

রাজ্য নগর উন্নয়ন সংস্থা  
STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ  
“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

ক্রমিক নং ..... SUDA- 17/2012(Pt-3)/ III (58)

তারিখ ..... ২০ .01.2016

**From: M.N.Pradhan, IAS,  
Director, SUDA &  
Mission Director, WBSULM**

**To : Mayor/ Chairperson/ Commissioner/ Joint Municipal Commissioner (Dev.),  
..... Municipal Corporation/ Municipality**

**Sub : Bank related common format and grading of eligible SHGs**

Sir,

A. Enclosed herewith are following formats approved by State Level Bankers Committee (SLBC) in its meeting held on 21.12.2015 to be used by the authorities, beneficiaries and the bankers for implementing different bank-related components under NULM.

1. Savings Bank A/c opening form for SHGs
2. Application Form for individual loan
3. Application Form for Group Loan
4. Format for maintenance of record by Bank for SEP Individual & Group Enterprise (Annexure – D to G)
5. Grading of SHGs (Annexure-H)

From now onwards, you are requested to use these formats for the purpose for which they have been designed for implementing different bank related activities under NULM. You are also requested to provide a copy of these formats to all the bank branches within your ULB.

B.

- i. Grading of SHGs is the new and important item included under Reserve Bank of India Guideline for Bank/ Credit Linkage of all existing and eligible SHGs under NULM.
- ii.As per the aforesaid directive, all SHGs have to successfully undergo a grading exercise before Bank / Credit Linkage is finally provided to them. The successful SHGs will be eligible for a bank loan upto 4 times of their saving corpus with a minimum amount of Rs.1.25 lakhs per SHG.

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com  
Account Section : 2358 6408

iii. This credit linkage has an immense potential to change the financial status of SHG members as well as SHG activities within your ULB.

All the new SHGs formed under NULM and those TCGs inducted into NULM from erstwhile SJSRY, which are atleast six months old, are eligible for grading.

iv. We are targeting to complete grading exercise for a certain portion of existing SHGs during this financial year by arranging specialized camps within your ULB.

C. In the above circumstances as in Point-4 above, you are requested to do the following immediately :-

i. Hold a Task Force meeting to discuss grading of existing SHGs and fix bank-wise date and no. of SHGs to be graded on that date.

ii. Grading, as per format approved by SLBC, will be done by the bank branch where SHGs maintain and operate their savings bank accounts for which all types of managerial support are to be extended by the ULB.

iii. As the Bank branches may not have enough space to accommodate a large no. of SHG members for the purpose of grading, the same may be arranged at any spacious accommodation of ULB.

iv. ULB will ask the SHGs to attend grading test with all relevant documents to be prepared and arranged by the SHGs duly checked by COs.

v. Grading of existing SHGs need to be completed within 3 months so that all existing SHGs can be brought under bank-credit linkage at the earliest.

vi. Bank formalities need to be observed for credit / bank linkage by the SHGs who are to be guided and monitored by COs / available workforce of ULB.

Enclo: as stated

Yours faithfully,



Director, SUDA

&

Mission Director, WBSULM

Bank's Name & Logo

Form No.

### Self Help Group -Savings Bank Account Opening Form

To:

**The Branch Manager**

\_\_\_\_\_ Bank  
\_\_\_\_\_ Branch

**Sub:-Application for SHG-SB A/C opening**

For Official Use Only	
Customer ID	
SHG Gender Code (Male/Female/Mixed)	
Location (Rural/ Urban)	
SB A/c No	

Dear Madam/Sir,

1. We request you to open a Savings Bank Account in name of our Self Help Group. We agree to abide by the rules and regulation of the bank related to Savings Account.

Name of SHG					
Date of Formation		Number of Members		Name of Facilitating Agency (if any)	
Address	Street .....Village/ City.....Gram Panchyat..... Block .....District.....Pin.....				

