

## Application Form for Credit Linkage

Application Form No.	Branch Name	SOL ID
To, Branch Manager,		
Branch, Axis Bank.		
Dear Sir/Madam,		

Application for: Individual Enterprise / Group Enterprise / Self Help Groups (SHGs)

Full name		Full name		Full name	
1	W/D.o		W/D.o		W/D.o
ı	M other Name		M other Name		M other Name
Photo	Gender: Male / Female / Third Designation: S pouse Name Address:	Photo	Gender: Male / Female / Third Designation: S pouse Name Address:	Photo	Gender: Male / Female / Third Designation: S pouse Name Address:
	Identity Proof / No:		Identity Proof / No:		Identity Proof / No:
	PAN No -		PAN No -		PAN No -
1. W	e the	dulv	aut horized re	present atives	of

We	the	duly a	ut horized	represent c	atives		of	
					(name	of	the	Group
Ent erprise	/SHG)	village/city	/	Block_				_District
under			Scheme	hereby apply for a	oan facil	ityagg	regat ir	ig to Rs.
(Rupees_			or	nly) by way of Cash	Credit (CC	C) / Te	rm Loar	(TL) for
on lending to our members. A copy of resolution taken by our Self Help Group in this regard is attached.								

- 2. A copy of the member-wise requirement of loan is enclosed (Compulsory from 3<sup>rd</sup> linkage onwards)
- 3. We agree to repay the Ioan amount as per the repayment schedule which may be fixed by the Bank.
- 4. A copy of the Inter-se Agreement execut ed by all the members of the group authorizing us interalia to borrow on behalf of the SHG is enclosed.
- 5. We hereby declare that the particulars given above are true and correct to the best of our knowledge and belief.
- 6. We hereby authorize the Bank to disclose all or any particulars or details or information relating to our loan account s with the Bank, to any of her financial institution including NABARD, Gov ernment or any agency as may be considered necessary or desirable by the Bank. It will be in order for the Bank to disqualify the SHG from receiving any credit facilities from the Bank and or recall the entire loan amount or any part thereof grant ed on this application, if any of the information pertaining to the group, furnished herewith is found incorrect and/or containing misrepresent ation of facts.
- 7. A copy of the financial status of our SHGas on .............................. (date) is attached.

8.

I/We am/are director(s) of Axis Bank Limited and also a director(s) / partner(s), manager(s), managing agent (s), employee (s), or guarantor(s) or holder(s) of substantial interest of the borrower or its subsidiary or its holding company.	Yes	No
I/We am/are director(s) of any other bank or the subsidiaries of any of the banks or trustees of mutual funds / venture capital funds set up by the banks and also a director(s) / partner(s), managing agent(s), employee(s) or guarantor(s) or holder(s) of substantial interest of the borrower.	Yes	No
I/We am/are the relative(s) of the director(s) of Axis Bank Limited or any other Bank, as defined by extant guidelines of RBI from time to time, and also a director(s)/partner(s) or guarantor(s) or major shareholder(s) or in control of the borrower or a major shareholder(s) or in control of the holding or subsidiary company of the borrower.	Yes	No
I/We am/are senior official(s) of the Bank or relative of the senior official of the Bank, as defined by extant guidelines of RBI from time to time, and also a director(s)/partner(s), or guarantor(s) or holder(s) of substantial interest of the borrower	Yes	No

In the event that the Applicant / Co-applicant are related to any of Director of Axis Bank/ Director of other bank / Senior officer(s) of Axis Bank:

If the declared is found to be false then the Bank will be entitled to evoke and/or recall the credit facility.

Sr. No	Name of Director(s)/Senior Officer (s)	Designation	Relationship
1			
2			

	1	2	3
Signature of Applicant			
Date & Place			
Signature of Guarantor			
Date & Place			

1)	2)	3)

Yours Faithfully,

(Authorized Representative)

Details of members and financial particulars of the Individual / Group Enterprises / SHG)

