

APPLICATION FORM FOR COMMON INFRASTRUCTURE

DATA INPUT SHEET

DETAILS ABOUT THE APPLICANT

1 **Name of the Entity (Mandatory)**

2 **Legal Form of the Borrower (Mandatory)**

Govt Agency, SHG, Pvt Ltd, Ltd, Partnership, Proprietorship, LLP, FPO/FPC, Cooperative society

3 **Website of the Entity (If available)(Optional)**

4 **General/Registration Details of Entity**
(fill as applicable)

Registration Number
(Mandatory)

GSTIN Number **(Optional)**

Incorporation Date /Registration
Date **(Mandatory)**

PAN Number **(Optional)**

Act/s under which registered
(Optional)

Udhyog Aadhar/Udyam No **(Optional)**

FSSAI Lic No **(Optional)**

- 5 **Details of key person (Mandatory)**
(CEO/ Executive Director / Director / Chief Financial Officer, Managing Partner and Other Partners, Proprietor, President and Secretary of a Cooperative)

Full Name	Designation	Date of Birth	PAN Card	Gender (Mention Male/ Female/Transgender)	Social Category (Mention SC/ST/OBC)	Email Address

- 6 **Contact details of 2 key persons (Mandatory)**
(CEO/ Executive Director / Director / Chief Financial Officer/Managing Partner and Other Partners/Proprietor/President and Secretary of a Cooperative)

Sl. No.	Name Designation / Nature of Association in the Borrowing Agency	Mobile No. & Landline with STD	Email ID

- 7 **Details of the shareholding pattern of the Applicant / Borrower (Mandatory)**

Sl. No.	Name	% Shareholding in the company/ firm	Total Equity proposed	Equity capital issued

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8 Net Worth of the Entity (Mandatory)

Share Capital

Reserves (Excluding Depreciation + Revaluation Reserve + Bad Debts)

Accumulated Profit/Loss

Total

9 Bank Details of the Entity (Mandatory)

Bank Name

Account no

IFSC Code

DETAILS ABOUT THE EXISTING OPERATIONS OF THE ENTITY

10 Nature of Business (Mandatory)
(If related to Food Processing Industry, please select 'Yes', or else select 'No')

11 Existing business background (Mandatory)

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Classification of existing business related to Food Producing sector in terms of the kind of value addition being done **(Mandatory)**

12

(Please enter a value: Food products - Manufacturing, farm Produce - Trading, Farm Input - Distribution, Others)

Are you actively engaged in processing of ODOP produce identified by State? **(Mandatory)**

13

(Please enter a value: Yes or No)

If no, please mention

14

Details of the Infrastructure/Property of the Borrower

Type of Infrastructure Available	If Applicable, please select the checkbox	Street Address	Taluk/Block	District	City	State	Pincode
Registered Office	<input type="checkbox"/>						
Administrative Office	<input type="checkbox"/>						
Godown/Warehouse	<input type="checkbox"/>						
Trading Unit/Agri Input Shop	<input type="checkbox"/>						
Manufacturing Unit	<input type="checkbox"/>						

15 Total Number of Experience (In Years) in producing/manufacturing/trading the product (Mandatory)

16 Production & installation capacity (Mandatory)

In Quantity

In Amount

17 Business turnover (Sales/ Revenue) - Last 3 Years
(In INR) (Mandatory)

Particulars	PAST YEAR-II (Actual)	PAST YEAR-I (Actual)	PRESENT YEAR (Estimate)
Total			

18 Net Profit - Last 3 year
(In INR) (Mandatory)

PAST YEAR-II (Actual)	PAST YEAR-I (Actual)	PRESENT YEAR (Estimate)

Total

19 Current Investment in Plant and Machinery
(In INR) (Mandatory)

PAST YEAR-II (Actual)	PAST YEAR-I (Actual)	PRESENT YEAR (Estimate)

Total

20 Existing Bank Loan Details **(Mandatory)**

Sr. No.	BANK / FI Name	Loan Type	Loan Amount	EMI Amount	Max Delayed Payment of Dues	1st EMI Date (DD-MM-YY)	Tenure (Months)	No. EMI Served	No. of Balance EMI	Loan Status (Active /Closed)
1										
2										
3										
Total										

DETAILS ABOUT THE PROPOSED - NEW / UPGRADATION PLAN

21 Type of Common Infrastructure to be funded under the scheme **(Mandatory)**

22 Nature of Proposed Business **(Mandatory)**
(If related to Food Processing Industry, please enter 'Yes' or else select 'No')

23 Classification of proposed business related to Food Producing sector in terms of the kind of value addition being done **(Mandatory)**
(Please enter a value: Food products - Manufacturing, Farm Produce - Trading, Farm Input - Distribution, Others)

24 Are you planning to engage in processing of ODOP produce identified by State? **(Mandatory)**
(Please enter a value: Yes or No)

25 Address of the proposed manufacturing/trading of the unit **(Mandatory)**
(if different from existing)

Street:			
Taluk/Block:			
District:			
City:		Pin:	
State:			

26 Ownership of Proposed Property **(Optional)**
(Mention Owned, Rented, Leased)

Rent/Leased Amount (Yearly)

27 Proposed Production & Installation Capacity **(Optional)**

In Quantity

In Amount

28 Quotation Details for the proposed Machineries/Equipments
(Upload the photocopy) (Optional)

S.No.	Machinery Name	Rate (Amount)	Quantity

29 Proposed Revenue in a year (In INR) (Mandatory)

30 Proposed Net Profit in a year (Optional)
(In INR)

31 Contribution of the Entity (Mandatory)

Personal Contribution
(In terms of Percentage)

Margin Money for Working Capital
(In INR)

32 Number of Workers to be Employed? (Mandatory)

33

Brief writeup regarding the purpose of the proposed common infrastructure (Mandatory)

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Additional Questions to be answered if the applying entity is an FPO/FPC.

1 **Self Gradation of FPO (Optional)**
Mention Class A, Class B, Class C, Class D

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2 **Details of the promoting organisation (Optional)**

Details of the promoting organisation (Optional)				
Address				
Contact Person Name		Mobile No		Email Ids

3 **Number of FPO Members (Mandatory)**

Social Category (Left to Right)	General	SC	ST	OBC
Gender (Top to Bottom)				
Male				
Female				
Transgender				
Total				

4 **Category of Farmers (Mandatory)**

Category of Farmers (Mandatory)	Small Farmer (less than 2 hectares)	Big Farmer (more than 2 hectares)
No of Farmers		

Additional Questions to be answered if the applying entity is an Cooperative

Number of Cooperative Society Members (Mandatory)

Social Category (Left to Right)	General	SC	ST	OBC
Gender (Top to Bottom)				
Male				
Female				
Transgender				
Total				

Additional Questions to be answered if the applying entity is an SHG

1 Details of SHG Members (Mandatory)

S. No.	Full Name	Date of Birth	Social Category (Mention SC/ST/OBC)	Phone Number
1				
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13				
14				
15				
Summary				