

## SME Loan-Sales Checklist & Deviation Sheet

*(for Authority use only)*

SME Client Name:

A/C No. :

Date :

— / — / —  
DD MM YY

Source :

1.	Application form duly completed and signed?	Yes	No	
2.	Ownership structure :			
	SOLE PROPRIETORSHIP	Yes	No	N/A
	Trade license provided	Yes	No	N/A
	PARTNERSHIP	Yes	No	N/A
	Trade license provided	Yes	No	N/A
	Partnership deed provided	Yes	No	N/A
	Board resolution provided	Yes	No	N/A
	PRIVATE LIMITED COMPANY	Yes	No	N/A
	Memorandum & articles of association provided	Yes	No	N/A
	Board resolution provided	Yes	No	N/A
	Form XII/from X (if applicable) provided	Yes	No	N/A
3(a)	Land phone at residence	Yes	No	N/A
(b)	Land phone at work/office	Yes	No	N/A
4.	Does the business fall under restricted/excluded category?	Yes	No	N/A
5.	Is business age 2 years or more?	Yes	No	N/A
6.	Is business at the current location for last 2 years?	Yes	No	N/A
7.	Documents proving 2 years current location provided?	Yes	No	N/A
8.	Annual turnover minimum BDT 0.5m	Yes	No	N/A
9.	Latest 12 months business account statement provided	Yes	No	N/A
10.	Company seal provided	Yes	No	N/A
11.	Photograph of proprietor/partners/directors provided	Yes	No	N/A
12.	TIN certificate of client provided	Yes	No	N/A

If there is any deviation, please justify below:

### JUSTIFICATION

## SME APPLICATION FORM

*Please complete the form in CAPITAL letters*

<b>1.</b>	Source:	<b>2.</b>	Date: <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u>
<b>3.</b>	Purpose:	<b>4.</b>	Business Type:
<b>5.</b>	Amount:	<b>6.</b>	Tenure:

### Business Entity Information

<b>7.</b>	Name of the Business			
<b>8.</b>	Address of the Business			
<b>9.</b>	Premises Status	<input type="checkbox"/> Rented <input type="checkbox"/> Personally Owned <input type="checkbox"/> Family Owned <input type="checkbox"/> Others (Specify): _____		
<b>10.</b>	Years of Occupancy in the Current Address <small>(Has to be verified by oldest &amp; recent utility bill)</small>	<input type="checkbox"/> Less than 2 years <input type="checkbox"/> More than 2 years		
<b>9.</b>	Business Phone & Fax Number (s)	Phone:	Fax:	
		Mobile:		
<b>10.</b>	E-mail			
<b>11.</b>	Legal Entity of Business	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Private Limited Company <input type="checkbox"/> Partnership <input type="checkbox"/> Others (Specify) _____		
<b>12.</b>	RJSC Number <small>(for limited company)</small>			
<b>13.</b>	Date of Establishment	<u>  </u> / <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u>		
<b>14.</b>	Business Started by:	<input type="checkbox"/> Self <input type="checkbox"/> Inherited		
<b>15.</b>	Business TIN			
<b>16.</b>	Residency <small>(Nationality status of Proprietor/ Partners/ Directors)</small>	<input type="checkbox"/> All Bangladeshi <input type="checkbox"/> Others (Specify) _____		
<b>17.</b>	Trade License No.	No	Date Issued	Validity
			<u>  </u> / <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u>	<u>  </u> / <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u> / <u>  </u>
<b>18.</b>	Brief Description of the Business <small>(Please emphasize on the nature, history, present market status and future plan of the business)</small>			

