APPLICATION FOR AVAILING FINANCIAL ASSISTANCE BY WAY OF SHARE CAPITAL CONTRIBUTION UNDER STATE PLAN SCHEME.

1. Name and Postal Address of the

Society with Taluk and District

and Pin Code.

1. Registration No.Date of

Registration.

1. Area of operation of the

Society and whether its area

Overlapped by any other PACS.

1. Board of Directors (Elected)

Administrator/Administrators

Administrative Committee

1. Total population within the area

of operation as per Bye-law

1. Membership & Paid up Share

Capital as on(31.03.2005)

1. A Class
2. B Class
3. C Class (Normal)
4. D Class (Normal)

Financial Position of the

Society

1. Paid up Share Capital
2. Borrowings
3. Deposits
4. Loan outstanding with Members

Short term Agriculture, Medium

Term Agriculture, Others

1. Fixed Assests Movable/Immovable
2. Accumulated Profit/Loss

(2)

Audit Classification (As per the

Latest Audit Certificate)

1. Amount of loan outstanding
2. To District Co-operative

Bank.(Borrowings)

1. Demand under the above
2. Percentage of Overdues
3. Amount of loan outstanding with

Members (Asset)

1. Demand under the above
2. Percentage of overdues
3. If percentage of overdues is above

25, action taken by the society for

reducing the overdues(A brief note

is to be attached)

1. (a) Amount required for meeting

the credit requirements of he

members during current year

(b) Credit limit sanctioned

1. By the D.C.B

2) Own funds available with the

society for meeting the purpose

1. Balance amount required

10. Amount of Share Capital Contribution

applied for

11.(a) Whether there is any government dues

pending to be remitted (Including

dividend as Government Share Capital)

(3)

(b) Whether the society is free from

Corrupt practies

(c) Whether General Body Meeting has

been concerned and budget passed

for the current years

(d) If not specify the years up to which

General body has been convence

…………………………..(President)………………………………………..,Secretary if the……………… Service Co-operative Bank request that the Assistance by way of Share Capital Contribution applied for in the above application may please be sanctioned.

We further agree to abide by the terms and conditions of the assistance provided by the State Government and to furnish all such reports/information as may be prescribed by the Government/Registrar of Co-Operative Societies.

Signature of President

Board Members:

1)

2)

Secretary.

J.V