2. The Savings Account may be operated by joint signature of any two among the following representatives of our Self Help Group. A copy of resolution taken by our Self Help Group in this regard is attached.

Bank Verification

Affix passport Size photograph	Affix passport Size photograph	Affix passport Size photograph
Name :	Name:	Name:
Designation:	Designation:	Designation:
Address:	Address:	Address:
Mobile:	Mobile:	Mobile:
KYC Document Provided: YES/NO	KYC Document Provided: YES/NO	KYC Document Provided: YES/NO
Enclosed Copy of address /ID proof <input type="checkbox"/> Voter ID <input type="checkbox"/> Electric Bill <input type="checkbox"/> Adhar Card <input type="checkbox"/> Ration Card <input type="checkbox"/> PAN/Job Card <input type="checkbox"/> Driving license <input type="checkbox"/> Any other document accepted by Bank (specify).....	Enclosed Copy of address /ID proof <input type="checkbox"/> Voter ID <input type="checkbox"/> Electric Bill <input type="checkbox"/> Adhar Card <input type="checkbox"/> Ration Card <input type="checkbox"/> PAN /Job Card <input type="checkbox"/> Driving license <input type="checkbox"/> Any other document accepted by Bank (specify).....	Enclosed Copy of address /ID proof <input type="checkbox"/> Voter ID <input type="checkbox"/> Electric Bill <input type="checkbox"/> Adhar Card <input type="checkbox"/> Ration Card <input type="checkbox"/> PAN/Job Card <input type="checkbox"/> Driving license <input type="checkbox"/> Any other document accepted by Bank (specify).....
Specimen Signature/Thumb Immersion	Specimen Signature/Thumb Immersion	Specimen Signature/Thumb Immersion

3. Name and signature of SHG members

Sl No	Name of SHG members	Name of Father/Husband	Gender (Male/ Female)	Signature /Thumb Impression
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

4. We hereby declare that the above information is true and correct. We have agreed to the terms and conditions and also agree to abide by any amendments to the terms and conditions as may be stipulated by the Bank from time to time.

Yours faithfully,

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Date:

(Signature of SHG Representatives with Seal of SHG)

**For Official (Bank) use only :**

*Enclosure:*

- i. Copy of Resolution by Self Help Group to open Savings Account*
- ii. Photographs of authorized representatives*
- iii. Copy of ID and address proof of authorized representatives.*

## Specimen copy of Resolution by Self Help Group for Opening Savings Account

Name of SHG:

Address:

Date of Formation:

Total No. of Members:

Name of Facilitating Agency:

### Resolution for Opening Savings Bank Account

Today on .....(Date), at the meeting of .....(name of SHG) at .....(meeting place of SHG/ address) in presence of all its members, it is resolved that our .....(name of SHG) will open a savings bank a/c. It has also been further resolved that Smt.....(Designation .....); Smt.....(Designation .....) and Smt .....(Designation .....) will sign all the necessary document related to the opening of Savings Account as representatives on behalf of .....(name of SHG). Transaction in the Savings a/c of the group will be done by joint signature of any two among the above mentioned representatives.

We, all members hereby agree to the above decision.

Sl	Name of SHG members	Name of Father/Husband	Gender (Male/ Female)	Signature /Thumb Impression
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Signature  
(Designation .....)

Signature  
(Designation .....)

Signature  
(Designation .....)

Seal of Self Help Group

**West Bengal State Urban Livelihoods Mission****Application for Individual Loan**

To  
The Mayor/Chairman

..... Municipal Corporation/ Municipality

.....

Dear Sir,

I, Ms..... daughter/wife of ----- residing at  
.....Street/Lane/Road of Ward No.. ..... of..... Municipal  
Corporation / Municipality have been living since.....years. I am interested to take loan for micro-business under self-  
employment programme of NULM.

My bio-data is given below:

Name of Applicant: .....

Father's/Husband's name: .....

