

ﺭﻗﻢ ﺍﻟﻄﻠﺐ

ﻛﻔﺎﻟﺔ ﺷﺨﺼﻴﺔ

# ﺃﻭﻻً: ﺇﻗﺮﺍﺭ ﺍﻟﻜﻔﻴﻞ ﺑﺎﻟﻜﻔﺎﻟﺔ:

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| **ﻣﻌﻠﻮﻣﺎﺕ ﺍﻟﻜﻔﻴﻞ** |
| ﺍﻟﺠﻮﺍﻝ: | ﺍﺳﻢ ﺍﻟﻜﻔﻴﻞ: |
| ﻣﺼﺪﺭﻫﺎ: | ﺭﻗﻢ ﺑﻄﺎﻗﺔ ﺍﻟﻬﻮﻳﺔ ﺍﻟﻮﻃﻨﻴﺔ: |
| ﺍﻟﺮﻣﺰ ﺍﻹﺿﺎﻓﻲ: | ﺍﻟﺮﻣﺰ ﺍﻟﺒﺮﻳﺪﻱ: | ﺭﻗﻢ ﺍﻟﻤﺒﻨﻰ: | ﺍﻟﻌﻨﻮﺍﻥ ﺍﻟﻮﻃﻨﻲ |
| **ﻣﻌﻠﻮﻣﺎﺕ ﺍﻟﻜﻔﺎﻟﺔ** |
| ﺍﻟﺠﻮﺍﻝ: | ﺍﺳﻢ ﺍﻟﻤﻘﺘﺮﺽ )ﺍﻟﻤﻜﻔﻮﻝ( |
| ﻣﺼﺪﺭﻫﺎ: | ﺭﻗﻢ ﺑﻄﺎﻗﺔ ﺍﻟﻬﻮﻳﺔ ﺍﻟﻮﻃﻨﻴﺔ: |
| ﺍﻟﺮﻣﺰ ﺍﻹﺿﺎﻓﻲ: | ﺍﻟﺮﻣﺰ ﺍﻟﺒﺮﻳﺪﻱ: | ﺭﻗﻢ ﺍﻟﻤﺒﻨﻰ: | ﺍﻟﻌﻨﻮﺍﻥ ﺍﻟﻮﻃﻨﻲ |
| ﻋﺪﺩ ﺍﻷﻗﺴﺎﻁ: | ﻣﺪﺓ ﺍﻟﺴﺪﺍﺩ )ﺑﺎﻟﺴﻨﻮﺍﺕ:( | ﻗﻴﻤﺔ ﺍﻟﻘﺴﻂ: | ﻗﻴﻤﺔ ﺍﻟﻘﺮﺽ: | ﻧﻮﻉ ﺍﻟﻘﺮﺽ: |

ﺃﻗﺮ ﺑﻤﻮﺍﻓﻘﺘﻲ ﻋﻠﻰ ﻛﻔﺎﻟﺔ ﺍﻟﻤﻘﺘﺮﺽ ﺍﻟﻤﻮﺿﺤﺔ ﺑﻴﺎﻧﺎﺗﻪ ﺍﻋﻼﻩ، ﻭﺃﻧﻨﻲ ﻓﻮﺿﺖ ﺟﻬﺔ ﻋﻤﻠﻲ ﺑﺤﺴﻢ ﺃﻳﺔ ﻣﺒﺎﻟﻎ ﻣﺴﺘﺤﻘﺔ ﻟﺒﻨﻚ ﺍﻟﺘﻨﻤﻴﺔ ﺍﻻﺟﺘﻤﺎﻋﻴﺔ ﺑﺪﻭﻥ ﻗﻴﺪ ﺍﻭ ﺷﺮﻁ ﻓﻮﺭ ﻃﻠﺐ ﺍﻟﺒﻨﻚ ﺫﻟﻚ ﻣﻘﺎﺑﻞ ﻛﻔﺎﻟﺔ ﻏﺮﻡ ﻭﺃﺩﺍﺀ ﻟﻠﻤﻘﺘﺮﺽ ﺍﻟﻤﻮﺿﺤﺔ ﺑﻴﺎﻧﺎﺗﻪ ﺃﻋﻼﻩ ﺑﺤﺪ ﺍﻗﺼﻰ ﻗﻴﻤﺔ ﺍﻟﻘﺮﺽ ﻭﻓﻖ ﺍﻟﺸﺮﻭﻁ ﺍﻟﻤﻘﺮﺭﺓ ﻓﻲ ﺍﻟﺒﻨﻚ، ﻭﻓﻲ ﺣﺎﻝ ﺇﻧﻬﺎﺀ ﺧﺪﻣﺎﺗﻲ ﻣﻦ ﻋﻤﻠﻲ ﺍﻟﺤﺎﻟﻲ ﻷﻱ ﺳﺒﺐ ﻓﺄﻧﻨﻲ ﺃﻗﺒﻞ ﺑﺤﺴﻢ ﺟﻤﻴﻊ ﻣﺴﺘﺤﻘﺎﺕ ﺍﻟﺒﻨﻚ ﺩﻓﻌﻪ ﻭﺍﺣﺪﺓ ﻣﻦ ﺍﺳﺘﺤﻘﺎﻗﺎﺗﻲ ﻟﺪﻯ ﺟﻬﺔ ﻋﻤﻠﻲ ﺃﻭ ﺍﻟﻤﺆﺳﺴﺔ ﺍﻟﻌﺎﻣﺔ ﻟﻠﺘﻘﺎﻋﺪ ﺃﻭ ﺍﻟﺘﺄﻣﻴﻨﺎﺕ ﺍﻻﺟﺘﻤﺎﻋﻴﺔ ﻭﺍﺗﺨﺎﺫ ﺟﻤﻴﻊ ﺍﻹﺟﺮﺍﺀﺍﺕ ﺍﻟﻨﻈﺎﻣﻴﺔ ﻭﺍﻟﻘﺎﻧﻮﻧﻴﺔ، ﻭﺃﻗﺮ ﺑﺎﻟﻤﻮﺍﻓﻘﺔ ﻋﻠﻰ ﺍﻻﺳﺘﻌﻼﻡ ﻭ ﻣﺸﺎﺭﻛﺔ ﺑﻴﺎﻧﺎﺗﻲ ﺍﻻﺋﺘﻤﺎﻧﻴﺔ ﻣﻊ ﺍﻟﺸﺮﻛﺔ ﺍﻟﺴﻌﻮﺩﻳﺔ ﻟﻠﻤﻌﻠﻮﻣﺎﺕ ﺍﻻﺋﺘﻤﺎﻧﻴﺔ )ﺳﻤﻪ(، ﻛﻤﺎ ﺃﻗﺮ ﺑﻌﺪﻡ ﺍﻟﻤﻄﺎﻟﺒﺔ ﺑﺈﻟﻐﺎﺀ ﻫﺬﻩ ﺍﻟﻜﻔﺎﻟﺔ ﺍﻭ ﺗﺨﻔﻴﺾ ﺍﻟﻘﺴﻂ ﺍﻭ ﺍﻟﻤﻄﺎﻟﺒﺔ ﺑﺈﻳﻘﺎﻑ ﺍﻟﺤﺴﻢ ﻣﻦ ﺭﺍﺗﺒﻲ ﺑﻌﺪ ﺗﺄﺧﺮ ﻣﻜﻔﻮﻟﻲ ﺣﺘﻰ ﺳﺪﺍﺩ ﻛﺎﻣﻞ ﺍﻟﻘﺮﺽ ﻭﺃﺧﻼﺀ ﻣﺴﺆﻭﻟﻴﺔ ﺍﻟﺒﻨﻚ ﻣﻦ

ﺃﻱ ﻣﻄﺎﻟﺒﺎﺕ ﺑﻴﻨﻲ ﻭﺑﻴﻦ ﺍﻟﻤﻘﺘﺮﺽ،

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|  | **ﺍﻟﺘﺎﺭﻳﺦ** |  | **ﺗﻮﻗﻴﻊ ﺍﻟﻜﻔﻴﻞ:** |

# ﺛﺎﻧﻴﺎً: ﻣﻌﻠﻮﻣﺎﺕ ﻋﻦ ﺍﻟﻜﻔﻴﻞ

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| **ﺍﺳﻢ ﺍﻟﻤﻮﻇﻒ ﺭﺑﺎﻋﻴﺎً ﺣﺴﺐ ﺍﻟﻬﻮﻳﺔ ﺍﻟﻮﻃﻨﻴﺔ:** |
| **ﻣﺴﻤﻰ ﺍﻟﻮﻇﻴﻔﺔ ﺍﻟﺘﻲ ﻳﺸﻐﻠﻬﺎ:** | **ﺍﺳﻢ ﺍﻟﻮﺯﺍﺭﺓ ﺃﻭ ﺍﻟﻤﺼﻠﺤﺔ ﺃﻭ ﺍﻟﻤﺆﺳﺴﺔ:** |
| **ﺟﻬﺔ ﺍﻟﺤﺴﻢ:** | **ﺍﻟﻘﺴﻢ:** | **ﺍﻟﺠﻬﺔ ﺍﻟﻔﺮﻋﻴﺔ:** |
| **ﺍﻟﺪﺭﺟﺔ:** | **ﺍﻟﻤﺮﺗﺒﺔ ﺃﻭ ﺍﻟﺮﺗﺒﺔ ﺍﻟﻌﺴﻜﺮﻳﺔ:** | **ﺍﻟﺮﻗﻢ ﺍﻟﻮﻇﻴﻔﻲ ﺃﻭ ﺍﻟﻌﺴﻜﺮﻱ:** |
| **ﺍﻟﺒﺪﻻﺕ ﺍﻟﺘﻲ ﺗﺼﺮﻑ ﻟﻪ ﺭﻗﻤﺎً:** | **ﺍﻟــﺮﺍﺗـﺐ ﺍﻷﺳﺎﺳــﻲ ﺭﻗــﻤـــﺎً:** |

**ﺛﺎﻟﺜﺎً: ﺇﻗﺮﺍﺭ ﺟﻬﺔ ﺍﻟﻌﻤﻞ:**

ﻧﻔﻴﺪﻛﻢ ﺃﻥ ﺍﻟﻤﻮﻇﻒ )ﺍﻟﻜﻔﻴﻞ( ﺍﻟﻤﻮﺿﺤﺔ ﺑﻴﺎﻧﺎﺗﻪ ﺃﻋﻼﻩ ﻻ ﻳﺰﺍﻝ ﻋﻠﻰ ﺭﺃﺱ ﺍﻟﻌﻤﻞ ﻟﺪﻳﻨﺎ ﻭﻟﻢ ﺗﺘﻢ ﺗﺼﻔﻴﺔ ﺍﺳﺘﺤﻘﺎﻗﺎﺗﻪ ﺣﺘﻰ ﺗﺎﺭﻳﺨﻪ ﻭﺑﻨﺎﺀً ﻋﻠﻰ ﻣﺎ ﺳﺒﻖ ﻧﻘﺮ ﺑﻤﺴﺆﻭﻟﻴﺘﻨﺎ ﺍﺗﺠﺎﻩ

ﺑﻨﻚ ﺍﻟﺘﻨﻤﻴﺔ ﺍﻻﺟﺘﻤﺎﻋﻴﺔ ﺑﻤﺎ ﻳﻠﻲ: -1ﺣﺴﻢ ﺍﻷﻗﺴﺎﻁ ﺍﻟﻤﺴﺘﺤﻘﺔ ﻟﻠﺒﻨﻚ ﺷﻬﺮﻳﺎً ﻣﻦ ﺭﺍﺗﺒﻪ ﻣﺘﻰ ﻣﺎ ﻃﻠﺐ ﺍﻟﺒﻨﻚ ﺫﻟﻚ ﻭﺇﺩﺭﺍﺝ ﻫﺬﺍ ﺍﻟﺤﺴﻢ ﺿﻤﻦ ﻣﺴﻴﺮﺍﺕ ﺍﻟﺮﻭﺍﺗﺐ ﻭﺍﻻﺳﺘﻤﺮﺍﺭ ﻓﻲ ﺣﺴﻢ ﺍﻷﻗﺴﺎﻁ ﺇﻟﻰ ﺃﻥ ﻳﺘﻢ ﺳﺪﺍﺩ

ﻛﺎﻣﻞ ﺍﻟﺮﺻﻴﺪ ﻭﺫﻟﻚ ﺗﻨﻔﻴﺬﺍ ﻟﻸﻣﺮ ﺍﻟﺴﺎﻣﻲ ﺍﻟﻜﺮﻳﻢ ﺭﻗﻢ 3 / /4 9639 ﻭﺗﺎﺭﻳﺦ 1400/04/18 ﻫـ.

-2ﺍﻟﻜﺘﺎﺑﺔ ﻟﻠﺒﻨﻚ ﻓﻲ ﺣﺎﻝ ﺗﺮﻛﻪ ﻟﻠﺨﺪﻣﺔ ﻭﺣﺠﺰ ﻣﺴﺘﺤﻘﺎﺗﻪ ﻭﻋﺪﻡ ﺍﺧﻼﺀ ﻃﺮﻓﻪ ﺣﺘﻰ ﻳﻘﺪﻡ ﻣﻦ ﺍﻟـــﺒﻨﻚ ﻣﺎ ﻳﺜﺒﺖ ﺇﻧﻬﺎﺀ ﺍﻟﺘﺰﺍﻣﺎﺗﻪ.

-3ﻻ ﻳﺘﻢ ﺍﻟﻤﻮﺍﻓﻘﺔ ﻋﻠﻰ ﻧﻘﻞ ﺧﺪﻣﺎﺗﻪ ﺇﻟﻰ ﺟﻬﺔ ﺣﻜﻮﻣﻴﺔ ﺃﺧﺮﻯ ﺇﻻ ﺑﻌﺪ ﺍﺣﻀﺎﺭ ﺍﺷﻌﺎﺭ ﻣﻦ ﺍﻟﺒﻨﻚ ﺑﺈﻧﻬﺎﺀ ﺍﻟﺘﺰﺍﻣﺎﺗﻪ ﺗﺠﺎﻩ ﺍﻟﺒﻨﻚ.

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| **ﺧﺘﻢ ﺍﻟﺠﻬﺔ** | **ﻣﺼﺎﺩﻗﺔ ﺍﻟﻤﺪﻳﺮ ﺍﻟﻌﺎﻡ ﻟﻠﺠﻬﺔ** | **ﺷﺆﻭﻥ ﺍﻟﻤﻮﻇﻔﻴﻦ / ﺍﻟﺸﺌﻮﻥ ﺍﻟﻌﺴﻜﺮﻳﺔ** |  |
|  |  |  | **ﺍﻻﺳﻢ** |
|  |  | **ﺍﻟﺘﻮﻗﻴﻊ** |
|  |  | **ﺍﻟﺘﺎﺭﻳﺦ** |
|  |  | **ﺭﻗﻢ ﺍﻟﻬﺎﺗﻒ** |



ﻣﺴﺘﻮﻯ ﺍﻻﻃﻼﻉ: ﻣﺘﺎﺡ BPM-FM03

ﺇﺻﺪﺍﺭ1 ﺗﺎﺭﻳﺦ ﺍﻟﻨﻔﺎﺫ: 1443/01/16ﻫـ 2021/08/24)ﻡ (

ﺍﻟﺼﻔﺤﺔ : 1 ﻣﻦ 1

 ﺃﻱ ﺗﻌﺪﻳﻞ ﺃﻭ ﻛﺸﻂ ﻓﻲ ﺍﻟﻨﻤﻮﺫﺝ ﻳﻠﻐﻰ ﺍﻟﻄﻠﺐ

ﻣﺎﻟﻚ ﺍﻟﻮﺛﻴﻘﺔ: ﺇﺩﺍﺭﺓ ﺗﻤﻮﻳﻞ ﺍﻻﻓﺮﺍﺩ

ﺍﻹﺻﺪﺍﺭ: 8 ﻣﺴﻤﻰ ﺍﻟﻨﻤﻮﺫﺝ: ﻛﻔﺎﻟﺔ ﺷﺨﺼﻴﺔ

ﺭﻗﻢ ﺍﻟﻨﻤﻮﺫﺝ: PL-FM105