Seal & Signature

## Organizational /Financial Details

<b>19.</b>	Number of Years in Current Business						
<b>20.</b>	Total Assets at Present	BDT					
<b>21.</b>	Total Current Assets (Cash, Receivables, Inventories etc.):	BDT					
<b>22.</b>	Immediate Past Work Experience of the Borrower:						
<b>23.</b>	Name of major suppliers with Address Phone No.						
<b>24.</b>	Total Borrowings at Present :						
	Bank Name & Branch	Type of Credit Facility	Limit	Expiry	Outstanding	Years of Relationship	EMI
	1.						
	2.						
	3.						
<b>25.</b>	How much do you sell on daily basis?	BDT					
<b>26.</b>	How many days does it take you to sell your product? (from date of production/purchase):	_____days					
<b>27.</b>	How much of your sales are on credit? (in %)						
<b>28.</b>	Known Number of Competitors:						
<b>29.</b>	(a) Raw materials Used/ Products Traded :	Source	<input type="checkbox"/> Local		<input type="checkbox"/> Foreign		
	(b) Is sourcing limited to single and /or multiple supplier?	<input type="checkbox"/> sourcing from single supplier	<input type="checkbox"/> sourcing from multiple supplier		<input type="checkbox"/> supply is reliable		
<b>30.</b>	Name of the major Buyer	1.					
		2.					
		3.					
<b>31.</b>	Average no. of days before paying suppliers : Financial and Operating Information : (obtain Balance Sheet from client)	Current year	Immediate Past Year	2 Years Ago	3 Years Ago		
		days	days	days	days		
<b>32.</b>	(a) Sales Revenues for Past 3 years	BDT	BDT	BDT	BDT		
	(b) Net income / profit for Past 3 years	BDT	BDT	BDT	BDT		
<b>33.</b>	How many days does it take you to collect your sale proceeds from your customers?	_____days					
<b>34.</b>	Average amounts withdrawn for family from the business each month	BDT					

## Continue

**35.** Name of Employees of the loan applicant handling major areas of the business :

Area of Responsibility	Name	Education Attainment	No of Years in Employment
Production/ Purchasing			
Sales/ Marketing			
Finance			

**36.** Availability of Utilities in Project Location

Power	<input type="checkbox"/> Reliable	<input type="checkbox"/> Unreliable
Water	<input type="checkbox"/> Reliable	<input type="checkbox"/> Unreliable
Gas	<input type="checkbox"/> Reliable	<input type="checkbox"/> Unreliable

**37.** What days do you normally spend in a week for your business?  Less than 3 days  3 days  More than 3 days  hours

**38.** How many hours do you normally spend each day for your business? \_\_\_\_\_ hours

39.	Items to be Financed	Total Estimate	Proposed Sources of Financing	
			Loan	Own Contribution
	Land Improvements	BDT	BDT	BDT
	Machinery and Equipment	BDT	BDT	BDT
	Inventory - Raw Materials	BDT	BDT	BDT
	Inventory - Finished Goods	BDT	BDT	BDT
	Accounts Receivable Financing Others (Specify)	BDT	BDT	BDT
	<b>Total Requirements</b>	BDT	BDT	BDT

**40.** Family Income Other Than Business :

Sources of Income	Income per Month (BDT)	Expenses of Family per Month
BDT	BDT	BDT

**41.** Collaterals Offered:

a. Type of Collateral	b. Location	c. Title	d. Owners	e. Value
Residential Independent House				
Residential Apartment				
Vacant Commercial Land				
Vacant Residential Land				
Shop				
Vacant Land : (Specify)				
Developed/ Undeveloped				
Agricultural/Non-agricultural				
Brick walled/Open area				
Apartment Unit Insured/ Uninsured				
Transport Equipment				
Production Machinery/Equip others (Specify)				

