

PERSONAL INFORMATION - APPLICANT 1

(Individual/ Business Applicant)

(Please fill details in Capital letters. All fields marked in Blue are mandatory)

If the Applicant is an existing customer of The Sunshine Investment & Finance, provide Customer ID
Name (Please leave one space between each name) KYC Number
Mr./ Mrs./ Ms./ Dr./ Messrs
Full Name (If abbreviations provided above)
First name Middle name Last name
Date of birth (Individual)/ Incorporation (Business) D M Y Y Y Gender Male Female Third Gender
Father's/ Spouse name Image: Imag
Mother's maiden name
Nationality
Place of birth
LEI number
Registered for GST Yes No
If no, reason for not being registered under GST Individual Below threshold Non Resident* Other
If yes, please fill in the details under GST
PAN No.
Driving Licence
Other Please specify
Current residential address (*For individual applicant)/ registered office address (for non individual applicant)
Address Line 1
Address Line 2
City PIN Code PIN Code
Country Fax/ Landline. No.
Mobile E-mail ID Period of residence in current home Years Months Period of residence in current city
*Please mention overseas address if residing outside India
Address (If different from residential address)
Address Line 1
Address Line 2
City
Country
Education High School Diploma Graduate Post-graduate and above Professional Others
Last degree issued Name of the institution
Employment/ Profession details
Nature of employment Salaried Self-employed Housewife Retired
If salaried, type of employer 🗌 Public Sector 🔲 Government 🗌 Private Limited 🗌 Partnership/ Proprietorship
Designation Department Retirement age



Name of last employer	Years at previous job (if applicable)
If self-employed, operating as	rship 🗌 Proprietorship 🗌 HUF
If professional, are you CA Lawyer Doctor Others	
Type of Industry	
Total years in employment/ business	nt, provide Registration No
Date of commencement of business Country of incorporati	on Tax indentification No. (TIN)
Date of Incorporation	n
LEI number	
Office/ Business address details (If non-individual applicant, provide place	of business)
Name of Employer/ Business	
Address Line 1	
Address Line 2	
City City State	PIN Code
Country	Extension
LEI number	
* Non Resident means anyone who is not a resident of India including for	eign nationals.
	Belongs to minority community 🗌 Yes 🛄 No 🛄 NA
	letworth (In Lacs)
Experience in Current business (Years)	
Chief Promoter Name	
Is the unit Women owned 🛄 Yes 🛄 No	
DIN number (Mandated wherever Person is a Director)	
Number of related persons	
PERSONAL INFORMATION - GUARANTOR/ AUTHORISED SIGNATOR	Y
(Individual/ Business Applicant) (Please fill details Capital letters)	
Security Provider Security Provider Security Provider No	
If the applicant is an existing customer of The Sunshine Investment & Fina	ance, provide Customer ID
Mr./ Mrs./ Ms./ Dr./ Messrs	
First name M	liddle name Last name
Full Name	(If abbreviations provided above)
Date of birth (Individual)/ Incorporation (Business)	Gender 🗌 Male 🗌 Female 🗌 Third Gender
Father's/ Spouse name	
Mother's maiden name	📖 Marital status 🗌 Single 🗌 Married 🔲 Other
Nationality	Resident 🗌 NRI 🗌 PIO/ OCI 🔲 Foreign National
Place of birth	ents
	(For NRI, Please Provide Social Security Number)
LEI number	Jdyam number
Registered for GST	
If no, reason for not being registered under GST \Box Individual \Box Below	v threshold 🗌 Non Resident* 🗌 Other
If yes, plaese fill in the details under GST	
PAN No.	Aadhaar Submitted 🗌 Yes 🗌 No
Driving Licence	Job Card
Other	
Current residential address (*For individual applicant)/ registered office ad	dress (for non individual applicant)
Address Line 1	
Address Line 2	
City State State	PIN Code
Country	STD Code

