

**Annexure I**

Date: .....

The Branch Manager  
 ..... Branch

**FORM 1- HIGH RISK**

- A. Hotels & Restaurant
- B. Tourism (Airlines/Tour Operators/Ticketing & Travel Agent)

I/We ..... bearing CID/License no..... give my/our consent for;

1. Extension of gestation period – 2 years.
  2. Extension of Deferment of loan repayment up to 2 years
  3. Partial Repayment (50% of EMI)
  4. Extension of Service loan tenure- 30 years period (both new and existing loans)
  5. Opening of FEIF account for 60 months for interest accrued during deferment period,
- OR
6. Capitalization of the accrued interest during the deferment period.
  7. Repayment Frequency- Monthly (M), Quarterly (Q) or Half-yearly (H)
  8. Restructuring – OD to Term loan

Sl. No	OD/Term Loan	Loan Account	Mention the option Nos. (1) (2) (3) (4) (5) (6) (7) or (8)

Note:

1. If you convert your existing OD to term loan, new OD facility shall not be provided for the same business until the converted loan is closed.

**Signature of the account holder(s)**

**(For joint account holder(s))**

Name:.....  
Contact no: .....

Name:.....  
Contact no: .....

**Signature of the guarantor(s)**

Name:.....  
Contact no: .....

Name:.....  
Contact no: .....