

Bank Use Only	
Branch Name and Code :	Date :
Client Type :      New      Existing	
Relationship Officer :	
Employee No. :	Contact No.(Mobile/Extension) :

Branch

**Constitution :** ☐ Proprietorship ☐ Partnership ☐ Private Ltd Liability Company ☐ Public Ltd Liability Company

☐ Personal (Individual/Joint) ☐ Other - Specify

## 01

**Secondary Borrower****(I) Personal Details**

Full Name :  
(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

Permanent Address :

Correspondence Address :

NIC/PP No. :

Nationality :

Date of Birth :

D D M M Y Y Y Y

Place of Birth :

Gender :

Male

Female

Marital Status :

S M D W

Telephone No. :

Mobile No. :

Email Address :

Educational Background :

Primary

Secondary

Graduate

Post-Graduate

Other - Specify

Spouse's Name :

Spouse's Telephone No. :

Spouse's Mobile No. :

**(II) Employment Details**

Applicant

Spouse

Profession/Business :

Name of Employer/Business :

Nature of Business :

Office/Business Address :

Telephone No. :

Email Address :

Employed Since :

D D M M Y Y Y Y

D D M M Y Y Y Y

**(III) Income Details (Rs. Per Month)**

Applicant

Spouse

Employment Income :

Interest/Investment Income :

Other Fixed Income  
Specify :

Total Expenses :

Net Disposable Income :

**(02) BUSINESS FACILITIES****(I) Business Details**

Name of the Business :

Registration No. :

Date of Registration :

D D M M Y Y Y Y

Date of Business  
Commencement :

D D M M Y Y Y Y

Registered Address :

Correspondence Address :

Telephone No. :

Mobile No. :

Email Address :

Nature of Business :

Details of Parent/  
Associate/Subsidiary  
Companies :

Auditors :

Share Capital Held

Nature of Business /  
Product Name

Name of Company

Value

Percentage

**(II) Capital Investment (Rs. Mn)**

	Proprietorship	Partnership	
Equity Capital :			
	Authorised	Issued	Paid Up
Private / Public Limited Liability Companies :			

**(III) Contact Person Details**

Name :			
(Rev./Dr./Mr./Mrs./Ms.)			
(Please underline the surname)			
Designation :		Client ID :	
Telephone No. :		Mobile No. :	
Email Address :			

**(03) GENERAL INFORMATION****(I) Details of Bank Accounts****(a) With DFCC Bank PLC**

	Account No.	Account Type	Branch
Recovery Account :			
Other Accounts :			

**(b) With Other Banks / Financial Institutions**

	(1)	(2)	(3)
Name of Bank/ Financial Institution :			
Branch :			
Account No. :			
Account Type :			
Date Opened :	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y Y
Present Balance (Rs.) :			

**(II) Details of Existing Loans, Leases and Other Credit Facilities (Excluding DFCC Bank PLC)**

	(1)	(2)	(3)
Name of Bank/ Financial Institution :			
Facility Type :			
Approved Limit :			
Current Balance (Rs.) :			
Interest Rate (p.a) :			
Monthly Installment/ Rental (Rs.) :			
Security Offered :			

**(III) Assets Owned By the Applicant****(a) Immovable Property**

	(1)	(2)	(3)
Details/Location :			
Extent :			
Current Market Value (Rs.) :			
Remarks :			

**(b) Movable Property  
Including Vehicles**

Details/Make/Model :

Registration/Serial No. :

Current Market Value  
(Rs.):

Remarks :

**(c) Shares**

Name of Company :

Quoted

Unquoted

Quoted

Unquoted

Quoted

Unquoted

Par Value (Rs.) :

No. of Shares :

Market Value (Rs.) :

(d) *Details of Stocks, Investments or Any Other Assets*

## (04) TAX DETAILS

**(I) Income Tax for the Past 3 Years (Attach Assessment Notices and Tax Receipts)**

Year of Assessment :

Assessable Income (Rs.) :

Taxable Income (Rs.) :

Tax Payable (Rs.) :

Tax Paid (Rs.) :

**(II) BTT/VAT or Any Other Revenue Based Taxes for the Last Financial Year**

Quarter 01 / 20

Quarter 02 / 20

Quarter 03 / 20

Quarter 04 / 20

Turnover (Rs.)

Tax Paid (Rs.)

### (05) PROJECT / BUSINESS DETAILS

**(I) Description of Project / Business**

Existing Business :

Proposed Business :

Supply Chain  
(Existing and new  
sources proposed if any) :

Market  
(Existing and proposed  
arrangements) :

Environmental  
Clearances :

Clearance Obtained

Applied for Clearance

Not Applicable



(08) DECLARATION

I/We confirm to the best of my/our knowledge and belief that the information furnished in this application form together with the attachments specified herein are true and correct. I/We agree that any material misrepresentation will give DFCC Bank PLC the right of cancellation of the facility and recovery of dues and pecuniary losses.