Aadhar/Voter ID card number: .....

Age :.....Year.....Month (till the date of application)

Educational Qualification :.....

Address: ..... Post Office:.....Ward no:.....of..... Municipal  
Corporation/Municipality District.....Pin code.....

SC/ST/OBC/Minority:..... Physically Challenged: yes/no

Number of family members: .....Age .....Children .....Male.....Female.....

Monthly income of family (In Rs): .....

Experience of training: Yes/no...Type of training ..... Training duration-----

Present bank loan amount (if applicable) .....

Bank and Branch name (where applying for loan)-----

Name of scheme.....

Total expenses/ budget of scheme:.....

Margin money:.....Bank loan amount.....

It is hereby declared that all the information furnished by me with application is true and correct I shall abide by all the rules and  
regulation.

Thanking you.

Date: .....

-----

Signature of the applicant

Documents enclosed:

- a. Xerox copy of Voter ID/Aadhar Card
- b. Educational qualification certificate.
- c. Age proof certificate.
- d. Income proof certificate
- e. Others (training, experience etc.)

**Model scheme for Individual Bank Loan**

Name of scheme: .....

Applicant's name: .....

Address: ..... Post Office: ..... Ward No. ....  
/Municipal corporation/ Municipality ..... District: .....

Proposed address of entrepreneur : .....

**Fixed Cost:**

Details of shop: size .....ft X.....ft.; Type of structure: .....Shop/Factory's rent: ...../month,

Name of shop-owner: .....

1 Cost of Construction of Shops/Factory: Rs.....

**2. Cost of Tools & Machinery:**

Sl. no.	Name of Instrument	Quantity	Price (Rs.)	Total cost (Rs.)
1				
2				
3				
4				
5				
6	Cost of Transportation & installation of Machinery			
Total				

**3. Cost of Furniture:**

Sl. no.	Furniture & Fittings	Quantity	Price (Rs.)	Total cost (Rs.)
1				
2				
3				
4				
5				
6	Cost of Transport & installation of Furniture			
Total				

**4. Cost of Electrification:**

Sl. no.	Electrical Instrument	Quantity	Price (Rs.)	Total cost (Rs.)
1				
2				
3				
4				
5				
6	Cost of Labour			
Total				

Total Expenditure: (1+2+3+4) Rs-----

**B. Working Capital/ Running Cost:****1. Raw material:**

Sl. no.	subject	Quantity/unit	Price (Rs.)	Total cost (Rs.)
1				
2				

3				
4				
5				
6	Other expenses			
Total				

**2. Salary/wage (monthly):**

Sl. no.	Name of post	Number	Salary/monthly	Total cost (Rs.)
1	Director- own			
2	Skilled labour			
3				
Total				

**3. Other expenses:**

Sl.no.	Subject	Total cost (Rs.)
1	Expenses for house rent/tax	
2	Expenses for electricity & fuel	
3	Expenses for phone/ communication, entertainment	
4	Expenses for Insurance	
5		
6	Other expenses	
Total		

Total expenses=(1+2+3) in Rs.....

Total scheme related expenses (A+B) in Rs.....

Own Capital (in Rs).....

Loan needed from bank (in Rs).....

Proposed income (yearly) (Except own salary) in Rs.....

Date: .....

.....

Signature of receiver

.....

**Recommendation**

After discussion in meeting held on..... in the Municipal Corporation/ Municipality, the above application is recommended/cancelled/reconsidered to .....Bank for loan sanction of Rs.....

.....

Chairman of Task Force Committee

**West Bengal State Urban Livelihoods Mission**

**Application for Group Loan**

To  
The Chairman

..... Municipal Corporation / Municipality/

Dear Sir,

I, Ms.....daughter/wife of Mr..... Ward  
No.....of..... Municipal Corporation/Municipality belong to head/leader of  
.....Group. Our Group is desire to get loan for micro-business under self-employment of NULM.

