

## **Business Loan Unsecured**Application Form

Serial No.	

Fields marked in \* are mandatory | Please fill in all the required details in BLOCK LETTERS, Tick boxes as applicable

Loan Amount (र	₹in Lakhs)	Tenure (Mo	nths)	Pui	rpose	
						Applicant
Business Details						Photograph
Constitution	Individual	Proprietorship	Partnership Firm	_		
Customer ID	Yes No	If Yes	(Please pr	ovide Customer ID, in cas	e of existing customer)	
Account No.(s) Name of Firm/Company						
Udyog Aadhaar No.		PAN			Date of Incorporation	DDMMYYYY
Industry Type	Manufacturing	Trading	Service	Educc		ers
Segment	Self-Employed N	Non Professional No	ture of Business			
	Self-Employed F	Professional CA	Doctor	Architect		
Office Address						
_						
District				ate/ U.T.		
PIN E-mail Address		Nearest Landmark				
Business Website						
Off. Tel. No.			Mobile			
Office Ownership	Self-Owned	Parental Owned Ren	tal Residence	Cum Office	 Mortgo	aged Yes No
No. of Months in the city	Years	Months		No. of Months in th	e Office Address Y	ears Months
Factory Address						
District			St	ate/ U.T.		
PIN		Nearest Landmark				
Factory Tel. No.			Mobile			
Factory Ownership	Self-Owned	Parental Owned Ren			Mortgo	
Preferred Mailing address	Office	Residence Fact	ory Permaner	t No. of Months in t	the Factory Address	Years Months
Individual Applicant	/ Co-applicant /	Proprietor / Partner	Director / Other	er Details		
INDIVIDUAL APPLICA	ANT CO-APPI	LICANT - 1 PARTNE	R-1 PROPRIE	TOR OTHER - 1	1	
Name						
Father's/Spouse Name*						
Mother's Name						Applicant Photograph
Nationality	Indian Othe	ers Gender Male	Female Otl	ners DOB	D M M Y Y Y	
Residential Status	Resident Individ	ual Non Resident	Indian Fore	ign National F	PIO/OCI	
CKYC No.			Cust. ID (in case o			
PAN				haar No.		
Occupation Type		Sector Public Sector			7 c	
	Others: Profess Business		d Retired	House Wife	Student	
Passport No./Voter ID/Dri	_	Not Categorized		Passport / Driv	ving Licence Expiry Date	D D M M Y Y Y Y
Religion		slim Christian :	⊥⊥⊥⊥⊥ Sikh ☐ Buddhist	Zoroastrian		Others
Category				thers	] 1 (13)	Zuici3
Residence Address	0 0   1   0 1					
Nesidelice Address						
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District			Si	ate/U.T.		
			St	ate/U.T. No. of Months in the	e residence address	Years Months
District			Sı		e residence address	Years Months
District PIN			S <sub>1</sub>		e residence address	Years Months
District PIN						Years Months
District PIN Permanent Address District PIN		Tel. No. [	S1	No. of Months in the	Mobile	
District PIN Permanent Address District	Matriculate Unmarried	Tel. No. [  Undergraduate  Married		No. of Months in the		Years Months    Months   Month