## Applicable for Sole Proprietorship Concern

### Personal Information of the Proprietor

<b>42.</b>	Name(full name)					<b>43.</b>	Date of Birth	D / D / M / M / Y / Y			
<b>44.</b>	Residence Address										
<b>45.</b>	Residence Telephone					<b>46.</b>	Mobile				
<b>47.</b>	Years of Occupancy in the Residence Address	<input type="checkbox"/> Less than 1 year <input type="checkbox"/> 3 to 6 years <input type="checkbox"/> Rented <input type="checkbox"/> Family Owned				<input type="checkbox"/> 1 to 3 years <input type="checkbox"/> More than 6 years (Specify) <input type="checkbox"/> Personally Owned <input type="checkbox"/> Others (Specify)					
<b>48.</b>	Net worth of the party: (a-b)	a) Assets Description	Locality	Declared Value	b) Liability Description	Bank Name	Limit	Sundry Creditors			
			Total			Total					

Photograph	<b>49.</b>	Permanent Address <small>(if different than Residence Address)</small>			
	<b>50.</b>	Father's Name			
	<b>51.</b>	Mother's Name			
	<b>52.</b>	Credit Card No:			
	<b>53.</b>	Credit Card Limit:	(BDT)		
	<b>54.</b>	Personal TIN			

<b>55.</b>	Higher Level of Education	<input type="checkbox"/> SSC <input type="checkbox"/> HSC <input type="checkbox"/> Graduated <input type="checkbox"/> Masters <input type="checkbox"/> Others (Specify):			
<b>56.</b>	Membership in Association	<input type="checkbox"/> General Member <input type="checkbox"/> No Membership			
<b>57.</b>	Directorship of any Private Bank	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, Name of the Bank :			
<b>58.</b>	Monthly income from the Business	(BDT)	<b>59.</b>	Other Income:	(BDT)
<b>60.</b>	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others (Specify) :			
<b>61.</b>	Spouse's Name (If Applicable)				
<b>62.</b>	Spouse's Occupation				
<b>63.</b>	Spouse's monthly income	(BDT)			
<b>64.</b>	Spouse's Office Address				
<b>65.</b>	Successor's Name				
<b>67.</b>	Relationship with Successor			<b>68.</b>	Successor's Date of Birth : D / D / M / M / Y / Y
<b>69.</b>	Spouse's Involvement in Business	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify for how many years _____			

## Applicable for Private Limited Company/ Partnership

<b>70.</b>	Business Ownership Structure				
	Name	Designation	Shareholding (%)	Years With Business	Years of Experience
	1.				
	2.				
	3.				
	4.				
	5.				
	6.				

<b>71.</b>	Name(full name)	<b>72.</b>	Date of Birth	D / D / M / M / Y / Y				
<b>73.</b>	Residence Address							
<b>74.</b>	Residence Telephone	<b>75.</b>	Mobile					
<b>76.</b>	Premises Status	<input type="checkbox"/> Rented <input type="checkbox"/> Personally Owned <input type="checkbox"/> Family Owned <input type="checkbox"/> Others (Specify):						
<b>77.</b>	Net worth of the party: (a-b)	a) Assets Description	Locality	Declared Value	b) Liability Description	Bank Name	Limit	Sundry Creditors
			Total			Total		

<b>78.</b>	Permanent Address <small>(if different than Residence Address)</small>	Photograph					
<b>79.</b>	Father's Name						
<b>80.</b>	Mother's Name						
<b>81.</b>	Credit Card No:						
<b>82.</b>	Credit Card Limit: <small>(BDT)</small>						
<b>83.</b>	Personal TIN						

<b>84.</b>	Higher Level of Education	<input type="checkbox"/> SSC <input type="checkbox"/> HSC <input type="checkbox"/> Graduated <input type="checkbox"/> Masters <input type="checkbox"/> Others (Specify):				
<b>85.</b>	Membership in Association	<input type="checkbox"/> General Member <input type="checkbox"/> No Membership				
<b>86.</b>	Directorship of any Private Bank	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, Name of the Bank :				
<b>87.</b>	Monthly income from the Business:		<b>88.</b>	Other Income:		
		<small>(BDT)</small>		<small>(BDT)</small>		
<b>89.</b>	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others (Specify) :				
<b>90.</b>	Spouse's Name (If Applicable)					
<b>91.</b>	Spouse's Occupation					
<b>92.</b>	Spouse's Involvement in Business	<input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>93.</b>	Adult Children/ Relatives Involved in the Business	Name		Relationship	Age	Role in Business