**Group Details are given below:**

Name of Group:

Number of members:

Group age:

Total Savings of Group: Rs.

Group Head/ Group Leader's Voter ID Card /AadharNo.:.....

Address of Group: ....., Post  
Office....., WardNo.....of.....Municipal Corporation/Municipality, Distr  
ict.....PIN.....

(a) Total group members..... Male:..... Female.....

(b) No. of members belongs to BPL

Present Bank Loan Amount (if any) Rs.....

Bank and Branch name (where you are applying for loan):

Name of Scheme (under which applying loan):

Total expenses/ budget of scheme: Rs.-----Margin money Rs.:..... Bank loan amount  
Rs:.....

We hereby declared that all the information furnished by us with application are true and correct and we shall abide by all the  
rules and regulations.

Thanking you.

Date: .....

Signature of Group head / leader (with seal)

**Documents enclosed:**

- a. Group Details(name of members, father/husband name,age, and address)
- b. Xerox copies of Voter ID/Aadhar Card of all members of group)
- c. Meeting resolution with Thrift & Credit details.
- d. Xerox copy of bank pass book
- e. Grading and other proof of records

**Model scheme for Group Loan by Bank**

Name of scheme: .....

Group name: .....

Address: ....., Post Office: .....,Ward No: ..... Municipal Corporation/  
Municipality, .District: .....

Address for proposed enterprise: .....

**Fixed Cost:**

Details of shop: size .....ft X.....ft,

Type of structure: .....

Shop/Factory's rent: ...../month, Name of shop-owner: .....

1 Cost of Construction of Shops/Factory: Rs.....

2. Cost of Tools & Machinery:

Sl. no.	Name of Instrument	Quantity	Price (Rs.)	Total cost (Rs.)
1				
2				
3				
4				
5				
6	Cost of Transportation & installation of Machinery			
Total				

3. Cost of Furniture:

Sl. no.	Furniture & Fittings	Quantity	Price (Rs.)	Total cost (Rs.)
1				
2				
3				
4				
5				
6	Cost of Transport & installation of Furniture			
Total				

4. Cost of Electrification:

Sl. no.	Electrical Instrument	Quantity	Price (Rs.)	Total cost (Rs.)
1				
2				
3				
4				
5				
6	Cost of Labour			
Total				

Total Expenditure: (1+2+3+4) Rs .....

**B. Working Capital/Running Cost:**

**1.Raw material**

Sl. no.	Subject	Quantity/Number	Price /unit (Rs.)	Total cost (Rs.)
1				
2				
3				

4				
5				
6	Other expenses			
Total				

## 2. Salary/wage (month wise)

Sl. no.	Name of post	Number	Salary/monthly	Total cost (Rs.) (Year)
1	Director- own			
2	Skilled Labour			
3	Unskilled Labour			
Total				

## 3. Other expenses:

Sl. no.	Subject	Rs. (month)	Total cost (Rs.) (Year)
1	Expenses for house rent/tax		
2	Expenses for electricity & fuel		
3	Expenses for phone/entertainment communication		
4	Expenses for Insurance		
5	Other Expenses		
Total			

Total expenses=(1+2+3) in Rs.....

Total scheme related expenses (A+B) in Rs.....

Group Fund (in Rs).....

Loan required from bank (in Rs).....

Expected Annual income in Rs.....

Expected Annual Profit: Rs.....

Date :.....

.....

Signature of Group Head/Leader with seal

.....

**Recommendation**

After discussion in meeting held on..... in the Municipal Corporation/ Municipality, the above application is recommended/cancelled/reconsidered to .....Bank for loan sanction of Rs.....

.....

Chairman of Task Force Committee

**Acknowledgement**

(To be handed over to SHG after submission of the Application Form)

Received the Following Application form for loan

Name of SHG	
Address	
Application No	
Savings Account No	
Date of Receipt of Application by branch	
Name of contact person with Mobile No.	