Mobile	E-mail ID			
Period of residence in o	current home Years Months Period of resi	dence in current city		
*Please mention overse	eas address if residing outside India			
Address (If diffrent from	n residential address)			
Address Line 1				
Address Line 2				
City	State I	PIN Code		
Country	Fax/ Landline. No.			
LEI number	STC) Code		
Education	High School 🗌 Diploma 🗌 Graduate 🗌 Post-gr	aduate and above 🗌 Professional		
	Others			
Last degree issued Na	me of the institution			
Employment/ Professio	n details			
Nature of employment	Salaried Self-employed Hou	Isewife 🗌 Retired		
If salaried, type of emp	loyer 🛛 Public Sector 🗌 Government 🗌 F	Private Limited 🗌 Partnership/ Proprietorship		
Designation	Department	Retirement age		
Name of last employer		Years at previous job (if applicable)		
If self-employed, opera		Partnership Proprietorship HUF		
If professional, are you	CA Lawyer C	Doctor Others		
Type of Industry	(Refer fourth page for codes)	Years in current employment/ business		
Total years in employm	ent/ business	oplicant, provide Registration No		
Date of commencemen		orporation		
Date of Incorporation	D M Y Y Place of Incorporation			
LEI number				
Office/ Business addres	ss details (If non-individual applicant, provide place of	business)		
Name of Employer/ Bus	siness			
Address Line 1				
Address Line 2				
City		PIN Code		
Country	Board No.	Extension		
LEI number				
Physically handicapped	d □ Yes □ No □ NA Belongs to minority co	ommunity 🗌 Yes 🗌 No 🗌 NA		
Caste category	Gen 🗌 SC 🗌 OBC 🗌 ST Netw	vorth (In Lacs)		
Experience in Current b	business (Years)			
DIN number (Mandated	wherever Person is a Director)			
Number of related pers	ons			
MSME Yes N	o PSL Yes No COM	IBO Yes No		
	Investment in Plant and Machinery and Annual Turnover	Investment in Equipment and Annual Turnover		
	Manufacturing Sector	Service Sector		
Micro enterprises	Investment in Plant and Machinery <= INR 1 cr and Annual Turnover <=INR 5 cr	Investment in Equipment <= INR 1 cr and Annual Turnover <=INR 5 cr		
Small enterprises	Investment in Plant and Machinery <= INR 10 cr and Annual Turnover <=INR 50 cr	Investment in Equipment <= INR 10 cr and Annual Turnover <=INR 50 cr		
Medium enterprises	□ Investment in Plant and Machinery <= INR 50 cr and Annual Turnover <=INR 250 cr	Investment in Equipment <= INR 50 cr and Annual Turnover <=INR 250 cr		
Other				
Trader				

BANKING RELATIONSHIP

APPLICANT 1	APPLICANT 2
1. Name of Bank	1. Name of Bank
City	City
Account No.	Account No.
Type of Account Savings Current CC/ OD	Type of Account
(Tick whichever is applicable)	

CREDIT CARD DETAILS

APPLICANT 1	APPLICANT 2
Credit Card No.	Credit Card No.
Name of the Bank	Name of the Bank

DETAILS OF LOANS AND LIABILITIES*

Sr. No.	Institution Name**	Type of Loan	Current O/ s	EMI	Current O/ s	Balance Tenure

* Kindly attach additional sheet, if need arises** If Loan is taken from Employer, kindly mention Employer's name.

CORRESPONDENCE

(Below mentioned corres	pondence would be used for all my existi	ng DB relationships)	
Preferred Correspondence	e Address 🗌 Current Residence Addres	ss 🗌 Permanent Address	
	Registered Address	Offce Address	
Preferred Mode of Conta	ct 🗌 E-mail 🗌 SMS 🗌	Call Home 🗌 Call Offce 🗌 By Post	Mobile
Preferred Time of Contac	t Between 10am-7pm Please suggest	any other suitable time	
LOAN REQUIREMENT			
I/ We hereby apply for a I	oan as follows:		
Loan amount required Rs	s []]]]]]]]]]]]]]]]]]	Loan tenor required years	
Product option	Personal Loan	Business Loan	Agriculture Loan
	Property Purchase Loan	Project Loan	🗌 Top Up - LAP
	Takeover Loan	Term Loan backed by Collateral	Other
Collateral Provided Property Other collateral		Deposits Insurance Policies ntee	Godown
Place		Signature of the applican Date Discussion	
Photo of Applicant 1.	Photo of Applicant 2.	SUN SHI INVESTMENT AND FI	NE
		REGISTERED OF 59 Huda Market Sector- 7 Amba	
		55 Huda Market Sector- 7 Amba	

Email-support@thesunshineinvestment.com Website- www.thesunshineinvestment.com Helpline: 7424830312