New Renewal Enhancement Others

AGRANI BANK LIMITED

cibonline@agranibank.org Phone: 027116817

Inquiry Form: CIB-2A (Person Form)



* *		/=(TK. IN UNIT) (TO BE FILLED IN CAPITAL LETTER)*Applied Date://									
*For Instalment type 1)No. of Instalment	2) Per	riodicity of p	payment.	3	B)EMI					
* Branch Name:											
*Ibca/Moca Number :			*Date:		*Agrani Bı	Code:					
*Subject Code:											
*Name :				•••••		•••••					
*Father's name	·			•••••		•••••					
*Mother's name	·						•••••				
Spouse's name	:			•••••		•••••					
*Birth Day Address: *Permanent:	*				_						
*Post Code:											
Present :		•••••				•••••	•••••	•			
Post Code:	Dist:										
Telephone No :.											
*NID No:											
E-Tin No:											
*Sector Code:	*Gender: a)Male b) Female										
*Tick one (If Owner):											
(by Govt.) /	Nominated Director	- (by Pvt. Insti	tution.) /Part	ner / Prop	rietor/ Shareho	lder/ Other	s/ Guara	antor			
Another ID: (Any one	from the below is	mandatory w	hen Nationa	ıl ID num	ber is not avai	ilable)					
Document type		Document N	No		Issue Date	Coun	try				
Passport/ Driving license	/ Birth certificate										

To the best of our knowledge the above borrower's information and this person obtained the credit facilities from different banks/financial institutions should mention in the attached undertaken.

Borrower Prepared by Manager
(Signature & seal with date) (Signature & seal with date) (Signature & seal with date)

Attachment:

- Undertaken of credit facilities
- Photocopy of NID, TIN certificate and other extra document

Note: Suppressing or distortion of any information (related to borrower/owner) by the banks/financial institution is punishable under Bangladesh Bank Order 1972, Chapter IV Art. 48

* Mark field is Mandatory (If presented)

New Renewal Enhancement Others

AGRANI BANK LIMITED

cibonline@agranibank.org Phone: 027116817

Inquiry Form: CIB-1A (**Institute Form**)



Manager (Signature & seal with date)

					/=(TK. IN UNIT) (TO BE FILLED IN CAPITAL LETTER) *Applied Date://													
*For Instalment ty																		
* Branch Name :																		
*Ibca/Moca Numl	er ·					*Date :					*Agrar	ode:						
*Subject Code:							1	i i		i								
*Institution Nam	e:																	
* Registration NO Address :																		
* a)Busine																		
							*Country:											
b) Factor	-																	
							Country:											
TEL No:	•••••																	
E-TIN:																		
*Sector Code :																		
Industry Type (L Public s	_	,			-		-				ublic L	td. Co	./ Co-o _l	perativo	e /			
To the best of our from different ban													the cre	edit fac	ilities			

Prepared by

(Signature & seal with date)

Attachment:

• Undertaken of credit facilities

Borrower

(Signature & seal with date)

- Photocopy of Trade License, TIN certificate and other extra document
- Photocopy of Company Registration Certificate

Note: Suppressing or distortion of any information (related to borrower/owner) by the banks/financial institution is punishable under Bangladesh Bank Order 1972, Chapter IV Art. 48