

Application Form

Reason for application for Revival and
Rehabilitation of Loan - Business Banking

Please select the product that you wish to apply for revival and rehabilitation:

☐ Business Instalment Loan (BIL)

- Collateral free loan
- Loans up to ₹75 lakhs with tenures up to 3 years
- Service Guarantee to ensure loan decisioning in 5 days*

☐ Guaranteed Instalment Loan (GIL)

- Collateral free loan, guaranteed by CGTMSE
- Loans up to ₹50 lakhs with tenures up to 3 years
- Service Guarantee to ensure loan decisioning in 5 days*

☐ BIL+

- Collateral free loan bundled with Current Account
- Up to ₹50,000 interest refund on linked Current Account
- Service Guarantee to ensure loan decisioning in 5 days*

*Terms and conditions apply

☐ Loan Against Property (LAP)

- Loan against residential/commercial property, commercial property purchase, lease rental discounting (LRD)
- Loans up to ₹15 crores with tenures up to 15 years

☐ LAP Home Saver

- Loan against residential/commercial property, commercial property purchase, lease rental discounting (LRD)
- 22% interest saving and 32% tenure drop against regular term loan

☐ LAP+

- Loan against residential/commercial property, commercial property purchase, lease rental discounting (LRD)
- ₹1.5 lakhs interest refund (across year 1 and 2) on linked Current Account

☐ Current Account - Business Essential Account (BEA)

- Product based on Average Monthly Balances
- No need to upgrade/downgrade product variant
- Dynamic Pricing – lower charges for higher balance tiers

☐ Current Account - ITA

- Flexibility to maintain Average Quarterly Balance or Quarterly Throughput
- Expert Solutions on Bank Guarantees, Letter of Credit, Bill Discounting, Export Loans
- Specialized Export & Import Services

☐ Current Account – Smart Business Account

- ☐ Account Level ☐ Client Level
- Flexibility to aggregate Total Business Credits at a Client Level
 - Dynamic Pricing – lower charges for higher throughput tiers
 - No minimum balance requirement

☐ Current Account – Others

- Foreign currency and Domestic currency accounts

PLEASE DO NOT SIGN THIS FORM UNLESS
IT IS COMPLETED IN ALL RESPECTS.
Fill in BLOCK Letters & in Black Ink only

AOF Date

Section 1A Customer Details (Non-Individual/Individual)Bankruptcy ☐ Financial stress ☐ Death ☐ Other _____**If Non-Individual**

Name of Entity / Firm / HUF

Date of Incorporation / Establishment

 / /

Country of Incorporation / Establishment

Country of Operation

PAN Number

Registration Number

Contact Person / Proprietor / Karta (Mr./Ms.)

Mobile (Mandatory)

E-mail

If IndividualSalutation / Title ☐ Mr ☐ Mrs ☐ Ms ☐ Dr

Full Name

First Name

Middle Name

Last Name / Surname

Father/Spouse Name

Date of Birth

 / /

Country of Birth (Mandatory)

Nationality

Educational Qualification

☐ Undergraduate ☐ Graduate ☐ Post-Graduate ☐ Diploma ☐ Professional

Marital Status

☐ Married ☐ Single ☐ Other Gender ☐ Male ☐ Female ☐ Third Gender

Type of Identity Document

Aadhar Number

PAN Number

ID Number

☐ Passport ☐ Voter ID ☐ Driving Licence ☐ PAN Card ☐ Aadhar CardNumber of Years in Business/Occupation Overall Experience in Line of Business/Occupation

Name of Employer / Business Entity

Both for (Non-Individual/Individual)

Type of Organisation

☐ Proprietorship ☐ Partnership ☐ Limited Company ☐ Club/Association/Society ☐ Trust☐ HUF ☐ Foreign Company ☐ Other

If Professional

☐ Doctor ☐ Lawyer ☐ Accountant ☐ Other

Nature of Business

☐ Manufacturing ☐ Export/Import ☐ Service ☐ Trading ☐ Retailing ☐ Consultant☐ Wholesaler ☐ Other

Industry

Applicant Status

☐ Resident ☐ Non-Resident

Turnover

Group Turnover

City where loan is required /
account is opened

Network

Branch where loan is required/
Account is opened (if any)

No of Employees

Section 1B Customer Details (Contact Details)

Registered Office Address (Non-Individual) / Business or Employer Address (Individual)

[illegible]

Telephone Number

Office												Fax											
Country Code			STD Code									Country Code			STD Code								
Extension												Extension											

Trading/Operating Office Address (Non-Individual/Individual)

[illegible]

Telephone Number

Office												Fax																	
Country Code			STD Code									Extension			Country Code			STD Code									Extension		

Current Residential Address (Individual)

City																				Pincode																			
State																				Country																			

Telephone Number

Mobile

9

1

Country Code

Home

Country Code

STD Code

No. of years at Current Address

Permanent Address (Individual)

[illegible]

Telephone Number

Mobile	9 1 Country Code		Home	Country Code	STD Code			
Permanent	Country Code	STD Code		Office	Country Code	STD Code		Extension

Email Address (Please provide your primary email address)

Preferred Address for communication:

☐ Registered Address ☐ Operating / Office Address ☐ Residential Address (for individual only) ☐ Permanent Address (for individual only)

We may, from time to time, communicate to you various features of our products availed by you. Information about our other products/services or promotional offers thereof, will be conveyed to you only if you have given your consent to receiving the same.

Would you like Standard Chartered Bank to contact you or communicate marketing and sales offers related to our various products/services, through phone/sms/email?