Full name		Fullname		Full name	/
_					
	W/D.o		W/D.o		W/D.o
	M other Name		M other Name		M other Name
Phot o	Gender: Male / Female /	Phot o	Gender: Male / Female /	Phot o	Gender: Male / Female /
	Third Designation:		Third Designation:		Third Designation:
	S pouse Name		S pouse Name		S pouse Name
	Address:		Address:		Address:
	Identity Proof / No:		Identity Proof / No:		Identity Proof / No:
	PAN No -		PAN No -		PAN No -
Full name		Full name		Full name	
ļ	W/D.o		W/D.o		W/D.o
Dlasta	M other Name	Dist	M other Name	District of	M other Name
Phot o	Gender: Male / Female /	Phot o	Gender: Male / Female /	Phot o	Gender: Male / Female /
	Third		Third		Third
	Designation:		Designation:		Designation:
	S pouse Name		S pouse Name		S pouse Name
	Address		Address:		Address
	Identity Proof / No:		Identity Proof / No:		Identity Proof / No:
	PAN No -		PAN No -		PAN No -
Full name		Full name		Full name	
	W/D.o		W/D.o		W/D.o
	M other Name		M other Name		M other Name
Phot o	Gender: Male / Female /	Phot o	Gender: Male / Female /	Phot o	Gender: Male / Female /
	Third		Third		Third
	Designation:		Designation:		Designation:
	S pouse Name		S pouse Name		Spouse Name
	Address		Address:		Address
	Identity Proof / No:		Identity Proof / No:		Identity Proof / No:
	 PAN No -		PAN No -		PAN No -
	171110		171110		171110
-					

Full name		Fullname		Full name	
	W/D.o		W/D.o		W/D.o
	M other Name		M other Name		M other Name
Phot o	Genaer: Maie / Female / Third Designation: S pouse Name	Phot o	Genaer: Maie / Female / Third Designation: S pouse Name	Phot o	Genaer: Maie / Femaie / Third Designation: S pouse Name
	Address		Address :		Address
	Identity Proof / No:		Identity Proof / No:		Identity Proof / No:
	PAN No -		PAN No -		PAN No -

Financial Particulars of	
As on _	

Sr No	Partic u la rs	Amount (in Rs.)
1	Savings from Members	
2	Seed Money from	
	(Specify source of Seed Money)	
3	Total interest and other incomes:	
4	Revolving Fund/ Grant Assistance received from project/	
	department/otheragencies	
5	Other Receipts (Specify)	
6	Borrow ing Outstanding, if any	
	(Please specify source)	
7	Loans outstanding against Members of group	
8	Amount in default, if any, against the Members of the group	
9	Recovery Percentage	
10	Cash/ Bank Balance	

Cash, bank balance	
For	
1)	
2)	
3)	
	(Authorized Representative)
FOR OFFICE USE ONLY	_
Acknowledgment for receipt of application.	

Our response for the application, (either sanction or rejection) shall be conveyed within the next 30

We are in receipt of the above application from your SHG on \_\_\_\_\_.

Signature of Branch Official

w orking days.

Signature Authorised Signatory of SHG

Name of the Bank Official

Name of Authorised signatory

## Specimen of Resolution by SHG for taking loan from bank

Add Dat	Name of SHG: Address: Date of Formation: Total no of Members: Name of Facilitating Agency.									
		Resolution for taking								
from	ay on(Date), at the	ce of SHG/ address) in p (name of SHG) will seek her resolved that Smt (Design gnation(Design con behalf of the	resence of all its member c loan of Rs, (in word (Desi ation) a ) will sign all the necessal	s, it is resolved that our ds)						
SI	Name of SHG members	Name of	Gender	Signature /Thumb Impression						
No		Father/H usband	(Male/Female/Third)	Impression						
1										
2										
3										
4										
5										
6 7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
(Des	nature si gnati on)	Si gnatur e (Desi gnati on	Signa ) (Desig	ture gnation)						
Sea	l of Self Help Group									

## <u>Details of Member wise Loan Requirement (As per Micro Credit Plan)</u> (Compulsory from 3<sup>rd</sup> credit linkage onwards)

Name of the SHG:-Date of formation: Address

No. of Members:

Member-wise details of proposed investment, sources of fund & resultant Net Surplus of the family

1       2       3       4       5       6       7       8       9       10       11       12       13	S.N.	Name of member*	Purpose of investment	Amount of ban Require d fr om SHG (Rs.)	Total Annu al Inco m e fro m vario us sources:- IGAs, Wages, Grants fr om Govt. etc. (Rs)	Total Annu al Expend iture (Rs.)	Annu al net inc o m e before repay m ent of ban insta llm e nt (Rs.)	Annu al repay me nt for the proposed loan & existing loan, if any (Rs.)	Annu al Surp lu s (Rs.)
3       4         4       4         5       6         7       7         8       9         10       11         12       13									
4       5         5       6         7       7         8       9         10       9         11       11         12       13									
5       6       7       8       9       10       11       12       13									
6 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9									
7 8 9 9 10 11 11 12 13 13 14 15 16 16 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18									
8 9 10 11 11 12 12 13 13 1									
9 10 11 12 13 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·								
10 11 12 13									
11 12 13	-								
12 13									
13									
1 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	14								
15									
16									
17									
18									
19									
20									
Total									

<sup>(\*)</sup> To be written in order of priority & rotation plan as decided in SHG meeting