

APPLICATION FORM APPLICANT INFORMATION Full Name: (Mr./Ms./Mrs.) NIC no: DL/PP no: Date of birth: Current address: Home Fixed Line: Mobile no: How long? E-mail address: **EMPLOYMENT INFORMATION** Current employer: Employer address: E-mail: Phone: Department: Position: Date of joining: Staff no or EPF no: PRODUCT INFORMATION Name of the product and model no: Delivery location: Selling Price: Installment: No of installments: FIRST GUARANTOR Full Name: Current address: Date of birth: NIC no: DL/PP no: Mobile no: Fixed Line: E-mail address: Name of employer: Position: Date of joining: Staff no or EPF no: **SECOND GUARANTOR** Full Name: Current address: Date of birth: NIC no: DL/PP no: Mobile no: Fixed Line: E-mail address: Name of employer: Staff no or EPF no: Position: Date of joining: I hereby confirm above information are true and accurate. Date Signature of applicant Date Signature of first guarantor Signature of second guarantor Date









AUTHORITY TO DEDUCT FROM SALARY
To:
Dear Sir/Madame,
I hereby authorize you to deduct a sum of Rsfrom my monthly salary commencing From
This authority shall be irrevocable until such time, installment plan obtained by me from Bridge Me (Pvt) Ltd settled in full. In case of resignation or termination of employment, please recover the outstanding from my last salary.
Yours Faithfully,
(Signature of the employee) Name: Designation: Staff no/EPF no:
PROMISORY NOTE
To: Bridge Me (Pvt) Ltd PO BOX 970, No 40, Temple Lane, Colombo 3. Sri Lanka. I,
Rs
(Signature) Name of Applicant: NIC no: Date:
FOR OFFICE USE ONLY



PO BOX 970, 40, Temple Lane, Colombo 3. Sri Lanka.

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