Commercial Lease Application Form



Detail of Applicant

Full Name				
ID Card No. Date of Birth: Gender: Male Female				
Permanent Address: Island/ City:				
Present Address: Island/ City:				
Contact Nos. Email ID :				
Educational Qualification: Primary Secondary High School Diploma Degree				
Professional / Others, please specify :				
Marital Status: Single Married Divorced Widowed Number of Children:				
Place of Work: Occupation: Length of Service:				
Co-worker: Contact No: Relationship:				
Details of Spouse(s)				
Full Name				
ID Card No. Date of Birth: Gender: Male Female				
Permanent Address: Island/ City:				
Present Address: Island/ City:				
Contact Nos. Email ID :				
Educational Qualification: Primary Secondary High School Diploma Degree				
Professional / Others, please specify :				
Details of Guarantor				
Full Name				
ID Card No. Date of Birth: Gender: Male Female				
Permanent Address: Island/ City:				
Present Address: Island/ City:				
Contact Nos. Email ID :				

Details of Childrens

Full Name:		ID Ca	ard No.		
Contact No:	Date of Birth:	Gender: N	Male Female		
Full Name:		ID Ca	ard No.		
Contact No:	Date of Birth:	Gender: N	Nale Female		
Full Name:		ID Ca	ard No.		
Contact No:	Date of Birth:	Gender: N	Nale Female		
Full Name:		ID Ca	ard No.		
Contact No:	Date of Birth:	Gender: N	Nale Female		
Full Name:		ID Ca	ard No.		
Contact No:	Date of Birth:	Gender: N	Male Female		
Details of Property					
Property Address :		Island ,	/ City :		
Property Name : If any		Rental	Income :		
Type of Ownership: Own Long-term Lease Developed Any Other:					
Type of Property : House	Apartment No	of Room Lar	nd Sqft:		
Owner / Principal :		Reg No:	No of Owner:		
Details of Landlord / Owr	ner				
Full Name					
ID Card No.	Date of Birth:	Gender: M	lale Female		
Permanent Address:		Island	/ City:		
Present Address:		Island	I/ City:		
Contact Nos.	E	mail ID :			
Details of Tenant					
Full Name:		ID Ca	rd No.		
Contact No:	Contact Date:	Exp Date:	Rent:		

Details of Income & Expenses		Proposed Lease Amount		
Rental Income:	Rent	Lease Amount		
Salary:	Food & Utilities	Lease Period (Month)		
Fixed Income	Existing Loan	Rent (pcm)		
Rental Income	Existing Lease	Est Pay Out		
Other Income	Other Expenses	Lessor Bank		
Total Income	Total Expenses	Account No:		
Details of Asset Fixed Deposit	Provident Fund Shares	Pension Fund ☐ Motor Cycle ☐		
Car Vess	sel Apartment	House Land		
Other		s that your asset insured? Yes No		
Details of Liability	1			
Lenders Name :		Amount borrowed		
Security	Purpose	Amount outstanding		
Lenders Name :		Amount borrowed		
Security	Purpose	Amount outstanding		
Lenders Name :		Amount borrowed		
Security	Purpose	Amount outstanding		
I hereby declare that all information furnished by me is true, correct and complete to the best of my knowledge and belief.				
Name :	Signature :	Date :		
Office use only Documents received by:	Name S	Signature Date Time		
Information verified by:		-		
Approved By :				