

STATE BANK OF INDIA  
\_\_\_\_\_ BRANCH

SMALL BUSINESS FINANCE

Application Form For Loans above Rs.25,000

(Common for retailers/business enterprises/  
self-employed professionals and transport operators)

1. Name of the applicant –
2. Business Address  
  
Telephone No.:
3. Name(s) of the proprietor/ partners/directors                      Residential Address                      Telephone No.
  - i.
  - ii.
  - iii.
4. Whether the applicant belongs to Scheduled Caste or tribe? (Required for Bank's statistical purposes)
5. (a) Whether the applicant is technically qualified/experienced?  
  
(b) Whether the applicant is an Educated unemployed person?
6. Line of Activity
7. Present Banker
8. Nature of account with the present banker
9. Credit facilities required

Purpose	Amount	Repayment
1. Term Loan		
2. Working Capital		

I/We certify that all information furnished by me/us is true; that I/We have no borrowing arrangements for the unit with any bank; that no legal action has been/is being taken against me/us; that I/We shall furnish all other information that may be required by you in connection with my/our application, that this may also be exchanged by you with any agency you may deem fit and that you, your representatives, representatives of the Reserve Bank of India or any other agency as authorized by you, may, at any time, inspect/verify our assets, books of accounts, etc., in our factory and business premises.

Date

Place

Signature of the Borrower

Enclosures :

Applicant to furnish the Bank with

- (a) The copies of latest balance sheet along with the trading and profit and loss statement (in the case of units already established) where available.
- (b) List of equipment (existing / proposed to be acquired) as per the specimen enclosed.
- (c) Where term loans for fixed assets are required, copies of the relevant estimates for construction of buildings, proforma invoices for machinery, etc.

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Enclosure to Application Form

List of Equipment (both existing and proposed)

Name of the Unit :

Whether existing / proposed :

Sr. No.	Name of equipment (indicate new / second hand)	Date of acquisition	Name of Manufacturer	Name of Seller	Cost Price	Electric power required
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						