

Loan Application Form

Date:

Policy No: Owner Name:

Requested Loan Amount: Maximum Please write amount:

Please select any of the method of payment.

Electronic Fund Transfer (EFT, Preferred)

Account Payee Instrument (Cheque)

Please provide your bank details (In Capital English Letter)

A/C Number:

Routing Number:

A/C Name:

Bank Name:

By signing this document, I am hereby confirming I am intending to avail Chartered Life Insurance Company Ltd. policy loan. I understand and accept the current rate of interest for the policy loan. This company reserves right to re-determine the interest of loan anytime without further notice. I accept that CLICL is entitled at its absolute discretion to accept or reject this application without any reason. I am aware of the rate of loan interest as well as terms and condition of the loan. I also confirming that if I am unable for repayment the loan and interest and if loan and interest amount become equal to surrender value or more then the policy will be forfeited immediately. The company will be paid loan and interest through surrender value at its own discretion without further notice.

Signature of Policy Owner

Sign & Seal of FA or above

Sign & Seal of BM or above

Cell number of Policy Owner

Cell number of FA or above

Cell number of BM or above

Please submit the following documents with this form:

- 01. Photocopy of NID/Passport/Driving License (Attested)
- 02. Photocopy of any Bank MICR Cheque leaf of the account cheque book.

For Head Office Use Only.

Record Verified & Processed By