Interest after Deferment (write down the option)
			1. I will pay off all the accrued interest 2. Capitalize the accrued interest to my loan
1			
2			
3			
4			
5			



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ROYAL INSURANCE CORPORATION OF BHUTAN LTD.

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Please enclose the following documents (wherever applicable):

1. Latest Financial statement for Corporate and Business borrowers
2. For small businesses kindly fill in Annexure B
3. For Hotel sector kindly fill in Annexure C
4. For Contractors kindly fill in Annexure D

Declaration:

I/We understand and undertake:

- a. That the repayment term of my loan will be extended by the period of deferment.
- b. That the deferment of the loan repayment will result in additional interest cost over the course of my loan; and
- c. To provide additional documents, if any to FIs as required to support my deferment eligibility.
- d. That the loan deferment application is subject to assessment by the respective FIs and does not guarantee approval.

I/We hereby declare that the details furnished herein are true and correct to the best of my/our knowledge and ability. In case any of the above information is found to be false or untrue or misleading or misrepresenting or concealed, I/we accept any legal action as per the relevant by-laws, rules and regulations in force. I consent to the FIs to obtain, validate, and verify all my bank accounts and information provided in this form.



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ROYAL INSURANCE CORPORATION OF BHUTAN LTD.

R I C B

"Your partner for growth and security"

Borrower Signature

Name: _____

CID No. _____

Guarantor(s) Signature if applicable

Name: _____

CID No. _____