Please tick one of the boxes and sign along side to indicate your preference: ☐ Yes ☐ No

Signature

☐ No

Signature

Note: We have adopted the recently introduced Banking Code of Commitment for MSMEs that sets the minimum standard of service. To get a copy of the code, call us at Phone banking or download it from <https://www.sc.com/in/important-information/bcsbi-code.html> (for MSE Customers)

Section 2

Partners / Director / Owners / Controllers Details / Intermediaries / Signatories / Proprietor

Please provide details of share holders holding 10% and above share capital and all owners/controllers
 For partners who are minors, please provide guardian's details (to be inserted in /Section 2)

Nature of Associations/ Designation	Name	Date of Birth (dd/mm/yy)	Country of Birth	Nationality	PAN No.	Shareholding %	Resi. Address

Please provide details of intermediary entities, irrespective of shareholding

Nature of Associations/ Designation	Name	Country of Establishment	Country of Incorporation	PAN No.	Shareholding %	Presently Banking with	Regd. Address

Expected Volume and Level of activity (per month) :

Transactions	Volume / Numbers	Value in Rs.
Cash Deposit		
Cash Withdrawal		
Cheque Deposit		
Cheque Issuance		
Inward TTs		
Outward TTs/DDs/POs		

FATCA Consent

Customer Consent

This form must be completed by any customer who wishes to maintain a banking account.

Subject to applicable local laws, we hereby consent for Standard Chartered PLC or any of its affiliates (including branches) (collectively “the Bank”) to share our information with domestic or overseas regulators or tax authorities where necessary to establish our tax liability in any jurisdiction.

Where required by domestic or overseas regulators or tax authorities, we consent and agree that the Bank may withhold from our account(s) such amounts as may be required according to applicable laws, regulations and directives.

We undertake to notify the Bank within 30 calendar days if there is a change in any information which we have provided to the Bank.

For and on behalf of _____
(Insert name of business - please complete in BLOCK LETTERS)

Signature _____

Name _____
(please complete in BLOCK LETTERS)

Date _____

Section 3 Credit Facilities (External / Internal)

Have you availed of any Credit Facility(ies)/Loans from Financial Institutions/Employer/Banks/SCB other than the facility request given above (including lease, hire purchase, factoring) ☐ Yes ☐ No if Yes, please provide the following details (all figures in Rs.)

External (outside SCB)

	Name of the Bank & Address	Type of Facility	Loan/Credit Limit	Outstanding	ROI
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Internal (inside SCB)

	Name of the Bank & Address	Type of Facility	Loan/Credit Limit	Outstanding	ROI
1.					
2.					
3.					
4.					
5.					

Section 4 Loans Co-Applicant/Guarantor Details

	Co-Applicant 1/Guarantor 1	Co-Applicant 2/Guarantor 2
Relationship to the main applicant		
Name of Entity / Full Name of Individual (Mr/Mrs/Ms/Dr) Father/Spouse Name		
Gender (for individual)	☐ Male ☐ Female ☐ Third Gender	☐ Male ☐ Female ☐ Third Gender
Date of Birth (for individual) or Date of Incorporation/Establishment (for Company/Entity)	DD / MM / YYYY	DD / MM / YYYY
Country of Birth/Incorporation		
Country of operations		
Type of organisation	☐ Proprietorship ☐ Partnership ☐ Limited Company ☐ Club/Association/Society ☐ Trust ☐ HUF ☐ Foreign Company ☐ Other (please specify)	☐ Proprietorship ☐ Partnership ☐ Limited Company ☐ Club/Association/Society ☐ Trust ☐ HUF ☐ Foreign Company ☐ Other (please specify)
Networth		
Nature of Business	☐ Manufacturing ☐ Export/Import ☐ Service ☐ Trading ☐ Retailing ☐ Consultant ☐ Wholesaler ☐ Other (please specify)	☐ Manufacturing ☐ Export/Import ☐ Service ☐ Trading ☐ Retailing ☐ Consultant ☐ Wholesaler ☐ Other (please specify)
If Professional	☐ Doctor ☐ Lawyer ☐ Accountant ☐ Other (please specify)	☐ Doctor ☐ Lawyer ☐ Accountant ☐ Other (please specify)
Industry	(please specify)	(please specify)
Numbers of years in business	Experience in line of business	Experience in line of business
Are you an existing Standard Chartered Bank customer	☐ Yes (Please provide your account/card number) ☐ No Existing Account/Card No.	☐ Yes (Please provide your account/card number) ☐ No Existing Account/Card No.
Nationality (for individual)	☐ Indian ☐ Others	☐ Indian ☐ Others
Residence Status (for individual) Business Clients	☐ Resident ☐ Non-Resident	☐ Resident ☐ Non-Resident Version - June, 2015
Marital Status (for individual)	☐ Married ☐ Single ☐ Other	☐ Married ☐ Single ☐ Other
PAN Number / Registration No.		
Aadhar Number		
Identity Document Number (If PAN card not provided)	☐ Passport ☐ Voter ID ☐ Driving License ☐ Aadhar Card ☐ PAN Card ID No	☐ Passport ☐ Voter ID ☐ Driving License ☐ Aadhar Card ☐ PAN Card ID No
Registered Address (for Non-Individuals) Current Residential Address (for Individuals)	City Pincode State Country	City Pincode State Country
Trading Address / Operating /Office Address (Non-Individuals / Individuals)	City Pincode State Country	City Pincode State Country
Permanent Address (for Individuals)	City Pincode State Country	City Pincode State Country
Ownership of Property :	☐ Self Owned Residential ☐ Self Owned Commercial ☐ Family Owned Commercial ☐ Long Term Lease/ Pagdi ☐ Family Owned Residential	☐ Self Owned Residential ☐ Self Owned Commercial ☐ Family Owned Commercial ☐ Long Term Lease/ Pagdi ☐ Family Owned Residential
No. of Years At Current Resi.:	Email ID	Email ID
Phone Number (Country Code is Mandatory)	Home Office Mobile	Home Office Mobile
Educational Qualification	☐ Undergraduate ☐ Graduate ☐ Post-Graduate ☐ Diploma ☐ Professional	☐ Undergraduate ☐ Graduate ☐ Post-Graduate ☐ Diploma ☐ Professional
Category (Mandatory)	☐ SC ☐ ST Other (please specify)	☐ SC ☐ ST Other (please specify)
Community (Mandatory)	☐ Hindu ☐ Sikh ☐ Jain ☐ Muslim ☐ Christian ☐ Zoroastrian ☐ Buddhist Other (please specify)	☐ Hindu ☐ Sikh ☐ Jain ☐ Muslim ☐ Christian ☐ Zoroastrian ☐ Buddhist Other (please specify)