## Continue

<b>95.</b>	Name:	<b>96.</b>	Date of Birth	D / D / M / M / Y / Y				
<b>97.</b>	Residence Address							
<b>98.</b>	Residence Telephone	<b>99.</b>	Mobile					
<b>100.</b>	Premises Status	<input type="checkbox"/> Rented <input type="checkbox"/> Personally Owned <input type="checkbox"/> Family Owned			<input type="checkbox"/> Others (Specify) :			
<b>101.</b>	Net worth of the party: (a-b)	a) Assets Description	Locality	Declared Value	b) Liability Description	Bank Name	Limit	Sundry Creditors
			Total			Total		

Photograph	<b>102.</b>	Permanent Address (if different than Residence Address)	
	<b>103.</b>	Father's Name	
	<b>104.</b>	Mother's Name	
	<b>105.</b>	Credit Card No:	
	<b>106.</b>	Credit Card Limit: (BDT)	
	<b>107.</b>	Personal TIN	

<b>108.</b>	Higher Level of Education	<input type="checkbox"/> SSC <input type="checkbox"/> Graduated <input type="checkbox"/> Others (Specify) : <input type="checkbox"/> HSC <input type="checkbox"/> Masters			
<b>109.</b>	Membership in Association	<input type="checkbox"/> General Member <input type="checkbox"/> No Membership	Membership ID:		
<b>110.</b>	Directorship of any Private Bank	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> If yes, Name of the Bank :		
<b>111.</b>	Monthly income from the Business: (BDT)		<b>112.</b>	Other Income: (BDT)	
<b>113.</b>	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others (Specify) _____			
<b>114.</b>	Spouse's Name (If Applicable)				
<b>115.</b>	Spouse's Occupation				
<b>116.</b>	Spouse's Involvement in Business	<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>117.</b>	Adult Children/Relatives Involved in the Business	Name	Relationship	Age	Role in Business

## Guarantor Information

117.	Name:		118.	Date of Birth	D / D / M / M / Y / Y			
119.	Residence Address							
120.	Residence Telephone			121.	Mobile			
122.	Premises Status	<input type="checkbox"/> Rented <input type="checkbox"/> Personally Owned <input type="checkbox"/> Family Owned			<input type="checkbox"/> Others (Specify) :			
123.	Net worth of the party: (a-b)	a) Assets Description	Locality	Declared Value	b) Liability Description	Bank Name	Limit	Sundry Creditors
			Total			Total		

124.	Permanent Address (if different than Residence Address)	Photograph					
125.	Father's Name :						
126.	Mother's Name						
127.	Credit Card No.						
128.	Credit Card Limit(BDT)						
129.	Personal TIN						

129.	Higher Level of Education	<input type="checkbox"/> SSC <input type="checkbox"/> Graduated <input type="checkbox"/> HSC <input type="checkbox"/> Masters		<input type="checkbox"/> Others (Specify) :			
130.	Membership in Association	<input type="checkbox"/> General Member <input type="checkbox"/> No Membership		Membership ID:			
131.	Directorship of any Private Bank	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> If yes, Name of the Bank :			
132.	Monthly income from the Business				133.	Other Income: (BDT)	
134.	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others(Specify)					
135.	Spouse's Name(If Applicable)						
136.	Spouse's Occupation						
137.	Spouse's Involvement in Business	<input type="checkbox"/> Yes <input type="checkbox"/> No					
137.	Any Guarantee Provided earlier	<input type="checkbox"/> Yes <input type="checkbox"/> No					
138.	Relationship with the obligator (if yes give details)						

Seal & Signature \_\_\_\_\_