Co-applicant - II / Pi	roprie	etor - II / I	Parti	ner - II	/ Di	rector -	II / O	hers	- II Det	ails								
CO-APPLICANT - 2		PARTNER - 2		DIRE	ЕСТО	R - 2	☐ O1	HER -	1									
Name (Same as ID Proof)	$\Box$		П	$\overline{1}$	П		$\overline{\Box}$											
Maiden Name (if any)																		
Mother's Name						ЦП	Ш										icant	
Nationality	=		Others	_	nder			nale	₹	Gender	DOB D	D M N	Y Y Y	Υ		Photo	grapn	
Residential Status		Resident Ind	ividuo	ıl  _	Nor	n Resident				National	_	O/OCI						
CKYC No.	$\vdash$			$\perp \downarrow \downarrow$			Cu	st. ID (		isting custom	ner)	+		$\coprod$				
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Occupation Type	Serv			ector _	_	blic Secto			Sector		,,,							
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Passport No /Votor ID/Dr	Business Not Categorized  Passport No./Voter ID/Driving Licence/Others Passport/Driving Licence Expiry Date Date Date Date Date Date Date Date																	
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Education	$\Box$	Matriculate	<u> </u>	Unde	rgrac		Gr	aduate	,	Postgrad	luate [	Profe	essional		Oth	ers		
Marital Status		Jnmarried	Ī	 Marri	_		=	hers		3	L			Numbe	_		ents	
	ш																	
Financial/Income De	tails																	
Financial Year		Year				Turno	ver (₹ iı	Lacs)				Pro	fit as per	P&L (₹	in La	cs)		$\overline{}$
Past Year II		20 - 20																
Past Year I		20 - 20																
Provisional		20 - 20																
Existing Loan/Facilit	v Det	tails																
Loan Bank Name		Type of Loan	Ι	ccount N	_	Loan Am	ount	EMI	Logn	pening Do	ate Teni	ıro	ROI	Secur	city	Outsta	nding as	on
1.		ype or Louii	A	ccount iv	0.	Louit All	iount	LITI	Louir O	pennig Di	ate lent	ii e	KOI	Secui	ity	Outstui	iuiiig us	OII
2.																		
3.																		
4.																		
Details of Associates	:/Gro	un Entitie	s (in	Lakhs).	Det	tails as a	on											
	posure			Natu			Sales/	Net	Net	Addre	ess of Pr	esently	Nature	e of	Exten	t of Int	erest as	a
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Banking Details																		
Banking Details  S. No.		Name	e of the	e Bank						Branch	1	<i>I</i>	Account N	umber		Banki	ng Since	2
_		Name	e of the	e Bank						Branch	1	<i>A</i>	Account N	umber		Banki	ng Since	2:
S. No.		Name	e of the	e Bank						Branch	1	<i>A</i>	Account N	umber		Banki	ng Since	2
S. No. 1. 2.		Name	e of the	e Bank						Branch	1	4	Account N	umber		Banki	ng Since	2
S. No.  1. 2.  Statutory Obligation					releva	ant obligati	on to be	given\		Branch	1	1	Account N	umber		Banki	ng Since	2:
S. No.  1. 2.  Statutory Obligation Statutory Obligation: Remark	cs (Any	details in conr	nection	n with the i			on to be	given)		Branch	1	<i>A</i>	Account N	umber		Banki	ng Since	<u>.</u>
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Mobile	obile E-mail ID																																						
Inform	Information on Other Products and Offerings																																						
From tim	e to tim	ne, SBM bank	commun	icates v	ario	ous r	new p	rod	uct/	/spe	ecial	l fed	atur	es c	of ex	isti	ng p	rod	luct	s/pi	rom	otic	nal	offe	ers v	vhic	h ar	e of	siq	nifi	cant	t be	enef	fit to	o it:	s cu	stor	ners	s.
I/We	From time to time, SBM bank communicates various new product/special features of existing products/promotional offers which are of significant benefit to its customers.  I/We consent/ do not consent to receive information/ services etc. for marketing purposes through Telephone/Mobile/SMS/E-mails by the Bank/its Agents.																																						
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Sr. No.		t(s) is/are related to the director(s) and/or Senior Officer(s) of the Bank or of any other Banks as specified hereto.  Name of Director(s)/Senior Officer(s)  Designation  Relationship																																					
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GST Details - Business (For Individual fill Annexure)																																							
Whether registered under GST Yes No Registration Date: D D M M Y Y Y Y													Υ																										
GST Registration Single Multiple (Please fill GST Annexure for multiple GST Registration)																																							
Special E	Special Economic Zone Yes No SEZ Code (If Yes) GSTIN (Default)																																						
GST Exe	mption			Yes		No		Е	xen	npt	ion	Red	asor	ı (Ii	f Yes	s) _										Е	xen	npti	on '	Val	id Ti	ill	D	D	Μ	M	ΥY	Υ	Υ
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## **Customer Declaration**

LIMB cartify that the information provided by me/us in this application form is true, correct, complete and up to date in all respects and that this shall form the basis of any facility that SBM Bank (India) Ltd (the Bank) may decide to grant to us of its shall described. When he has borrowing arrangements for the unit except as in the application; that IVW have not been declared as defaulter/wilful defaulter by any Bank/FI and no Legal action has been taken/initiated against me/us by any Bank/FI. If we shall furnish all other information that this may also be exchanged by you with an agency you may do agent fl and you, you greater than the properties of the properties

- The DSA/DST has not collected any commission/brokerage or any other fee by way of cash or cheque.

  SBM Bank (India) Ltd. reserves the right to retain the photographs and documents submitted with this application and will not return the same to the applicant.

  As per RBI guidelines, classification of accounts as NPA is done Borrower wise and not Facility wise and hence, it may be noted that in case of non-payment of dues by the customer in case of any facility availed from the Bank and consequently the account is to be classified as NPA, all other loan accounts of the Borrower/Card Holder, with the Bank also shall be classified as NPA as per the guidelines issued by RBI and it shall entitle the Bank to recall all such loans/facilities availed by the same customer from the Bank irrespective of the regular repayment in such accounts.
- 1. I undertake the responsibility to declare and disclose within 30 Days from the date of change, any changes that may take place in the information provided by me as well as the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh self-certification along with the documentary evidence.

