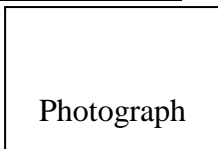


IFIC BANK LIMITED

..... BRANCH,

Application and Loan Processing form for Small Enterprise Financing-Term Loan (..... Loan)

The Manager
IFIC Bank Ltd.
..... Branch



I hereby apply for a Term Loan for Tk. lac under the SEF Product Program Guidelines of Loan and furnish the following information to consider my proposal.

01	Name of the Concern	:	
02	Name of the Proprietor/Proprietress	:	
03	Date of Birth	:	
04	Date of Establishment	:	
05	Trade License : a) Date of issue	:	
	b) Date of validity	:	
06	Account Number	:	
07	Date of opening of the Account	:	
08	Nature of Business	:	
09	Allied Business (if any)	:	
10	Present Address: a) Business	:	
	b) Residence	:	
11	No. of years at Current Address	:	
12	Permanent Address	:	
13	Contact Telephone No.	:	
14	Educational Qualification	:	
15	Father's Name	:	
	Profession	:	
16	Mother's Name	:	
	Profession	:	
17	Spouse Name	:	
	Profession	:	
18	Purpose of Loan	:	
19	Investment	:	
20	Net Worth	:	

21	References of two persons	:	Name	Profession	Contact Address
		i)			
		ii)			

22	Liability with :	IFIC Bank	:	
		Other Banks	:	
		Others	:	

Particulars of Shop/godown :

a)	Address	:	
b)	Area / Measurement	:	
c)	Nature of Construction	:	
d)	Own /Rented	:	
e)	If rented, name with Address of the owner	:	

Volume of Purchase, Sale, Profit & Loss of last 3(three) years:

Year	Total Purchase	Total Sale	Net Profit (Loss)

Income Statement :

(Amount in lac)

Sl #	Particulars	Year		
01	Sales/ Revenue			
02	Less Cost of Goods Sold			
03	Gross Profit			
04	Less General & Administration Expense			
05	Less Selling & Manufacturing Cost Expense			
06	Operating Profit			
07	Less Financial Expense			
08	Net Profit			
09	Add other Income			
10	Net Profit before Tax			
11	Tax			
12	Net Profit after Tax			

Net Worth Statement:

(Amount in lac)

Asset		Liability	
Cash in hand -		Loan from Bank -	
Cash at Bank -		Personal Loan -	
Stock in hand -		Trade Payable -	
Trade Receivable -			
Fixed Asset -			
Other Asset -			
Total :		Total :	
Net Worth :			

Particulars of Guarantor :

a)	Name	:	
b)	Profession	:	
c)	Father's Name	:	
d)	Profession	:	
e)	Mother's Name	:	
f)	Profession	:	
g)	Address: i) Present	:	
	ii) Permanent	:	

	iii) Business	:	
h)	Relationship with the applicant	:	

Signature of Applicant

FOR BRANCH USE

Turnover in the Account: From to

Opening Balance: Tk./-. Cr Summation: Tk./- Dr Summation: Tk......./-

Present Balance: Tk......./- , times of the proposed limit.

Check List :

01. CIB information –
02. Copy of Trade License --
03. Stock Report --

Security:

Hypothecation of:

1. Hypothecation of Stock.
2. Personal guarantee of Guarantor.
3. Personal Guarantee of Spouse.

Comments of Credit Analyst :

Recommendation of Relationship Manager :

Certification :

Credit Analyst

Relationship Manager

FOR HEAD OFFICE USE

Comments of Credit Analyst at Head Office :

Comments of In-charge :

Comments of Manager :

Recommendation/Approval of Head of CRM :

Recommendation/Approval of D.M.D. :

Approval of M.D. :