Note : Options for filling above details can be refereed from section 1A.

	Co-Applicant 3/Guarantor 3	Co-Applicant 4/Guarantor 4
Relationship to the main applicant		
Name of Entity / Full Name of Individual (Mr/Mrs/Ms/Dr) Father/Spouse Name		
Gender (for individual)	☐ Male ☐ Female ☐ Third Gender	☐ Male ☐ Female ☐ Third Gender
Date of Birth (for individual) or Date of Incorporation/Establishment (for Company/Entity)	DD / MM / YYYY	DD / MM / YYYY
Country of Birth/Incorporation		
Country of operations		
Type of organisation	☐ Proprietorship ☐ Partnership ☐ Limited Company ☐ Club/Association/Society ☐ Trust ☐ HUF ☐ Foreign Company ☐ Other (please specify)	☐ Proprietorship ☐ Partnership ☐ Limited Company ☐ Club/Association/Society ☐ Trust ☐ HUF ☐ Foreign Company ☐ Other (please specify)
Networth		
Nature of Business	☐ Manufacturing ☐ Export/Import ☐ Service ☐ Trading ☐ Retailing ☐ Consultant ☐ Wholesaler ☐ Other (please specify)	☐ Manufacturing ☐ Export/Import ☐ Service ☐ Trading ☐ Retailing ☐ Consultant ☐ Wholesaler ☐ Other (please specify)
If Professional	☐ Doctor ☐ Lawyer ☐ Accountant ☐ Other (please specify)	☐ Doctor ☐ Lawyer ☐ Accountant ☐ Other (please specify)
Industry	(please specify)	(please specify)
Numbers of years in business	Experience in line of business	Experience in line of business
Are you an existing Standard Chartered Bank customer	☐ Yes (Please provide your account/card number) ☐ No Existing Account/Card No.	☐ Yes (Please provide your account/card number) ☐ No Existing Account/Card No.
Nationality (for individual)	☐ Indian ☐ Others	☐ Indian ☐ Others
Residence Status (for individual) Business Clients	☐ Resident ☐ Non-Resident	☐ Resident ☐ Non-Resident
Marital Status (for individual)	☐ Married ☐ Single ☐ Other	☐ Married ☐ Single ☐ Other
PAN Number / Registration No.		
Aadhar Number		
Identity Document Number (If PAN card not provided)	☐ Passport ☐ Voter ID ☐ Driving License ☐ Aadhar Card ☐ PAN Card ID No	☐ Passport ☐ Voter ID ☐ Driving License ☐ Aadhar Card ☐ PAN Card ID No
Registered Address (for Non-Individuals) Current Residential Address (for Individuals)	City Pincode State Country	City Pincode State Country
Trading Address / Operating /Office Address (Non-Individuals / Individuals)	City Pincode State Country	City Pincode State Country
Permanent Address (for Individuals)	City Pincode State Country	City Pincode State Country
Ownership of Property :	☐ Self Owned Residential ☐ Self Owned Commercial ☐ Family Owned Commercial ☐ Long Term Lease/ Pagdi ☐ Family Owned Residential	☐ Self Owned Residential ☐ Self Owned Commercial ☐ Family Owned Commercial ☐ Long Term Lease/ Pagdi ☐ Family Owned Residential
No. of Years At Current Resi.:	Email ID	Email ID
Phone Number (Country Code is Mandatory)	Home Office Mobile	Home Office Mobile
Educational Qualification	☐ Undergraduate ☐ Graduate ☐ Post-Graduate ☐ Diploma ☐ Professional	☐ Undergraduate ☐ Graduate ☐ Post-Graduate ☐ Diploma ☐ Professional
Category (Mandatory)	☐ SC ☐ ST Other (please specify)	☐ SC ☐ ST Other (please specify)
Community (Mandatory)	☐ Hindu ☐ Sikh ☐ Jain ☐ Muslim ☐ Christian ☐ Zoroastrian ☐ Buddhist Other (please specify)	☐ Hindu ☐ Sikh ☐ Jain ☐ Muslim ☐ Christian ☐ Zoroastrian ☐ Buddhist Other (please specify)

Note : Options for filling above details can be refereed from section 1A.