  7. It shall be my responsibility to educate myself and to comply at all times with all relevant Lows relating to reporting under section 285BA of the Income Tax Act read with the rules thereunder. I shall indemnify the Bank for any loss that may arise to the Bank on account of providing incorrect or incomplete information. I understand and acknowledge that as per the provisions of Income Tax Act, Rules made thereunder and the guidelines issued by RBI in the matter, depending upon the residential status and /or other criteria stipulated therein, the Bank may have to report the details in respect of my account (s) as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government agencies to comply with the obligations as per the Inter-Governments (IGA) in respect of Foreign Accounts Tax Compliance Act (FATCA) and Common reporting Standards (CRS) and or any other similar arrangements.
- 8. I understand that the Bank shall only charge the processing fees at the time of the loan application/sanction of the facility. The said processing fees shall only be paid to the Bank directly either by way of a cheque/demand draft/ RTGS/ NEFT favouring "SBM Bank (India) Limited" or in case of a cash deposit only on the counters at Bank's branch. Any other charges as specified in the Sanction Letter, shall be applicable and be directly paid to the Bank.

  Adhaar Consent KYC ONLY

I/We hereby submit voluntarily at my/our own discretion, the physical copy of Aadhaar card/physical e - Aadhaar / masked Aadhaar / offline electronic Aadhaar xml as issued by UIDAI (Aadhaar), to SBM Bank (India) Ltd. for the purpose of establishing my/our identity / address proof and voluntarily give my/our consent to open account / process instructions for the said purpose with SBM Bank (India) Ltd. in my/our name/s individual capacity/ies using my/our Aadhaar or as an authorized signatory in non-individual accounts and; hereby consent to SBM Bank (India) Ltd. for verification of my/our Aadhaar to establish its genuineness through Quick Response (QR) code embedded in the Aadhaar card or through such other acceptable manner as per UIDAI or under any Act or law from time to time. The consent and purpose of collecting Aadhaar has been explained to me/us in local language. SBM Bank (India) Ltd. has informed me/us that my/our Aadhaar submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law. SBM Bank (India) Ltd. has informed me/us that this consent and my/our Aadhaar will be stored along with my/our account details within the bank. I/We hereby declare that all the information voluntarily furnished by me/us is true, correct and complete. I/We will not hold SBM Bank (India) Ltd. or any of its officials responsible in case of any incorrect information provided by me/us.

To. State Country

Nearest Landmark

E-mail ID

SBM bank (India) Ltd. to obtain and disclose all institutions set up under the provisions of law fr	l information and data furnished by me / u	s to TransUnion CIBIL Limited and/ or any o	ther credit bureau permitted to operate in	India and/or information utility and/or such									
Date	Applicant Signature	Co-Applicant - I / Partner I Proprietor / Director I	Co-Applicant - II Partner II / Director II	Co-Applicant - III Partner III / Director III									
Place		Trophetor / Director 1	ruitilei II / Director II	ruttiei III / Directoi III									
Sourcing Details (for Official	. use only)												
Sourcing Channel Brai	nch DSA Connecto	or Direct Open Mai	rket Others	(Please Specify)									
DSA Code				Signature of									
DSA Name	Name Re												
SBM Bank RM													
Referrer Branch Name				Signature of Sourcing Channel									
Employee ID													
For Bank Use Only	For Bank Use Only												
KYC VERIFICATION CARRIED O	OUT BY		Docu	ıments Received Certified									
Emp. Name													
Emp. Code	Emp. Designation												
Date D D M M Y Y Y				Employee Signature									
Place				,,									
Pre Sanction Documents		Post Sanction	on Documents										
Last 3 years Audited /CA certified fi     MOA & AOA of Company / Partners     Six Months Bank statement		2.Compliance o	ility related documents f Sanction terms and other condit l documents may be required as p										
5. KYC Documents  Note: Additional document may be re	equired for Credit assessment												
SBM Bank has received your applicate	L	of ₹ SBM Bank wil	L convey its decision within 2 wee	eks for credit limit up to ₹5 lakh and									
within 3 weeks for credit limit above documents as per 'check list' provide computation of timelines shall start f	ed in the application for loan and/	or any additional documents as mo	ay be required by the bank for pro	per appraisal of the application. The									
Acknowledgement for Recei	pt of Application Form		Serial	. No.									

Signature of Sales Manager/

Sourcing Channel