

Name of the Bank:

Application to the Committee for a Corrective Action Plan under Revival & Rehabilitation of MSME

(For Existing Loan Exposure above Rs.10 Lakhs and up to Rs.25Crore)

(To be submitted along with documents as per the check list)

A. Brief Profile of the Enterprise:

Name of the Enterprise						
Constitution	√	Proprietary	Partnership	Pvt. Ltd.	Ltd. Company	Any Others
Corporate office / Registered Office address of the borrower						
Contact No.		E-Mail				
Udyog Aadhaar No./Registration No.						
Date of Incorporation / Establishment						
Date of commencement of operations:						
Activity		Mfg./ Trading/ Services/Others				
Banking with Us Since:						
Banking arrangement :		Sole Banking /Consortium/ /Multiple Banking				
SMA Status						
External Credit Rating		Name of the Agency		Current Rating		Previous Rating

B. Details of Proprietor/ Partners/ Directors:

(Amount in Lacs)

Name of Proprietor/ Partners/ Directors	Designation	Residential Address with Contact No.	PAN No. /DIN No.	Net Worth as on date

C. Details of Associate Concern /Sister Concern / Group Companies:

(Amount in Lacs)

Name of Associate Concern / Sister Concern / Group Companies	Business Activity	Banking With	Loan Limit		Financials as on		
			FB	NFB	Gross Sales	PAT	TNW

D. Social Category:

Social Category	√	SC	ST	OBC	Women	Physically Handicapped	Minority
If Minority Community	√	Buddhists	Muslims	Christians	Sikhs	Jains	Zoroastrians

E. Details of Existing Liabilities with the Bank:
in Lacs)

(Amount

Sl. No.	Nature of Facility	Limit	O/s Bal as on	Over Dues
1.	Fund Based			
A.	Working capital			
B.	Term Loan			
	Total (1)			
2.	Non Fund Based			
	Total (2)			
3.	Grand Total (1+2)			

Reasons of Overdue/Default in Repayment:

F. Details of Other Liabilities:
in Lacs)

(Amount

Details of Statutory dues remaining outstanding with State Government or Central Government	Details of Unsecured Creditors. (Furnish reason for incurring liability)

G. Financials:
in Lacs)

(Amount

Particulars	Past Year-II (Actual)	Past Year-I (Actual)	Present Year (Estimate)	Next Year-I (Projection)	Next Year-II (Projection)
Net Sales (including Operating Income)					
(%) growth in net sales over previous year					
Operating Profit (after interest)					

Operating Profit Margin (%)					
Other Income					
Profit Before tax					
PAT					
Net Profit Margin (%)					
Paid-up Equity Capital/					
Tangible Net Worth					
TOL/ TNW					
Current Ratio					
Debt Equity Ratio					
Debt Service Coverage Ratio					

H. (a) Details of Existing Security:

(Amount in Lacs)

Particulars of Primary Security	Nature of charge	Date of Valuation	Value
Particulars of Collateral Security	Nature of charge	Date of Valuation	Value

(b) Details of Proposed Additional Security to be offered:

Particulars of Primary Security offered	Particulars of Collateral Security (where applicable)

I. (a) Details of Existing Guarantors:

(Amount in Lacs)

Name of the Guarantors	Age	Occupation	Annual Income	Net Worth

(b) Details of Proposed Guarantors:
in Lacs)

(Amount

Names of the Guarantors	Age	Occupation	Annual Income	Net Worth

J. Declaration: I/We hereby certify that all information furnished by me/us is true, correct and complete to the best of my/our knowledge and belief. I/We shall furnish all other information that may be required by Bank in connection with my/our application. The information may also be exchanged by you with any agency you may deem fit. You, your representatives or any other agency as authorised by you, may at any time, inspect/ verify my/our assets, books of accounts etc. in my/our factory/business premises. You may take appropriate safeguards/action for recovery of bank's dues.

Signature of Borrowers

Signature of Existing & Proposed Guarantors

Date:

Place:

CHECK LIST: (The check list is only indicative and not exhaustive and depending upon the requirements of banks addition/deletion could be made as per necessity)

- 1) Last two years audited balance sheets of the units along with income tax/sales tax return etc.
- 2) Projected balance sheets for two years in case of working capital limits and for the period of the loan in case of term loan.
- 3) Sales achieved during the current financial year up to the date of submission of application.
- 4) Asset & Liability statement of Proprietor/ Partners/ Directors.
- 5) If funds proposed to be infused by borrower, please specify Sources.
- 6) Detailed Particulars of securities primary/collateral proposed, if any.
- 7) Details of all liabilities of the enterprise, including the liabilities owed to the State or Central Government and unsecured creditors, if any.
- 8) Detailed note on nature of stress faced by the Enterprise.
- 9) Suggested remedial measures with the estimated time frame by the Enterprise with supporting details to justify the action plan /solution. duly supported/vetted by TEV as the case may be.

**Acknowledgement Slip for Application to the Committee for Corrective Action Plan
under Revival & Rehabilitation of MSMEs**

Office Copy:

Received form

Mr/Ms/M/s.....

.....(Name & Address)an application dated for corrective
action plan under revival & rehabilitation of MSMEs.

All the required information / documents are furnished on / yet to be
furnished onby the applicant.

Date

Officer / Manager

Please Note that :

1. This is only an acknowledgement for having received the application and this should not be construed as an indication of our acceptance of the proposal, a decision on which will be taken only after due consideration of the proposal on its merit and / or on fulfilment of conditions if any, that may be stipulated by the Bank.
2. The application will be taken up for consideration only after all the particulars / data / documents as may be required are received by the Bank.
3. The application will be disposed off within.....days from the date of receipt of all the details /papers/documents /clarifications sought by the Bank.
4. In case the proposal is rejected/not considered the reasons for the same will be intimated to the applicant.

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Received form

Mr/Ms/M/s.....

.....(Name & Address)an application dated for corrective action plan
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Officer / Manager