


 Lead ID
 RM ID

 Broker ID

 Bank Branch Sol ID

 Bank employee ID

Application form for Resident Indian

 Sourcing Branch

 Sourcing Branch Name

- Please tick whichever is applicable
- All ★ fields mandatory
- Please use BLOCK Letters
- Any incomplete/ incorrect application is liable to be rejected by ICICI Home Finance Company Ltd. ("IHFC" or "Lender")

APPLICANT

CO-APPLICANT

Affix photo of Applicant (individual) with signature

Affix photo of Co-Applicant (individual) with signature

★ 1 PERSONAL DETAILS

| | | Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. <input type="checkbox"/> | Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. <input type="checkbox"/> |
|-----|---|---|---|
| 1 | Full Name: | | |
| 2.1 | Father's Name: | | |
| 2.2 | Mother's Name: | | |
| 2.3 | Spouse Name: | | |
| 3. | Date of Birth | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 4. | Gender : | Male / Female / Transgender | Male / Female / Transgender |
| 5. | Number of dependents | Children <input type="text"/> + Others <input type="text"/> = Total <input type="text"/> | Children <input type="text"/> + Others <input type="text"/> = Total <input type="text"/> |
| 6. | Marital Status | Single <input type="checkbox"/> Married <input type="checkbox"/> Others <input type="checkbox"/> | Single <input type="checkbox"/> Married <input type="checkbox"/> Others <input type="checkbox"/> |
| 7. | Category | General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> MBC <input type="checkbox"/> Others <input type="checkbox"/> (Provide SC/ST/OBC certificate if applicable) | General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> MBC <input type="checkbox"/> Others <input type="checkbox"/> (Provide SC/ST/OBC certificate if applicable) |
| 8. | Qualification | SSC & Below <input type="checkbox"/> Under Graduate <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Professional <input type="checkbox"/> | SSC & Below <input type="checkbox"/> Under Graduate <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Professional <input type="checkbox"/> |
| 9. | PAN | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 10. | Religion | Hindu <input type="checkbox"/> Muslim <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Sikh <input type="checkbox"/> Others <input type="text"/> | Hindu <input type="checkbox"/> Muslim <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Sikh <input type="checkbox"/> Others <input type="text"/> |
| 11. | Current Residence | Owned / Rented / Company Provided | Owned / Rented / Company Provided |
| 12. | Number of years at current Residence | Years <input type="text"/> Months <input type="text"/> | Years <input type="text"/> Months <input type="text"/> |
| 13. | Current Residential Address: | Flat No. / Building Name | |
| | | Road No/ Road Name | |
| | | Area/ Locality | District: |
| | | Landmark | |
| | | City | |
| | State: | Pincode: | |
| 14. | Telephone | Land Line No. STD Code: Resi. | STD Code: Resi. |
| | | Mobile No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 15. | Permanent Residential Address: | Flat No. / Building Name | |
| | | Road No/ Road Name | |
| | | Area/ Locality | District: |
| | | Landmark | |
| | | City | |
| | State: | Pincode: | |
| 16. | Telephone | Land Line No. STD Code: Resi. | STD Code: Resi. |
| 17. | Email ID (Personal) | Personal | |
| | | Official | |
| 18. | Total Monthly Income | | |
| 19. | Company's registration number/CIN Company's PAN (number Date of Incorporation | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| | | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| 20. | GST applicable GSTIN No if applicable Status of GST If the status is Embassy/ Govt. dept. then provide ** UIN (Unique identification Number) | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | | General <input type="checkbox"/> SWZ <input type="checkbox"/> Embassy <input type="checkbox"/> Govt. Dept <input type="checkbox"/> | General <input type="checkbox"/> SWZ <input type="checkbox"/> Embassy <input type="checkbox"/> Govt. Dept <input type="checkbox"/> |

