

# First Habib Modaraba

## CAR FINANCE APPLICATION FORM



Name (in block letters)

Father's / Husband's Name

Date of Birth 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 cNIC No.

No. of Dependents School Going  Others  Father's / Husband cNIC No.

National Tax No.  Male  Female  Single  Married

Educational Qualification  Professional Qualification

Residential Address

How long have you resided at this address  years How long have you lived in this city  years E.mail

Type of Residence Own  Rented  Parents  Telephone #.

if Rented Monthly rent  Type of Accommodation House  Portion  Apartment  Room

Existing Car (If any)  Make & Model

Car Status Owned  Leased  Company  Parent's  N.A.  Next of Kin Name  Relationship

Address

### DETAILS OF VEHICLE TO BE FINANCED

Make  Model  Local/Imported  Manufacturer / Supplier

Price of Vehicle  Down Payment  Financing amount required

Repayment period  years Delivery of Vehicle  Month Referred by

### FOR SALARIED CLASS :

**EMPLOYMENT INFORMATION**

Employer's Name

Employer's Address

Telephone #  Official Mobile No.  E-mail

Date of Joining 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 Department  Designation

Name of pervious employer. if any  Experience with previous Employer  years Tel

**SALARY INFORMATION** (Rupees in figure)

Gross Salary Monthly

Less Deductions

Provident Fund/Income tax  Loans  Total Deductions  Net Take Home Salary

Accrued Provident Fund  Accrued Gratuity

### FOR SELF EMPLOYED / BUSINESS PERSON

**BUSINESS INFORMATION**

Name of Business

Nature of Business

Established since  Name of Group  Registered with

Business Address

Telephone #  Mobile No.  E-mail

Business premises  Owned  Rented  N.T.N

**INCOME DETAILS** (Rupees in figure)

Annual Gross Income  Other Monthly Income (if any)

Less: Deduction

Tax  Source Business  Rental  Commission  Employment  Other

Others  Total monthly income

Total Deductions  Average Monthly Savings

Net Annual Income

(Please see overleaf)

**BANK ACCOUNTS**

Sr. No.	Bank	Account No.	Type of Account	Branch

**OUTSTANDING FINANCE (if any)**

Sr. No.	Financing Institution	Type of Finance	Monthly Installment (Rs.)	Amount Outstanding (Rs.)

**CREDIT CARD DETAILS (if any)**

Sr. No.	Bank	Name of Credit Card	Member Since	Credit Limit (Rs)	Present Outstanding (Rs)

**MEMBERSHIP CLUB / ASSOCIATION**

Sr. No.	Name	Member Since

**REFERENCES****(CLOSE RELATIVE)****(SOCIAL / BUSINESS)**

1) Name

Address

Relationship

Tel. Nos. Off.  Res.

Mobile No.

cNIC #

NTN #

1) Name

Address

Relationship

Tel. Nos. Off.  Res.

Mobile No.

cNIC #

NTN #

**PLEASE ATTACH THE FOLLOWING WITH YOUR APPLICATION****Standard documents:**

- Two (recent) passport size photographs
- Copy of cNIC
- Bank statements for last six months
- Copies of last paid electricity, telephone and gas bills
- Copies of three months credit card bills (if any)
- Copy of income and Wealth Tax returns (last two years)

**Additional documents for salaried persons:**

- Latest recent salary slip original or company certified copy
- Letter from employer, stating the date of joining gross Package & designation

Please tick mark the documents enclosed.

**Additional documents for self employed professional:**

- Copy of professional degree
- Current professional association membership/practicing certificate
- Copy of ownership or rental agreement of business premises

**Additional documents for businessmen:**

- Bank Certificate stating applicant's business account and its duration
- Certificate of Incorporation and commencement of business (where applicable)
- Copy of ownership or rental agreement of business premises
- Copy of partnership deed (if applicable)

**DECLARATION****I hereby understand that :**

1. Approval of this application is at the sole discretion of First Habib Modaraba (FHM).
2. Purchase order will be issued after the satisfactory completion of all legal documents of FHM.
3. I will pay all necessary charges including the processing fees (non refundable) to FHM
4. The details provided in this Application Form are correct, complete and accurate and I / we have not withheld any material information pertaining to the same.
5. The references whose particulars are mentioned in this application form are fully aware of this transaction and will oblige FHM in confirming the same.
6. That there are no bankruptcy proceedings that have been instituted against me or are within my knowledge likely pending to be instituted against me.
7. FHM reserves the right to accept or reject an application at its sole discretion without assigning any reason and I/we will not incur any liability for the same.
8. I undertake to inform FHM in case of any change in any of the details stipulated in this application form and in case of change of address, the new address will be notified within 15 days of such change. FHM is authorised to make on sight verification of my residence or any other information through its authorised representative.
9. I hereby authorise FHM and any relevant third parties to exchange information for the purpose of processing my Application including conduct of my account, till such time the entire outstanding amount under the finance facility is paid by me to FHM.
10. I hereby certify that all statements in this application are true and complete and in case of any of the particulars given herein are found subsequently false and fictitious, I shall be liable thereafter and you can take any action against me whatever you deem expedient and fit, and recall the outstanding amount of lease facility, which I confirm to pay you forthwith along with all charges, cost and mark-up, if any accrued, on said lease facility.

In case of any emergency you may also contact Mr / Mrs / Ms : \_\_\_\_\_

Address: \_\_\_\_\_ Tel: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

REMARKS :

APPLICATION REVIEWED

\_\_\_\_\_

\_\_\_\_\_