	Co-Applicant 5/Guarantor 5	Co-Applicant 6/Guarantor 6
Relationship to the main applicant		
Name of Entity / Full Name of Individual (Mr/Mrs/Ms/Dr) Father/Spouse Name		
Gender (for individual)	☐ Male ☐ Female ☐ Third Gender	☐ Male ☐ Female ☐ Third Gender
Date of Birth (for individual) or Date of Incorporation/Establishment (for Company/Entity)	DD / MM / YYYY	DD / MM / YYYY
Country of Birth/Incorporation		
Country of operations		
Type of organisation	☐ Proprietorship ☐ Partnership ☐ Limited Company ☐ Club/Association/Society ☐ Trust ☐ HUF ☐ Foreign Company ☐ Other (please specify)	☐ Proprietorship ☐ Partnership ☐ Limited Company ☐ Club/Association/Society ☐ Trust ☐ HUF ☐ Foreign Company ☐ Other (please specify)
Networth		
Nature of Business	☐ Manufacturing ☐ Export/Import ☐ Service ☐ Trading ☐ Retailing ☐ Consultant ☐ Wholesaler ☐ Other (please specify)	☐ Manufacturing ☐ Export/Import ☐ Service ☐ Trading ☐ Retailing ☐ Consultant ☐ Wholesaler ☐ Other (please specify)
If Professional	☐ Doctor ☐ Lawyer ☐ Accountant ☐ Other (please specify)	☐ Doctor ☐ Lawyer ☐ Accountant ☐ Other (please specify)
Industry	(please specify)	(please specify)
Numbers of years in business	Experience in line of business	Experience in line of business
Are you an existing Standard Chartered Bank customer	☐ Yes (Please provide your account/card number) ☐ No Existing Account/Card No.	☐ Yes (Please provide your account/card number) ☐ No Existing Account/Card No.
Nationality (for individual)	☐ Indian ☐ Others	☐ Indian ☐ Others
Residence Status (for individual) Business Clients	☐ Resident ☐ Non-Resident	☐ Resident ☐ Non-Resident Version - June, 2015
Marital Status (for individual)	☐ Married ☐ Single ☐ Other	☐ Married ☐ Single ☐ Other
PAN Number / Registration No.		
Aadhar Number		
Identity Document Number (If PAN card not provided)	☐ Passport ☐ Voter ID ☐ Driving License ☐ Aadhar Card ☐ PAN Card ID No	☐ Passport ☐ Voter ID ☐ Driving License ☐ Aadhar Card ☐ PAN Card ID No
Registered Address (for Non-Individuals) Current Residential Address (for Individuals)	City Pincode State Country	City Pincode State Country
Trading Address / Operating /Office Address (Non-Individuals / Individuals)	City Pincode State Country	City Pincode State Country
Permanent Address (for Individuals)	City Pincode State Country	City Pincode State Country
Ownership of Property :	☐ Self Owned Residential ☐ Self Owned Commercial ☐ Family Owned Commercial ☐ Long Term Lease/ Pagdi ☐ Family Owned Residential	☐ Self Owned Residential ☐ Self Owned Commercial ☐ Family Owned Commercial ☐ Long Term Lease/ Pagdi ☐ Family Owned Residential
No. of Years At Current Resi.:	Email ID	Email ID
Phone Number (Country Code is Mandatory)	Home Office Mobile	Home Office Mobile
Educational Qualification	☐ Undergraduate ☐ Graduate ☐ Post-Graduate ☐ Diploma ☐ Professional	☐ Undergraduate ☐ Graduate ☐ Post-Graduate ☐ Diploma ☐ Professional
Category (Mandatory)	☐ SC ☐ ST Other (please specify)	☐ SC ☐ ST Other (please specify)
Community (Mandatory)	☐ Hindu ☐ Sikh ☐ Jain ☐ Muslim ☐ Christian ☐ Zoroastrian ☐ Buddhist Other (please specify)	☐ Hindu ☐ Sikh ☐ Jain ☐ Muslim ☐ Christian ☐ Zoroastrian ☐ Buddhist Other (please specify)

Note : Options for filling above details can be refereed from section 1A.

Section 5 Details of the restructured facility requested for

Total Amount Request for ₹ (in lakhs)										Tenor (Months)		Mode of Repayment	
												☐ Standing Instruction ☐ ECS	
For entities with banking exposure > INR 25 Cr, please specify if there is any unhedged foreign currency exposure										☐ Yes		☐ No	
Purpose of Loan		☐ Working Capital for Business				☐ Purchase of Fixed Asset				☐ Construction of Business Premises			
		☐ Business Expansion				☐ Other				(please specify)			

[illegible]

Insurance Details

Single Premium Insurance Policy applied for : ☐ Single Premium ☐ Regular Premium ☐ Not Applied

Self Funding : ☐ Yes ☐ No

If No, the Single Premium Insurance Policy of Rs. _____ will be deducted from my Loan Amount and paid directly to the Bajaj Allianz Life Insurance Co. Limited.

Understand that the coverage is for Death and Accidental Permanent Total Disability. Over and above, there is also an option of critical Illness cover which can be chosen by the customer.

As I understand, This insurance policy can be taken by the Director/s, Proprietor/s or Partner/s who guarantee the loan. Each director / Partner can be insured under an individual insurance policy subject to the total sum assured being less than or equal to the loan taken.

Insurance is a subject matter of solicitation. Your (customer's) participation in the insurance products is purely on a voluntary basis.