Signature

Branch

Bank

## SEP- I (Individual Enterprise)

Name of the Bank :

Sl. No.	Branch	Name of the borrower	Loan Account No.	Loan Amount		Interest	
				Sanctioned	Disbursed	Charged	Subsidy claimed
1	2	3	4	5	6	7	8
1.							
2.							
3.							
<b>Total :</b>							

---

Signature of the Authorised Officer of the Bank

## SEP-G (Group Enterprise)

Name of the Bank :

Sl. No.	Branch	Name of the Group	Loan Account No.	Loan Amount		Interest	
				Sanctioned	Disbursed	Charged	Subsidy claimed
1	2	3	4	5	6	7	8
1.							
2.							
3.							
<b>Total :</b>							

---

**Signature of the Authorised Officer of the Bank**

# Self Help Group (SHG Bank Linkage)

Name of the Bank :

Sl. No.	Branch	Name of the SHG	Loan Account No.	Loan Amount		Interest	
				Sanctioned	Disbursed	Charged	Subsidy claimed
1	2	3	4	5	6	7	8
1.							
2.							
3.							
Total :							

---

Signature of the Authorised Officer of the Bank

**Submission of claims for additional Interest Subvention to lend Women Self Help Groups (WSHG's) at 3% pa under NULM for the quarter ending :**

**Name of the Bank :**

Sl. No.	Branch	Name of the WSHG	Loan Account No.	Loan Amount Disbursed	Amount of Interest subvention
1	2	3	4	5	6
1.					
2.					
3.					
<b>Total :</b>					

We hereby certify that above loans were repaid on time and the benefit of additional interest subvention has been passed on to the WSHG's account, reducing effective rate of interest to 4% for the prompt payee WSHGs.

Signature of the Authorised Officer of the Bank

**SHG Grading Format for Fresh linkage****A. Basic Information:**

Name of the SHG:-----

Urban Local Body: -----

District:-----

Date of formation of SHG:----- Date of opening bank S.B A/c:-----

Period considered for Grading: From----- to -----(usually last 6 months)

Sl. No.	Indicator	Allotted Marks	Formula for determining Marks	Marks obtained
1.	<b>Regularity of meeting :</b>			
(a)	Regularity of holding meetings by SHG	10	No. of meeting held X 10 No. of meetings required to be held as per rule of SHG	
(b)	Regularity of Attendance of members in the meetings	10	Average no. of members attended the meetings X 10 Total no. of members of the SHG	
2.	<b>Regularity of Savings by members</b>	10	Amount of savings deposited by the members X 10 Amount of savings required to be deposited as per rule of SHG	
3.	<b>* Velocity of Lending</b> to members from Group Corpus	20	More than 1.5 : 20 More than 1.0 up to 1.5 : 15 More than 0.5 up to 1.0 : 10 More than 0.2 up to 0.5 : 5 Up to 0.2 : 0	
4.	<b>Regularity in repayment of loan by members</b>	20	Amount of recovery against Demand X 20 Amount of Demand (required to be paid as per repayment schedule)	
5.	<b>Updated Record Keeping :</b>			
a)	Resolution Book	4	Maintained up to date : Full Marks Maintained, but not up to date : Half Marks Not maintained : 0 (No marks)	
b)	Cash Book	8		
c)	Savings Ledger	4		
d)	Loan Ledger	4		
e)	General Ledger	6		
f)	Individual Pass Book	4		
<b>Total :</b>		<b>100</b>		

\* Velocity of lending from Group Corpus = 
$$\frac{\text{Amount lent to the members from Group Corpus}}{\text{Average amount of Group Corpus}}$$

- **A Grade : 80 or more marks**
- **B Grade : 70-79 marks**
- **C Grade : 60-69 marks**
- **D Grade : less than 60 marks**

**Only A & B graded SHGs are to be considered for credit linkage**