

PERSONAL UNDERTAKING
(Only for those taking loans based on salaries disbursed through ePEMS)

The Chief Executive Officer,
Bhutan National Bank Ltd,
Thimphu

Date:

Dear Sir,

I confirm that I have applied and have been released a sum of Nu..... (Ngultrum).

I hereby undertake to deposit from my earnings the loan instalment to the designated account created by the Bank for the purpose of loan instalment take-down, without fail and on a monthly basis, at the rate of Nu..... (Ngultrum) per month, with effect from In the event that I fail to deposit the loan installments continuously for three or more months, the bank may initiate legal proceedings against me to recover the amount owed by me to the bank.

In the event I separate from my organisation for any reason whatsoever, I will make sure that the loan taken by me is liquidated within a month of my separation from my organisation. In the event I fail to do so, the bank may initiate legal proceedings against me to recover the amount owed by me to the bank.

Signature
over a Legal
Stamp

Name:

Address:

Contact Details

Witnessed by:

Name:

Address:

Contact Details

AFFIDAVIT FOR LOANS BASED ON SALARY DISBURSED THROUGH e-PEMS

Mr./Ms./Mrs.....

CID No..... and Employee ID

working at
(Name of Ministry/ Department/ Agency/Organisation)

maintains his/her Savings Account No with Bank of Bhutan Ltd (BOB)/

Digital Kidu (DK) and we hereby declare that his/her monthly salary is being disbursed to the above-mentioned savings account through ePEMS. His/her salary details are as below:

Designation: Grade: Joining Date:

Basic Salary:..... Total Allowances: Gross Salary:

Provident Fund A/c No. Last PF Balance: Years to retirement:

Deductions:

P/F: Salary Tax: Health Tax: GIS:

House Rent: Vehicle Loan Housing Loan:

Advance(s): Personal Loan..... NPPF Loan Others:

Total Deductions: Nu.

Net Payable: Nu.

In the event the applicant resigns/retires/separates from this office for any reason, we will intimate Bhutan National Bank immediately.

SIGNATURE AND SEAL of Accounts Officer/Finance Manager

Name:

Contact No:

Date:

SIGNATURE AND SEAL of Head of the Department/Agency / Organisation:

Name:

Designation: 

Date:

Note: Please attach the latest detailed Pay Slip of the employee with this form