Name of the Applicant _____ Date _____

Signature of the Applicant _____ Place _____

Section 6 Property and Plant & Machinery Details

Property / Collateral Details

(Title deeds to be given for Safe Custody) (For BIL customer property details only to be filled below)

Ownership of Property : ☐ Self Owned Residential ☐ Self Owned Commercial ☐ Family Owned Residential
☐ Family Owned Commercial ☐ Long Term Lease/ Pagdi

Property Occupation Status : ☐ Occupied ☐ Rented ☐ Vacant ☐ Other

Full Property Address _____

A blank sheet of graph paper with a grid of small squares. The grid consists of 20 columns and 10 rows of squares. The lines are light gray and form a uniform pattern across the page.

City

Pincode

State _____ Country _____

[illegible][illegible]

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	45%

Ownership of Property : ☐ Sole ☐ Joint

Ownership of Property : ☐ Sole ☐ Joint

Age of Property : Year(s)

Age of Property: Year(s)

Type of Property : ☐ Residential Property ☐ Commercial Property

Ownership of Property : ☐ Applicant ☐ Guarantor ☐ Co-Applicant

Value of Property : | | | | | | | | | |

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Names of All Property Owners: _____

[illegible][illegible][illegible][illegible]

Insurance Details

Single Premium Insurance Policy applied for : ☐ Yes ☐ No

I/We have applied for the Single Premium Financing policy as indicated above. I/We request you in addition to the Loan Against Property, finance the Insurance Premium under the Single Premium Financing Policy taken by me/us through ICICI Prudential Life Insurance Co. Limited.

Plant And Machinery Information

If you are a Micro, Small or Medium Enterprises

Please tick the relevant box as per original investment in plant and machinery for manufacturing and office equipment for trading / service.

	Manufacturing	Trading / Service
Micro I	☐ Up to ₹ 10 Lakhs	☐ Up to ₹ 4 Lakhs
Micro II	☐ Greater than ₹ 10 Lakhs and up to ₹ 25 Lakhs	☐ Greater than ₹ 4 Lakhs and up to ₹ 10 Lakhs
Small	☐ Greater than ₹ 25 Lakhs and up to ₹ 5 Crores	☐ Greater than ₹ 10 Lakhs and up to ₹ 2 Crores
Medium	☐ Greater than ₹ 5 Crores and up to ₹ 10 Crores	☐ Greater than ₹ 2 Crores and up to ₹ 5 Crores
	☐ Greater than ₹ 10 Crores	☐ Greater than ₹ 5 Crores

Section 7 Loans Information (Non-Mandatory)

Past Performance / Future Estimates

Past Performance / Future Estimates (Actual performance for two previous years, estimates for current year and projections for next year to be provided for working capital facilities. However for term loan facilities projections to be provided till the proposed year of repayment of loan)

Rs. in lakhs	Past Year 1 (Actual)	Past Year 2 (Actual)	Past Year (Estimate)	Next Year (Projection)
Net Sales				
Net Profit				
Capital (Net Worth in case of Companies)				

Status Regarding Statutory Obligations

Statutory Obligation Remarks (Any details in Connection with the relevant obligation to be given)		
Whether Complied with (select Yes / No). If not applicable then select N.A.		
1. Registration under Shops and Establishment ACT	Yes / No / NA	
2. Registration under MSME (Provisional / Final)	Yes / No / NA	
3. Drug License	Yes / No / NA	
4. Latest Sales Tax Return Filed	Yes / No / NA	
5. Latest Income Tax Returns Filed	Yes / No / NA	
6. Any other Statutory dues remaining outstanding	Yes / No / NA	

Other Information

Group Company Details (Mandatory as applicable)

Telephone Number

Office

--	--	--	--	--	--	--	--	--	--

Area Code Extension

Fax

--	--	--	--	--	--	--	--	--	--

Area Code Extension

Country of Establishment

Regd. Address of Head Office

City																				Pincode																			
State																				Country																			

For Proprietorship only

Category (Mandatory) ☐ SC ☐ ST Other

Community (Mandatory) ☐ Hindu ☐ Sikh ☐ Jain ☐ Muslim ☐ Christian ☐ Zoroastrian ☐ Buddhist Other

BLANK

Section 8 Only for Current AccountAccount No.

For Current Account please select Product type

☐ Business Essential Account ☐ International Trade Account ☐ Smart Business Account ☐ EEFC ☐ Other Product Name Operating Mandate ☐ Single by ☐ Jointly ☐ As per resolution attached ☐ Other Purpose of Opening the account ☐ Investment ☐ Transactions ☐ Other

Source of Funds, which will be credited to the account over a period of time (you may indicate more than one source, this does not only refer to the initial credit)

☐ Professional Receipts ☐ Business Receipts ☐ Sale of Investment ☐ Income from investments☐ Other **Initial payment Details**Currency Amount⁷ (in figures) (in words)Mode of Payment ☐ Cash ☐ Debit existing SCB account number - - - ☐ Cheque/Demand Draft no. dated drawn on Account number (Bank and Branch)**Customer Benefits: Debit Card*** Debit / ATM Card ☐ Business Debit Card ☐ ATMName as it should appear on card Please leave a space between two wordsCard Holder Mobile No.

Preferred Company name as it should appear on the Debit Card:

 Maximum of 15 characters only. Please leave a space between two words

Preferred Daily Card limit in ₹ (Please select one)

☐ ₹ 10000 ☐ ₹ 25000 ☐ ₹ 1Lakh ☐ ₹ 2 Lakhs ☐ ₹ 3 Lakhs ☐ ₹ 5 Lakhs

Sole Props with <6 month Vintage (difference between Application Date and Date of Incorporation) to get default debit card limit of INR 10,000 (in case of BEA100) and INR 25,000 (in case of all other variants)

Business Clients Debit Card can be issued to all account signatories (as confirmed in the Board Resolution), Please provide details of additional cardholders (to be covered in BR) as below

Preferred Card holder name

(Maximum of 21 characters only; please leave a space between two words)

Card Holder Name / Mobile No. Card Holder Name / Mobile No. Card Holder Name / Mobile No. Card Holder Name / Mobile No.