| ★ 2 OCCUPATION | | APPLICANT | | CO-APPLICANT | | | |
|----------------|-----------------------------|---|---|---|---|---|---|
| 2.1. | Occupation | Salaried <input type="checkbox"/> | Self Employed Professional <input type="checkbox"/> | Self Employed Non Professional <input type="checkbox"/> | Salaried <input type="checkbox"/> | Self Employed Professional <input type="checkbox"/> | Self Employed Non Professional <input type="checkbox"/> |
| 2.2. | Organisation Name | | | | | | |
| 2.3.1. | Industry | Manufacturing <input type="checkbox"/> | Service <input type="checkbox"/> | Others <input type="checkbox"/> | Manufacturing <input type="checkbox"/> | Service <input type="checkbox"/> | Others <input type="checkbox"/> |
| 2.3.2. | Date of Incorporation | DDMMYYYY | | DDMMYYYY | | | |
| 2.3.3. | Constitution Type | Proprietorship firm <input type="checkbox"/> | Partnership firm <input type="checkbox"/> | Proprietorship firm <input type="checkbox"/> | Partnership firm <input type="checkbox"/> | | |
| | | Pvt Ltd. Co. <input type="checkbox"/> | Public Ltd. Co. <input type="checkbox"/> | Pvt Ltd. Co. <input type="checkbox"/> | Public Ltd. Co. <input type="checkbox"/> | | |
| | | Trust <input type="checkbox"/> | HUF <input type="checkbox"/> | Trust <input type="checkbox"/> | HUF <input type="checkbox"/> | | |
| 2.3.4. | Total Work Experience | Years <input type="text"/> | Months <input type="text"/> | Years <input type="text"/> | Months <input type="text"/> | | |
| 2.3.5. | Office Address | Unit No. / Building Name | | | | | |
| | | Road No/ Road Name | | | | | |
| | | Area/ Locality | | District: | | | |
| | | Landmark | | | | | |
| | | City | | | | | |
| | | State: | | Pincode: | | | |
| 2.4. | Land Line | STD Code | Number: | STD Code | Number: | | |
| 2.5. | Designation | | | | | | |
| 2.6. | Employee Number | | | | | | |
| 2.7. | Spouse working | Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, Monthly income ₹ _____) | | Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, Monthly income ₹ _____) | | | |
| 2.8. | Preferred Mailing Address | Office <input type="checkbox"/> | Current Address <input type="checkbox"/> | Permanent Address <input type="checkbox"/> | Office <input type="checkbox"/> | Current Address <input type="checkbox"/> | Permanent Address <input type="checkbox"/> |
| 2.9. | Relationship with Applicant | | | | | | |

| ★ 3 DETAILS OF BANK ACCOUNTS | | | | | |
|------------------------------|-----------|--------------|--------|--------------------|---------------|
| Account No. | IFCS Code | Name of Bank | Branch | CA/SA [#] | Banking Since |
| | | | | | |
| | | | | | |
| | | | | | |

[#] CA= Current a/c / SA= Saving Bank a/c

| ★ 4 UPI Handle |
|----------------|
| |

| ★ 5 LIG SARAL (Applicable only if annual household income is between ₹3.0 to ₹6.0 lakhs) | | |
|--|---|--|
| Annual Family Income ₹ <input type="text"/> | Employer Category - Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Trust <input type="checkbox"/> | Loan Amount - ₹6.00 to ₹25.00 Lakhs <input type="checkbox"/> |
| Bank Credit Salary - Yes <input type="checkbox"/> No <input type="checkbox"/> | Pvt. Ltd. Co. <input type="checkbox"/> Public Ltd. co. <input type="checkbox"/> HUF <input type="checkbox"/> | Property Location: Urban <input type="checkbox"/> Rural <input type="checkbox"/> |
| Property : Ready to move in <input type="checkbox"/> Under construction <input type="checkbox"/> | Property Area <input type="text"/> | |

| ★ 6 PROPERTY DETAILS | |
|--|--|
| Details of Property to be purchased / constructed / extended / improved / mortgaged (if not selected, mention intended location) Address : _____ _____ District : _____ Pin: _____ State : _____ Nearest Landmark : _____ | Property status whether its identified : Yes <input type="checkbox"/> No <input type="checkbox"/> Builder <input type="checkbox"/> Society <input type="checkbox"/> Devp. Authority/ Hsg. Board <input type="checkbox"/> Resale <input type="checkbox"/> Self construction <input type="checkbox"/> Construction Stage: Ready <input type="checkbox"/> To commence <input type="checkbox"/> Under construction: Specify stage % _____ Built up Area _____ (sq.ft.) Expected time of completion <input type="text"/> <input type="text"/> <input type="text"/> Years Title of the property will be in the name of _____ |
| LAP (Loan against Property) - Property Type: Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Property Age (in years): <input type="text"/> <input type="text"/> <input type="text"/> Property Status: Self Occupied <input type="checkbox"/> Rented <input type="checkbox"/> Vacant <input type="checkbox"/> Title of property in the name of _____ | Property Value ₹ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |



Application Type*

KYC Number
(Mandatory for KYC update request)

Account Type*

Occupation Type*

New Update

- Normal Simplified (for low risk customers) Small
 S-Service (Private Sector Public Sector Government Sector)
 O-Others (Profession Self Employed Retired Housewife Student)
 B-Business X- Not Categorised

PROOF OF IDENTITY (PoI)*

(Please refer instruction C at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

- A- Passport Number
 B- Voter ID Card
 C- PAN Card
 D- Driving Licence
 E- UID (Aadhaar)
 F- NREGA Job Card
 Z- Others
(any document notified by the Central Government)
 S- Simplified Measures Account - Document Type code

_____ Passport Expiry Date - -

_____ Driving Licence Expiry Date - -

_____ Identification No _____

_____ Identification No _____

TICK IF APPLICABLE

RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA

(Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED*

(Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence*

Tax Identification Number or equivalent
(If issued by jurisdiction)*

Place / City of Birth*

_____ ISO 3166 Country Code of Birth* ____

PROOF OF ADDRESS (PoA)*

(Please see instruction D at the end)

CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type*

- Residential / Business Residential Business Registered Office Unspecified
 Passport Driving Licence UID (Aadhaar)

Proof of Address*

- Voter Identity Card NREGA Job Card Others _____
 Simplified Measures Account - Document Type code ____ please specify

8 DETAILS OF RELATED PERSON

Addition of Related Person

Deletion of Related Person

KYC Number of Related Person

_____ (if available*)

Related Person Type*

Guardian of Minor

Assignee

Authorised Representative

Name*
(IN BLOCK LETTERS)

Prefix _____

NAME _____

MIDDLE NAME _____

SURNAME _____

(If KYC number and name are provided, below details of section 1 are optional)

PROOF OF IDENTITY (PoI)* OF RELATED PERSON

(Please refer instruction H at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

- A- Passport Number
 B- Voter ID Card
 C- PAN Card
 D- Driving Licence
 E- UID (Aadhaar)
 F- NREGA Job Card
 Z- Others
(any document notified by the Central Government)
 S- Simplified Measures Account - Document Type code

_____ Passport Expiry Date - -

_____ Driving Licence Expiry Date - -

_____ Identification No _____

_____ Identification No _____

ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)

- Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

Line 1 _____

Line 2 _____

Line 3 _____

State _____ Zip/ Code _____ City/Town/Village _____ ISO 3166 Country Code _____

★ 9 ABOUT MY FINANCIAL ASSISTANCE REQUIREMENT

Amount Requested ₹ _____ Term _____ Years

Type of assistance: Home Home Improvement Land Office Premises
 Home Equity Residential Home Equity Commercial
 Balance Transfer Others _____

Monthly Expenditure ₹ : _____ Preferred EMI amount _____ p.m.

Purpose of Loan

Purchase Construction Extension Improvement
 Purchase + Construction/ Extension Others (specify): _____
 Top Up Loan against Property

Mode of Re-payment

Direct NACH

Estimate of required Funds (₹)

Land Cost _____
 Construction cost _____
 Total Purchase Cost _____
 Incidental cost (if any) _____
 Other Cost _____
 Total (A) _____

Estimate of sources of funds (₹)

Financial assistance requested from IHFC _____
 Amount already spent (source _____) _____
 PF _____
 Savings from Bank _____
 Others (Specify _____) _____
 Total (B) _____

Note: Total (A) (Requirement of funds) should be equal to Total (B) (source of funds)