Name :		NIC No :		Signature of the Applicant / Partner / Director / Authorised Signatory (on rubber stamp if applicable)
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Name : 



 NIC No :

Signature of the Applicant /  
 Partner / Director / Authorised Signatory  
 (on rubber stamp if applicable)

Name :

NIC No :

Signature of the Applicant /  
 Partner / Director / Authorised Signatory  
 (on rubber stamp if applicable)

Name : [Grid] NIC No : [Grid]

Signature of the Applicant /  
Partner / Director / Authorised Signatory  
(on rubber stamp if applicable)

Name : [Grid] NIC No : [Grid]

[Grid]

Signature of the Applicant /  
Partner / Director / Authorised Signatory  
(on rubber stamp if applicable)

D	D	M	M	Y	Y	Y	Y
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(09) CHECK LIST

Requested by DFCC Bank PLC	Submitted by the Client	
<input type="checkbox"/>	<input type="checkbox"/>	1. Copy of Business Registration/Company Incorporation Certificate together with Form 20 and Form 13
<input type="checkbox"/>	<input type="checkbox"/>	2. Certified copy of the Partnership Agreement/Memorandum and Articles of Association
<input type="checkbox"/>	<input type="checkbox"/>	3. Detailed audited financial statements for past three years
<input type="checkbox"/>	<input type="checkbox"/>	4. Invoices, catalogues, technical data etc. for the plant equipment and machinery to be procured along with two alternative quotations
<input type="checkbox"/>	<input type="checkbox"/>	5. If new buildings are proposed, approved building plan and priced Bill of Quantities (BOQ)
<input type="checkbox"/>	<input type="checkbox"/>	6. Copy of Environmental Protection Licence
<input type="checkbox"/>	<input type="checkbox"/>	7. Borrower's Declaration (for SMI Loans)
<input type="checkbox"/>	<input type="checkbox"/>	8. Details of the project;
<input type="checkbox"/>	<input type="checkbox"/>	(a) Present Production Capacity (if any) and estimated increase in capacity after the proposed project
<input type="checkbox"/>	<input type="checkbox"/>	(b) Forecasted Profitability Statement for the proposed project together with assumptions
<input type="checkbox"/>	<input type="checkbox"/>	(c) Any other relevant information on the project/sponsors (If a project report covering the above information is available, please attach a copy)
<input type="checkbox"/>	<input type="checkbox"/>	9. Additional particulars of Individual/ Proprietor/Partners/Directors and proposed Personal Guarantors as per format given in Annexure 01. Please use photocopies if more than one Guarantor is proposed
<input type="checkbox"/>	<input type="checkbox"/>	10. If Land /Buildings are offered as security;
<input type="checkbox"/>	<input type="checkbox"/>	(a) Complete set of title documents (including the original Title Deed indicating ownership of properties) covering a period of 35 years clear title
<input type="checkbox"/>	<input type="checkbox"/>	(b) A recent survey plan depicting the allotment of land as well as the buildings thereon together with earlier plans
<input type="checkbox"/>	<input type="checkbox"/>	(c) Registration extracts from the relevant land registry covering a minimum period of 35 years
<input type="checkbox"/>	<input type="checkbox"/>	(d) Pedigree and Abstract of Title
<input type="checkbox"/>	<input type="checkbox"/>	(e) I. Non Vesting Certificate
<input type="checkbox"/>	<input type="checkbox"/>	II. Certificates regarding Street Lines and Building Limits
<input type="checkbox"/>	<input type="checkbox"/>	III. Certificate of Ownership
<input type="checkbox"/>	<input type="checkbox"/>	IV. Tax Receipt in respect of the last quarter
<input type="checkbox"/>	<input type="checkbox"/>	(f) In the case of leased premises, copy of the Lease Agreement
<input type="checkbox"/>	<input type="checkbox"/>	11. If a Company Guarantee is offered as security, certified copy of Memorandum and Articles of Association of the guaranteeing company

*In the case of directors of public limited liability companies you may furnish information requested in (a) to (f) only.*

(a) Full Name :   
 (Rev./Dr./Mr./Mrs./Ms.)  
 (Please underline the surname)

(b) NIC No :

(c) Telephone No. :   (d) Mobile No. :

(e) Percentage of Shares/  
Equity Capital Held :  (f) Market Value of Shares/  
Equity Capital Held :

(g) Address :

(h) Email Address :

(i) Profession :

(j) Bankers :

Name of the Bank	Branch	Account No.

(k) List of Assets :

Asset Type	Description	Market Value (Rs.)

(l) Liabilities :

Bank/Financial Institution/Other	Amount Liable (Rs.)	Monthly Commitment (Rs.)

(m) Income Tax Particulars for the Past Three Years (as certified by a firm of chartered accountants)

	20 <span style="border: 1px solid black; display: inline-block; width: 20px; height: 1.2em; vertical-align: middle;"></span>	20 <span style="border: 1px solid black; display: inline-block; width: 20px; height: 1.2em; vertical-align: middle;"></span>	20 <span style="border: 1px solid black; display: inline-block; width: 20px; height: 1.2em; vertical-align: middle;"></span>
Year of Assessment :			
Income (Rs.) :			
Statutory Income (Rs.) :			
Assessable Income (Rs.) :			
Tax Payable (Rs.) :			
Tax Paid (Rs.) :			

Signature of the Applicant / Partner /  
Director / Authorised Signatory / Guarantor  
(on Rubber Stamp if applicable)

Signature of Chartered Accountant  
(on Rubber Stamp if applicable)