(For any further card issuance, please use the Debit Card Application form)

☐ Internet Banking ☐ SMS Banking ☐ Suppression of physical statement ☐ Yes ☐ No ☐ Door Step Banking/Cash Management Service

Phone Banking & E-statement registration will be automatically triggered for every account opening.

Please refer to Terms & Conditions for the above services.

Please note additionally:

- Contact Sales/ nearest branch for applying for Doorstep Banking.
- Net Banking facility can be extended only to Individuals. Non Individuals will have view access only.
- S2B- Straight 2 Bank would be default platform for all clients who wish to conduct transactions through internet.
- For Net Banking, mobile no & email address details on page 4 are mandatory.

Term Deposits Details

Maturity Instruction⁸ ☐ Automatic renewal ☐ Credit account number - - - - ☐ Issue Pay Order

Interest payment⁸ ☐ Renew with principal¹⁰ ☐ Credit account number - - - - ☐ Issue Pay Order

Interest frequency ☐ Simple Fixed Deposit (Quarterly) ☐ Short Deposit (At Maturity) ☐ Reinvestment Deposit (At Maturity) ☐ Monthly Income Plan

Interest Rate _____ Value Date

Deposit Period (in figures) **Days** **Months** **Years**

In Words

Operating Mandate ☐ Single by _____ ☐ Jointly ☐ As per resolution attached ☐ Other (please specify)

⁸For term deposits greater than Rs. 50000, PAN is mandatory. ¹⁰Prevailing rules on TDS will apply. (For Term Deposits) ⁹In the absence of specific instructions, the term deposit will be automatically renewed for a similar period at the prevailing rate of interest. Interest alone cannot be renewed with out principal. The bank shall be issuing consolidated TDS certificate for all your Term Deposits with us on an annual basis for your convenience. In case you want to get monthly TDS Certificates, please get in touch with Phone Banking Unit. If you are eligible under Income Tax Act for non deduction of Tax at source on interest earnings, you are required to provide us the declaration using Form 15G or Form 15H (as appropriate). These forms are available at our branches or you can download the same from our website (please log on to www.standardchartered.com/in/home/forms_centre.html, under the title 'Miscellaneous Forms').

Delegation Authority Form for Phone Banking, Doorstep Banking and Internet Banking

☐ Facilities with separate TPINs, user IDS and passwords(wherever applicable)

Name

Designation

Address

City

Tel No. - -

Country Code STD Code Fax No. - -

E-mail

To access accounts ☐ Phone Banking ☐ Doorstep Banking ☐ Internet Banking

Signature _____ Date

###Please refer to terms and conditions.

Name

Designation

Address

City

Tel No. - -

Country Code STD Code Fax No. - -

E-mail

To access accounts ☐ Phone Banking ☐ Doorstep Banking ☐ Internet Banking

Signature _____ Date

###Please refer to terms and conditions.

Board Resolution / Resolution

To,
Standard Chartered Bank,
Resolved:

That this organization established in its name one or more accounts with Standard Chartered Bank upon such terms and conditions as may be agreed upon with said bank and that _____ (TITLE of this organization) be and they are hereby authorized to establish such account mentioned below.

It would be to the Organization's benefit to obtain the facilities indicated in this Account Opening Form in respect of the Accounts and subject to such terms and conditions as may be prescribed by the Bank and other related or ancillary agreements and documents in respect of any Services mentioned above (as each may be amended, supplemented and/or substituted from time to time).

RESOLVED : That

Mr. _____ (Name) _____ (DESIGNATION) and/or
Mr. _____ (Name) _____ (DESIGNATION) and/or
Mr. _____ (Name) _____ (DESIGNATION) and/or
Mr. _____ (Name) _____ (DESIGNATION) and/or
Mr. _____ (Name) _____ (DESIGNATION) and/or
Mr. _____ (Name) _____ (DESIGNATION) of this organization by and they are

hereby authorized to draw cheques, perform all transaction with respect to the facilities mentioned above on behalf of this organization signed as provided herein with including those draw to the individual order of any officer or other person authorized to sign the same.

And the Bank be Instructed to honour the transaction done on the above mentioned facilities, Issue Debit Cards including any replacement/renewal thereof to the persons nominated in the manner set out below as being authorised, on behalf of the Organization, to use the Card(s) to draw on the Company's Accounts) with the Bank and to perform all credit to the account of the Organization all cheques, note, bills, other negotiable instruments, orders or receipt, letter of credit and/ or guarantee and to open and/or close term deposits prematurely and/or on maturity, and Bank is authorized to accept and/or act upon all instructions Issued on behalf of the Organization and such signature (s) shall be sufficient authority to bind the Organization in all transactions between the Bank and the Organization including those specifically referred to herein.

I hereby certify that the foregoing is a full true and correct copy to the resolution adopted by the Board of _____ ORGANIZATION NAME) at a meeting of said Board held on _____ (DAY) of _____ (MONTH) _____ (YEAR) and that the signatures appearing on the signatures card are the signatures of the persons duly authorised to withdraw funds of said organization from said bank in accordance with the above resolution until such authority is revoked by giving written notice the to said bank signed by the officers of said organization there onto duly authorized by its Governing Body. Witness my hand and seal of the organization. Signature of Secretary/Director _____ Organization Seal/Stamp.