10 DECLARATION

- A**
- I / We declare that all the particulars and information given in the application form are true, correct, complete and upto date in all respects and I/We have not with-held any information whatsoever. I/We confirm that I / We have no insolvency proceeding initiated against me/us nor have I / We ever been adjudicated insolvent / bankrupt. I/We have read the application form and brochure and are agreeable to all terms/ conditions of availing financial assistance from IHFC/ its Group companies. I/We authorize IHFC/ its Group Companies/ its Agents to make references and enquiries relevant to the information in this application form which IHFC/ its Group Companies/ its Agents consider necessary. I/We undertake to inform IHFC/ its Group Companies/ its Agents regarding the change in residential addresses to provide any further information that IHFC/ its Group Companies/ its Agents may require.
 - I/We declare and confirm that the credit facilities/ financial assistance if any enjoyed by me/us with other banks/financial institutions has been disclosed herein above.
 - I/We understand that certain particulars given by me/us are required by the operational guidelines governing housing finance companies and that IHFC may provide the credit facilities/ financial assistance mentioned herein only if permitted and if approved in the manner specified or required by the Reserve Bank of India/National Housing Bank ("RBI/NHB")
 - Save and except to the extent as disclosed in this application, I/ We (if a person other than a subsidiary of IHFC or a section 25 company or a government company, or in case of facility/ies are not encompassed by the restrictions specified by the Reserve Bank of India/National Housing Bank [RBI/NHB] from time to time) as applicable represents that: no director or a relative/near relation (as specified by RBI/NHB) of a director of a banking/housing finance company (including IHFC) ora relative/near relation (as specified by the RBI/NHB) of a senior officer of IHFC (as specified by RBI/NHB) is a partner of mine/ us, a director, manager, employee of mine/ us or of a subsidiary of me/us or a subsidiary or the holding company of me/ us, or a guarantor on behalf of/for/to me / us, or holds substantial interest in me/us, or a subsidiary of the holding company of me/us.
 - I/We agree and understand that IHFC reserves the right to reject this application and that IHFC shall not be responsible/ liable in any manner whatsoever to me/ us for such rejection and IHFC shall also not be liable for any costs, losses, damages or expenses or other consequences, caused breason of such rejection, or any delay in notifying me/us of such rejection of our application.
 - I/We acknowledges that IHFC / its Group Companies reserves the right to retain the photographs an documents submitted with this application and will not return the same to the applicant/s.
 - I/We hereby declare and affirm that I/We have not made any payments in cash.
 - I/We hereby agree and authorize IHFC / its Group Companies and their agents to exchange, share or part with all the information, data or document in relation to my / our application including but not limited to the credit repayment, history or any default, if any, committed by me/us to other ICICI Group Companies banks, financial institutions, credit bureaus, agencies statutory bodies or such other persons as IHFC/its Group Companies may deem necessary or appropriate as may be required for use of the said information or data by such person(s) or furnishing of the processed information/data / products thereof to the other banks, financial institutions, credit providers or users registered with such persons as required under applicable laws/statutes or to provide services to the customers for the products availed by them and shall not hold IHFC/ its Group Companies/their agents liable for use of this information.
 - I/We confirm that the initials on this application form are made by me/us and the validity of such initials shall not be disputed by me/us.
 - I/We hereby submit that I/we am/are providing the proof of possession of Aadhaar as KYC document voluntarily at my/our own discretion and I/we are aware that certain other documents can also be submitted as KYC documents
- B**
- I/We (IHFC, its group companies, agents/representatives) would like to keep our customers updated on various products and services related information and special offer from IHFC/group companies and other entities. Please help us to serve you better by giving your consent to receive such information (please tick, appropriately):
 - I/We wish to receive such information through Email alerts - Yes No
 - I/We wish to receive such information through SMS alerts - Yes No
 - I/We wish to receive such information through Phone call - Yes No
 - I/We authorize IHFC to exchange, share or part with all information/ data provided herein including personal and business information with ICICI group companies/other institutions/ such other person as may be necessary/ required for the purpose of, including but not limited to, marketing, cross selling of various products and services etc to me/us, use or process the aforesaid information/data by such person/s, or furnishing of the processed information/data/products thereof to ICICI Group Companies/other Banks/Institutions/other persons as may be necessary, and I/We shall not hold IHFC liable in connection with the use of such information or otherwise: Yes No
 - I/We declare that I/We and/or my family have / has not availed financial assistance for the construction/ purchase of the dwelling unit for my / our family from any bank/ financial institution as on the date of application other than the one for which finance is being availed of through ICICI Home Finance Company Limited. For the purpose of this clause "family" shall mean and include the applicant/co-applicant, his/her spouse and his/ her dependent children respectively. Please confirm whether applicable or not: Yes No
 - I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.
- Note:** No payments should be made in cash.
 The cheque should be filled and signed by applicant and co-applicant.

 D D M M Y Y Y Y
 Signature of Applicant

 D D M M Y Y Y Y
 Signature of Co-Applicant

★ 11 REFERENCES

REFERENCE 1

Name _____
 Address _____
 State _____ Pin code: _____
 Tel (R) _____ Tel (O) _____
 Mobile _____
 Relationship Business partner Friend Neighbor Relative

REFERENCE 2

Name _____
 Address _____
 State _____ Pin code: _____
 Tel (R) _____ Tel (O) _____
 Mobile _____
 Relationship Business partner Friend Neighbor Relative