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**T BANK LIMITED**

POST BOX: 631  
 THIMPHU: BHUTAN

**Loan Deferment Form**

**Name of the Financial Service Provider:**

.....

**Name of the Branch:**

.....

Dear Sir/Madam,

In line with the recently announced Phase II Monetary Measures providing for the deferment of loan repayments for the next 12 months i.e. up to June 2021 given the continued impact of the COVID-19 pandemic, I/we wish to defer my loan repayment(s) as detailed below:

**Part I – Borrower Details**

**1.1 If applicant is an individual:**

- i. Name: \_\_\_\_\_
- ii. Sex (Male or Female): \_\_\_\_\_
- iii. CID Number: \_\_\_\_\_
- iv. Date of Birth (DD/MM/YY): \_\_\_\_\_
- v. Marital Status: \_\_\_\_\_
- vi. Phone No: \_\_\_\_\_
- vii. Email Address: \_\_\_\_\_
- viii. Occupation: \_\_\_\_\_
- ix. Current Address: \_\_\_\_\_
- x. Permanent Address: \_\_\_\_\_

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**HEAD OFFICE** - TCC Complex Building, Opposite to Hotel Taj Tashi, Samten Lam, Thimphu, Bhutan  
 Phone: (+ 975-2) 77103077/77117663/77117664, 337282/283/284, Fax: 975-(2)336236  
 Website: www.tbank.bt, Email: customercare@tbank.bt, Toll Free No. 7070, SWIFT: TBBTBTBT



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a. Village: \_\_\_\_\_

b. Gewog: \_\_\_\_\_

**1.2 If applicant is a business entity:**

i. Company Name: \_\_\_\_\_

ii. Type of Business: \_\_\_\_\_

iii. License No: \_\_\_\_\_

iv. TPN No: \_\_\_\_\_

v. Current Address: \_\_\_\_\_

i. Phone No: \_\_\_\_\_

ii. Email Address: \_\_\_\_\_

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**Part II – Deferment**

2.1 I/We wish to:

- continue to fully pay all of my/our loan EMIs i.e. I/we DO NOT wish to defer any of my/our loan repayments **(Go to Part III).**
- defer some or all of my/our loan EMIs either fully or partially **(Go to Part IV).**

**Part III – Applicants wishing to continue repayment**

*(Please fill this section only if you are not going to defer ALL of your loans)*

I/We wish to continue to fully pay all of my/our loan EMIs i.e. I/we DO NOT wish to defer any of my/our loan repayments.

Please provide loan details below:

SI No.	Loan Account Number	SI. No.	Loan Account Number

\*\*\* You will be eligible for the reduction in interest rate for July 2020 – June 2021, only if you fully and regularly pay your EMIs within this period. The interest rate reduction will be calculated on the principal outstanding during the deferment period and adjusted at the end of the deferment period as follows:

- adjusted directly to your principal outstanding if your loan is performing, or

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- adjusted first against the past overdues in case of Non-performing loans.
- For those loans that are fully repaid (liquidated loans) during the deferment period, the interest differential will be refunded within three months after liquidation of loans.

Please note that if your loan(s) is/are covered under the Druk Gyalpo's Relief Kidu Interest Payment Support, you need to pay only the principal portion of your EMI for July-September 2020; and the principal and 50% of the interest portion of your EMI for October 2020 – March 2021.

**Part IV – Applicants wishing to defer loan repayments**

**4.1 Fill in the details below** (print additional sheets and append if required):

Sl No.	Loan account Number	Loan deferment option – Please tick one	Reason for Deferment – Please tick one Please state other reasons, if any, in a clear and brief manner.	Loan Tenure Option after Deferment – Please tick one EMIs will be recalculated if you wish to maintain the original tenure. Extension by more than one year will be subject to negotiations.
		<input type="checkbox"/> Full deferment i.e. both Principal & Interest <input type="checkbox"/> Partial deferment i.e. only Principal	<input type="checkbox"/> Complete Loss of Income <input type="checkbox"/> Reduced Income Other (specify):	<input type="checkbox"/> Extend loan tenure by one year <input type="checkbox"/> Extend loan tenure by more than one year <input type="checkbox"/> Maintain original tenure

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	<input type="checkbox"/> Full deferment i.e. both Principal & Interest <input type="checkbox"/> Partial deferment i.e. only Principal	<input type="checkbox"/> Complete Loss of Income <input type="checkbox"/> Reduced Income Other (specify):	<input type="checkbox"/> Extend loan tenure by one year <input type="checkbox"/> Extend loan tenure by more than one year <input type="checkbox"/> Maintain original tenure
	<input type="checkbox"/> Full deferment i.e. both Principal & Interest <input type="checkbox"/> Partial deferment i.e. only Principal	<input type="checkbox"/> Complete Loss of Income <input type="checkbox"/> Reduced Income Other (specify):	<input type="checkbox"/> Extend loan tenure by one year <input type="checkbox"/> Extend loan tenure by more than one year <input type="checkbox"/> Maintain original tenure

**4.2 Please provide the following additional details so that a proper assessment can be made on the need for your loans to be deferred.**

**4.2.1 Do you have deposit account(s)/fixed term annuity?**

YES

NO

**4.2.2 If yes, please provide details:**

SI.No#	Type of Account	Account Number	Name of Institution

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**4.2.3 Please list your income sources and indicate whether it has been affected by COVID-19.**

<b>Sl.No</b>	<b>Income Source – please describe /list</b>	<b>Is this your main source of income? Answer YES or NO</b>	<b>Was this income source affected by COVID-19? Answer YES or NO</b>

**4.2.4 I/We understand and undertake that:**

- a) The repayment duration of my loan will be extended by the period of deferment or beyond.
- b) The deferment of the loan repayment will result in additional interest cost over the course of my loan; and

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- c) If not eligible for interest waiver, interest will continue to accrue to my loan account during the period of deferment and this could result in increase in the amount/number of my EMIs.
- d) I will provide additional documentations to the FSPs, as required to support my deferment eligibility.
- e) If I opt not to defer my loan, I will not be eligible for rebate if the repayments are not full and regular during the deferment period.

I hereby declare that the details furnished herein are true and correct to the best of my knowledge and ability. In case any of the above information is found to be false or untrue or misleading or misrepresenting or concealed, I am aware that I will be held liable for it as per the relevant by-laws and laws.

I offer my consent to the concerned FSPs to validate and verify the information provided in this form.

Name:  
Signature  
(*affix Legal Stamp*)

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