Straight 2 Bank Internet Setup

*Straight2Bank Services (S2B): ☐ Yes ☐ No

Straight 2 Bank - Internet Banking Setup Form

(mandatory for BE product)

SECTION A: COMPANY PROFILE (mandatory)

*Company Name:

*Country:

PRIMARY CONTACT DETAILS (mandatory)

*Name:

*Email:

*Phone:

REGISTERED AND MAILING ADDRESS (mandatory)

*Add Line 1

Add Line 2

*City

*Country

*Postal Code

SECTION B: SERVICES REQUIRED (at least one service is mandatory)

{ For Internal Use only: S2B Setup Type : ☐ LITE ☐ CLASSIC ☐ S2b Tally* }
S2B Channel : ☐ Host 2 Host ☐ Web based

Existing users of Licensed Tally Solutions software package, please tick here ☐

* I hereby agree to Standard Chartered sharing my name and contact details with M/S Tally Solutions Pvt Ltd. This is required for installation of Tally ERP9.0 for availing S2BTally Services.

Cash Services:

#Payments Transactions ☐ Payments Reporting ☐ Collections Reporting (Classic) ☐

#Note: Transactions will include Book Transfer, NEFT, RTGS, DD issuance

Additional Transactions: ^Corporate Cheque ☐ Online Tax (Classic) ☐ Bulk Payment ☐ Payroll ☐

^ For Corporate Cheque, specimen signature of Authorisers to be provided separately

Trade:

LC Issuance ☐ Trade Reporting ☐*Other Trade Services (Classic) ☐

*Note: includes Bank Guarantee, Export / Import Collections etc.

SECTION C: USER DETAILS (mandatory)

User Roles

1 Payment Initiator

4 Payroll Initiator

7 Trade Authorizer

10 Account Services

2 Payment Authorizer

5 Payroll Authorizer

8 Trade Inquiry

11 All of the

3 Account Inquiry

6 Trade Initiator

9 Customer Administrator

*User Name	*User ID (max 10 char)	*Mobile Num	*Email	*Role	*Country

Note: S2B Authorisation Matrix will be setup as per Board Resolution/ Partnership Deed provided

CHALLENGE QUESTION & ANSWERS (for Password Authentication only)

User Name	Input question 1 & answer	Input question 2 & answer	Input question 3 & answer

Special Instructions:

SECTION D: AUTHORIZED SIGNATORIES (mandatory)

I/We acknowledge that my/our use of the Straight 2 Bank Bank Service(s) will be governed by the terms and conditions of the Master Services Agreement and other related documentation. I/We confirm that we have read, understood and agree to be bound by the Master Services Agreement including, without limitation, the various indemnities provided there under.

* Authorizer Details	Authorized Signatory 1	Authorized Signatory 2	Authorized Signatory 3	Authorized Signatory 4
Name of Authorizer				
Signature				
Date				

For Internal Use only: Company Name _____
Account No _____
Currency _____

CURRENT ACCOUNT

Consent of E-KYC

I hereby state that I have no objection in authenticating myself with Aadhar based authentication system and hereby consent to providing my Aadhar number, Biometric and/or One Time Pin (OTP) data for Aadhar based authentication for the purposes of availing of the e-KYC services from Standard Chartered Bank. I understand that the Biometrics and/or OTP I provide for authentication shall be used only for authenticating my identity or obtain my demographic details through the Aadhar Authentication system.

Sign. / Thumb Impression

Sign. / Thumb Impression

Sign. / Thumb Impression

Sign. / Thumb Impression

Name

Name

Name

Name

I/We hereby declare that the information and documents given by me/us to Standard Chartered Bank ("SCB / Bank") are true, correct and accurate and I/we have not withheld any material information. I/We understand that such information and documents shall be used and relied upon by SCB for the purpose of sanctioning and granting the loan or opening current account. I / We further agree that any false / misleading information given by me / us, or suppression of any material fact will render my / our application/account liable for closure and further action. I/We confirm that SCB is not required to return documents supplied by me/us. I/We hereby declare that I am / we are competent and not under any legal impediment to open and operate or approve authorized signatories to operate a banking account and I / we agree that the above statement shall form the basis of any arrangement as to a loan (if any) or a deposit account made between myself ourselves and SCB. I/We confirm that there are no bankruptcy or winding-up proceedings instituted against me / us and I / we are not undischarged bankrupt(s) (or, in the case of a company, that we have not been wound-up) and that none of my/ our credit facilities/ loans with any financial institution has turned bad / irregular or is under default.

I/We have carefully read and understood / was explained in English / the vernacular language understood by me/us, the terms and conditions of this Application, the Loan Agreement as well as the terms and conditions (including schedule of charges as set out in Most Important document provided along with this form) of Current Account, International Trade Account, Term Deposit, Straight2Bank, ATM, E-statement, Debit Card, phone banking, internet banking, door step banking facilities etc. as displayed on the website of the Bank which are in force now and as revised from time to time by the Bank in its sole discretion. I/we understand that in order to be eligible for concessional charges, for deposit accounts, I/we have to maintain the Average Quarterly Balance (AQB) or Quarterly Trade Throughput (QTP) as indicated in schedule of charge agreed upon by me/us on a quarterly basis and if I/we fail to do so, I/we shall be liable to pay charges every quarter as indicated in the schedule of charge. I/We hereby irrevocably agree to be bound by all the terms and conditions governing the above mentioned facilities.

