



APPLICATION FORM

Subscriber
 Guarantor (Tick the box whichever applicable)

Purpose of being a Surety/ Guarantor to Sri/Smt _____ under
 the chit scheme of the company. Chit Group No: _____ ; Ticket No: ____ Chit Amount: Rs _____
 Future liability: Rs _____; Advance Amount Rs. _____
 Purpose _____

Please fill in BLOCK Letters				(Blue Ink Preferable)				
1. Full Name :								
2. Father's/Spouse's Name								
3. If Surety/ Guarantor specify the relationship with the principal Debtor:								
Residential Address			Permanent		Current			
4. a) House Name:								
b) Ward No & House No:								
c) Desam:								
d) Panchayat /Municipality/Corporation:								
e) Lane / Street:								
f) Village:								
g) Taluk:								
h) District:								
i) Post Office with Pin Code:								
j) Mobile Number				Alternate Contact Number				
k) Email ID:								
l)Bank Account No:				m)Branch & IFSC :				
Occupation:		Name of Organization:			Monthly Income:			
GST Number (For Input Tax Credit)								
5. Select which security is being submitted as Collateral: (Tick whichever applicable)								
1) Title Deed: <input type="checkbox"/>		2) LIC Policy : <input type="checkbox"/>		3) FD Receipt <input type="checkbox"/>		4) Non Prized Chit : <input type="checkbox"/>		
5) Salary Recoverable Certificate: <input type="checkbox"/>		6) Gold: <input type="checkbox"/>		7) Chit Security Receipt: <input type="checkbox"/>				
8) Bond/Debenture of Group Firms : <input type="checkbox"/>		9) Personal Surety: <input type="checkbox"/>						
6. Details of existing liability to the Company (if any)								
Branch	Scheme	Subscriber/ Surety/ Guarantor	Chit & Ticket No	Chit Amount	Monthly Subscription /Instalment Amount	No. of installments remitted	Future liability	
							No. offlists.	Amount

I/We, _____ hereby declare that I have no liability to RK Chits. other than what is stated above. I also declare that the information mentioned above is true to the best of my knowledge and belief.

Place:

Date:

Signature:

Name: