

# **CGTMSE Application Form**



I/We submit our application for facilities as detailed below:	V
☐ Cash Credit ☐ Term Loan ☐ Letter of Credit ☐ Bank Guarantee	
Facility amount applied for (Rs. in lacs):	
Tenure (Months): 12 18 24 36 48 Any other:	
Repayment Mode:  PDC Auto Debit ECS Any other:	
Original Investment (cost / price) in Plant and Machinery (Rs. Lacs) (If Applicable).	
Purpose of the Loan:	
1. Name of the Entity:M/s	
2. Registered Address of the Entity:	
	]
CITY         STATE         PIN CODE	
Email Address If Any:	_
3. Operating Address of the Entity:	Ţ
CITY STATE PIN CODE	
STD CODE TEL NO. MOBILE NO.	
Landmark:	
Date from when operating at this address :	
In case address changed in last 2 years:	
Previous Address:	
Reason for change in address :	
4. Name of the Contact Person: Mr / Mrs / Miss	
STD CODE TEL NO. MOBILE NO :	
Email Address (if any):	
5. Constitution :	
☐ Sole Proprietorship ☐ Partnership ☐ Private Ltd. ☐ Public Ltd.	
6. Nature of Business: ☐ Manufacturing ☐ Service	
Type of Industry:	
Products dealt with:	
i)Village Industry & Cottage Industry (Villages and small towns with population not exceeding 50000)	
ii)Artisans	
7. Details & Unit :	
i) New Unit: 🗌 Yes 💢 No ii) Women Operated & / or Women Owned: 🗎 Yes 💢 No	
iii) Chief Promoter from Minority Community:  Yes No	
8. Any benefits availed under priority sector lending: 🗆 Yes 💢 No	
9. SSI Registration Number:Number of Employees:	
10. Date on which the Entity was established: DDMMYYYYY	
11. PAN: Sales Tax No.:	
12. Sales Tax registration date : D D M M Y Y Y Y	
13. Business Premises:  Owned and encumbered  Owned & Free  Rented	



# 14. Details of Bank accounts of Entity not having credit facilities

Name of the Bank	Account Number	Type of A/c – Current/Savings	Month & Year of Opening

# 15. Details of credit facilities enjoyed by the Entity from other institutions/banks

Name of the Bank/ Financial Institutions	Nature of Facility	Sanctioned Amount	Present Outstanding	Security Offered

# 16. Details of existing credit facilities enjoyed by the Entity from ICICI Bank

Name of Facility	Sanctioned Amount (Rs.)	Present Outstanding (Rs.)	Loan Account No.	Security Offered

### 17. Details of associate/group entities (Rs. in lacs)

Name of the Entity	Nature of Business	Net Sales	Net Profit	Net Worth

# 18. Key Financial Information (Rs. in lacs)

	F.Y 2007 – 08 (actuals)	F.Y 2008 – 09 (actuals)	F.Y 2009 – 10 (estimated)	F.Y 2010 - 11 (projected)
Net Sales				
Operating Profit				
Net Profit after Tax				
Tangible Net Worth				



#### 19. Personal details of the Promoters of the Entity Name: ..... Name: Father's Name: Father's Name: Marital Status: Married ☐ Unmarried Marital Status: Married Unmarried No. of Dependants: ...... Qualification: ...... Date of Birth: STD Code: ..... Date of Birth: STD Code: ..... Tel. No: ...... Credit Card No: ..... Tel. No: ..... Credit Card No: ..... Business Exp.(Years):.... Business Exp.(Years):.... Res. Add: ..... Res. Add: ..... Owned Rented Owned Rented Years in Current Residence: ..... Years in Current Residence: ..... Monthly Rent (if rented): Rs. ..... Monthly Rent (if rented): Rs. ..... PAN / GIR No: ..... PAN / GIR No: ..... Nationality: ..... Nationality: ..... Category: $\square$ SC $\square$ ST $\square$ MBS $\square$ OBC $\square$ General Category: ☐ SC ☐ ST ☐ MBS ☐ OBC ☐ General $\square$ Physically challenged $\square$ Retired armed forces personnel $\square$ Physically challenged $\square$ Retired armed forces personnel Other: ..... Other: ..... Female Gender: Male ☐ Female Gender: Male Email address: ..... Email address: ..... Name: Name: Father's Name: Father's Name: Marital Status: Married ☐ Unmarried Marital Status: Married Unmarried No. of Dependants: ...... Qualification: ...... No. of Dependants: ...... Qualification: ...... STD Code: ..... Date of Birth: STD Code: ..... Date of Birth: Tel. No: ...... Credit Card No: ..... Tel. No: ..... Credit Card No: ..... Business Exp.(Years):.... Business Exp.(Years):.... Res. Add: Res. Add: ..... ..... Rented Rented ☐ Owned ☐ Owned Years in Current Residence: ..... Years in Current Residence: ..... Monthly Rent (if rented): Rs. ..... Monthly Rent (if rented): Rs. ..... PAN / GIR No: ..... PAN / GIR No: ..... Nationality: ..... Nationality: ..... Category: ☐ SC ☐ ST ☐ MBS ☐ OBC ☐ General Category: ☐ SC ☐ ST ☐ MBS ☐ OBC ☐ General ☐ Physically challenged ☐ Retired armed forces personnel ☐ Physically challenged ☐ Retired armed forces personnel Other: Other: Gender: $\square$ Male ☐ Female Gender: Male ☐ Female Email address: Email address: ..... 20. Co-applicant's details Co-applicant's Name: Mr / Mrs / Miss Date of Birth: DDDMM Experience: Residential address



### 21. Promoters' Loan details

Name of Loan	Promoter's Name	Availed from	Sanctioned amount	Present O/s

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1. Name of Entity:		
Contact Person:	Designation:	
Type of Relationship [Supplier/Customer/Competito	or]:	
STD Code: Tel. No:		
Resd. Address:		
2. Name of Entity:		
Contact Person:	Designation:	
Type of Relationship [Supplier/Customer/Competito	or]:	
STD Code: Tel. No:		
Office Address:		

# Major Parameters used for assessing credit limits#

Eligibility criteria of ICICI Bank	Past Track Record
Business Model	Business Vintage
Applicant (Manufacturer / Service provider)	Industry / Economic outlook
Regulatory and statutory provisions governing ICICI Bank	Any other reasons

<sup>\*</sup>These are broad indicative parameters, specific parameters used for assessing credit limits would vary case to case.



#### Confirmations/Declarations

- 1. I/We declare that all the particulars and information and details given/filed in this application form are true, correct, complete and up-to-date in all respects and that I/we have not withheld any information whatsoever.
- 2. I/We confirm that no insolvency proceedings or suits for recovery of outstanding dues or monies whatsoever or for attachment of my/our assets or properties and/or any criminal proceedings have been initiated and/or are pending against me/us and that I /we have never been adjudicated insolvent by any court or other authority.
- 3. No action nor other steps have been taken or legal proceedings started by or against me/us in any court of law/other authorities for winding up, dissolution, administration or re-organisation or for the appointment of a receiver, administrator, administrative receiver, trustee or similar officer or for my/our assets.
- 4. I/We understand that processing fees is leviable for the processing services provided for the credit assessment before its approval / sanction, hence it is non-refundable and I/We am/are agreeable to this.
- 6. I/We also authorize ICICI to check reference about me from any bank/persons.
- 7. I/We authorize ICICI Bank to hand over my submitted documents to a credit processing agency for processing.

(CLIENT'S SIGNATURE)		

That I/ We hereby specifically authorise ICICI Bank for use of my/our Personal & Business information & to exchange/share or part with the shared information and details relating to my/our application to other ICICI Group Companies/Banks/Financial Institutions/Credit Bureaus/Agencies/Statutory Bodies and such other persons as ICICI Bank Ltd. or its Group companies may deem necessary. I/We shall not hold ICICI Bank Ltd. or its Group companies or its/their agents (representatives) liable for use / sharing of my/our Personal and Business information.

Name:
Place:
(Please sign and place the rubber stamp of the organisation)
(CLIENT'S SIGNATURE)

### For internal use only

Name of Lead Generator	BDE Code	Signature	
Name of Lead Fulfiller	BDE Code	Signature	
Name of DSA / DMA	DSA/DMA Code	Signature	
Name of SM	Employee Id	Signature	
SFA id			



# Please return this application form alongwith the following documents

1.	Firm/Company Profile		
2.	List of 5 major suppliers & customers including contact person & contact no.		
3.	Constitution documents		
4.	Audited Financials of past 2 years along with and IT Return and Tax audit report and Schedules and Notes to Accounts		
5.	Bank statement of latest 6 months		
6.	IT pan card of concern (entity) & all Promoters/Directors/Partners		
7.	Provisional Balance Sheet and P/L a/c of 20 as certified by proprietor / partner / director Projected Balance Sheet and P/L a/c of 20 as certified by proprietor / partner / director		
8.	Proprietor's / Partner's/Directors Personal ITR and Balance Sheet of last 1 year – CA Certified/signed by individual		
9.	Current performance (P/L & Balance Sheet) from April to till date		
10.	VAT Assessment Order OR Sales Tax Registration Certificate or shop & establishment or VAT return		
	For Limited Co		
11.	Latest list of directors		
12.	Form No: 32 and shareholding pattern or annual return		
13.	Form No: for creation and registration of charge on current assets		
	For Partnership		
14.	Registration Certificate in case of Partnership/Application for registration		
	If Applicable		
15.	Loan No of ICICI Bank loans (if any)		
16.	Latest 1 year Audited Financials of sister concern (If any)		
17.	Existing Banks Sanctions Letter (if applicable)		
18.	CA Certificate certifying original investment in plant & machinery for units enjoying fund based limits/loan of Rs 50 lakh or above.		
19.	Self-declaration of borrower for certifying original investment in plant & machinery units enjoying fund based exposure within Rs 50 lacs.		
20	Any other document as required and deemed fit		

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Tear away acknowledgement
Dear Sir/Madam,
This is to acknowledge receipt of your Credit Appraisal Application No.
dated and thank you for the same.
Our representatives shall be in touch with you in connection with the same.
RE/DSA Signature: RE/DSA Name:
Phone no.: Stamp:
Location: Date: D D M M Y Y Y Y