

PT CAPITAL

SDN BHD (346806-A)

**HIRE PURCHASE APPLICATION FORM – INDIVIDUAL
BORANG P ERMohonAN SEWA BELI – INDIVIDU****APPLICANT'S PARTICULARS / BUTIRAN PEMOHON****Name, Aliases***Nama***Married/Single***Kahwin/Bujang***Residential Address***Alamat Rumah***No. of dependant children***Jumlah Tanggungang***Tel. No***No. Telefon***Owner/Tenant***Empunya/Sewa***Driving Lic. No***No. Lesen Kereta***Postal Address***Alamat Surat Menyurat***Date of Birth N.R.I.C No.***Tarikh Lahir* *No. Kad Pengenalan***Citizenship***Kerakyatan***Occupation***Pekerjaan***Monthly Salary/Income***Gaji Bulanan RM***Monthly Expenditure***Belanja Bulanan RM***Name of Firm/Employer***Majikan***No. of years employed***Tahun Bekerja***Address***Alamat***Tel. No***No. Telefon***PARTICULAR OF SPOUSE / BUTIRAN PASANGAN****Name***Nama***N.R.I.C No***No. Kad Pengenalan***Employer***Majikan***Tel.No***No. Telefon***Address***Alamat***Occupation***Pekerjaan***Monthly Salary/Income***Gaji Bulanan RM***PARTICULARS OF VEHICLE****Model:****Vehicle No:****Year Made:****Engine No :****Purchase Price RM:****Loan Amount RM:**

PARTICULARS OF BANKERS/BUTIRAN BANK

Name Nama	Branch Cawangan	Type of A/C JenisAkaun	A/C No No.Akaun

PROPOSED GUARANTORS' PARTICULARS/BUTIRAN PENJAMIN YANG DICADANGKAN

Name Nama	Name Nama
Address Alamat	Address Alamat
Owner/Tenant MilikSendiri/Sewa	Owner/Tenant MilikSendiri/Sewa
Tel No No.Telefon.....	Tel No No.Telefon.....
IC No No K/P	IC NO No K/P
Age Umur	Age Umur
Relationship Perhubungan	Relantionship Perhubungan
Married /Single Kahwin/Bujang.....	Married /Single Kahwin/Bujang.....
Occupation Pekerjaan	Occupation Pekerjaan
Monthly Income GajiBulanan RM.....	Monthly Income GajiBulanan RM.....
Employer Majikan	Employer Majikan
Address Alamat.....	Address Alamat.....
No Tel No Telefon.....	No Tel No Telefon

INSURANCE PARTICULARS / BUTIRAN INSURANS

Previous Insurer Penginsuranebelumnya	Policy No No.PolisiNo.Kereta	Car No.	N.C.B %	PREMIUM
Insurance Company Syarikat Penginsuran				
Agent.				
Period from Tempoh Dari	to hingga	Sum Insured JumlahDiinsurankan RM.....		
Policy/Cover Note No. Polisi No	D/N No	Receipt No No.Resit		

I/we hereby declare that the above stated particulars (including any supplemental documents attached) are complete, true and correct .
Saya/kami mengakubahawasegalaketerangan di atas(termasukdokumensokongan) adalahmenukupi ,benar dan betul.

Date

Tarikh :

Signature of Applicant

Tandatangan Pemohon :