

## **EDC LIMITED**

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(A GOVT. OF GOA FINANCIAL & INVESTMENT CORPORATION)

## APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER CHIEF MINISTER'S ROJGAR YOJANA

(TO BE SUBMITTED IN DUPLICATE)

I.	Name of the applicant(in block letters):		
II.	Sex (Male/Female): Marital Status (Single/N	Marital Status (Single/Married):	
III.			
	a) Permanent:		
	P		
	b) Correspondence:		
	c) Constituency: Tal	luka:	
	d) Whether residing continuously for the last		
	three years in the area from where loan is applied:	es/No	
IV.	Father's name/Spouse's name:		
	Occupation:		
	Address:		
V.	Age particulars:		
	a) Date of Birth:		
	b) Age as on date of application:		
	c) EPIC No:		
	d) AADHAAR Card No.:		
	e) PAN No :		
VI.	• Qualification:		
	a) Academic		
	b) Technical		
VII.	I. Training received, if any:		
	(Give name of the institute and duration):		
VIII.	II. Whether the applicant is unemployed?:		
	If so, whether registered with the Employment		
	Exchange:		
	(Give Registration No.& Date):		

	(Name in block le	tters):	
]	Date:	Signature	
	I hereby certify that all the above information borrowing arrangements for my proposed indubank/ financial institution.	•	
	ade: nt:		
	financial institution of State/Central Govt.	:	
	b) Whether taken loan from any bank/		
	Account NoBank Name, Branch and address		
XVII.	,		
XVI.	Margin money proposed to be invested:	Rs	
	Total	Rs	
	d) DITC Share Capital	Rs	
	c) EDC Term Loan	Rs	
	b) DITC Share Capital (Subsidy)	Rs	
Α ۷.	a) EDC Term Loan (Subsidy)	Rs	
χV	Total Amount of Loan required:	Rs	
	d) Working capital	Rs	
	c) Other fixed assets	Rs	
	b) Machinery & equipment	Rs	
	a) Land & building	Rs	
XIV.	Project Cost:		
	(duly supported by Self Declaration):		
XIII.	Present annual income of the family		
XII.	Previous experience in the line, if any:		
XI.	Place of work where the activity as mentioned		
	activity proposed to be started:  (Give project details in the attached proforma)		
Х.	Type of industry/service/business		
IX.	Whether the applicant belongs to SC/ST/OBC Ex-serviceman /Handicapped /Woman/etc.	:	