I/We have read, understood and acknowledge and agree that the Bank may refer my/our name to a recognized credit or referencing agency/ies and/or make such references and enquiries to me/us, friends, relatives, employer (past or present), business associates to verify the details as the Bank may consider necessary. I/We understand and agree that the sanction of the loan or any other banking facilities shall be at the sole discretion of SCB, which reserves its right to reject this Application without assigning any reason. I / We also understand the continuation of the account is at the sole discretion of the Bank and in case the Bank is dissatisfied with the conduct of the account, it has the right to close the account after giving me/us 30 days notice or withdraw the concessional charges in all or any service charges to me / us or charge the applicable rates for such services.

I/We certify that I/we am/are a citizen of India / entity resident in India. I / We confirm that I am / we are not a non-resident / non-resident controlled entity. I/We hereby declare that all foreign exchange transactions as may be entrusted by us to the Bank from time to time do not involve and are not designed for the purpose of any contravention or evasion of the provisions of the aforesaid Act or of any rule, regulation, notification, direction or order made there under. I/We also hereby agree to give such information/documents as will reasonably satisfy you about the transaction in terms of the above declaration. I/We also understand that if I/We refuse to comply with any such requirement or make only unsatisfactory compliant therewith the Bank shall refuse in writing to undertake the transaction and shall if it has reason to believe that any contravention/evasion is contemplated by me/us report the matter to RBI. I/We are aware that relying upon my/our this declaration, the Bank may not insist upon our giving specific declaration-cum-undertakings in case of each such transaction. In case the undertakings is being made for a firm/company, I/we further declare that the undersigned has/have the authority to give this declaration and undertaking on behalf of the firm/company.

I/We understand that on subscribing to SCB's Internet Banking and/or Short Messaging Services (SMS) Banking services I/ we will be getting alphanumeric SMS messages related to these services, which may include Internet Banking activation code and/or SMS Banking PIN, on my/our mobile number/s provided to the Bank. I/we authorize the Bank to send me/us all SMS messages, including activation code/PIN, related to these services on my/our mobile number/s. I/we agree that the risk of non-receipt and/or disclosure of all such SMS messages shall be fully borne by me/us. I/we also confirm and agree that the Bank shall not be held responsible in any way for any losses that maybe suffered by me as a result of direct attacks and / or disturbance(s) technical or otherwise in the cellular network, Phishing & non-receipt and/or disclosure of the SMS messages to an unauthorized third party. I/We confirm in case of change in mobile number, I/We shall promptly inform the Bank and the Bank shall not be liable for any loss(es) sustained by me/us if SMS is sent to old mobile number. Contact preference as chosen by me/us in this form will be effective after 60 days from date of account opening / change request and will supersede any contact preference already registered with the bank, for any product.

I/We hereby consent to SCB, its officers, employees, advisers and agents disclosing information relating to me/us and my/our account(s) and/or dealing relationship(s) with it, including but not limited to personal details, details of my/our facilities, products, transactions, defaults, payment history, any security taken, transactions undertaken and balances and positions with the Bank, to

- (i) the head office of the Bank, any of its subsidiaries or subsidiaries of its holding company, affiliates, representative and branch offices in any jurisdiction (the "Permitted Parties");
- (ii) professional advisers, service providers or independent contractors to or agents of the Permitted Parties such as debt collection agencies, data processing firms (including for this application) who are under a duty of confidentiality (whether located outside or inside of India) to the Permitted Parties;
- (iii) any actual or potential participant or sub-participant in relation to any of the Bank's rights and/or obligations under any agreement between us, or assignee, novatee or transferee (or any agent or adviser of any of the foregoing);
- (iv) any credit information company, rating agency, insurer or insurance broker of, or direct or indirect provider of credit protection to any Permitted Party;
- (v) any court or tribunal or regulatory, supervisory, governmental or quasi-governmental authority with jurisdiction over the Permitted Parties;
- (vi) a merchant, card issuer or a member of a card association (for instance, Visa or MasterCard) where the disclosure is in connection with use of a card;
- (vii) any dealer of a foreign exchange, authorized person or any security provider;
- (viii) anyone the Bank or RBI considers necessary in its discretion in order to provide me/us with services or otherwise as authorized by RBI.

I / We have signed the application form after filling in all details myself. The EMI date would depend upon the date of disbursement. I / We undertake that the credit facility will be used for the purpose it is granted by the Bank/declared by me / us at the time of availing the credit facility and not for investment in the stock market in any form or any speculative, antisocial or any purpose not permitted by law. I /We understand that this requirement is in line with the RBI regulations. I / We understand that if it is found by the Bank at a later date that the facility granted to me/us is being used for any other purpose than the purpose for which it was granted, then the Bank will have the right to recall the facility at any time. I/We also agree to provide to the Bank such further documents as may be required by the Bank from time to time to comply with the Know Your Customer (KYC) requirements of the Reserve Bank of India and the Bank. The Bank reserves the right to recall the facility/close the account, enforce security and guarantees, if any and appropriate proceeds thereof towards the outstanding and recover the balance from me / us, if any or close the account in case such required documents are not provided by me/us to the Bank.

I/We have no borrowing arrangements for the unit except as is in this application; that there is no overdues / statutory dues against me/us/promoters except as indicated in the application; that you may at any time, inspect / verify my/our assessment of account etc. in our factory / business premises as given above.

In compliance to RBI circular Ref.No. DBOD. Dir. BC. 20 /13.03.00/2004-05, Clause 2.1 on Granting loans and advances to relatives of Directors and Clause 2.2 on Restrictions on Grant of Loans and Advances to Officers and the Relatives of Senior Officers of Banks, Where borrower is an Individual or Sole Proprietor: I /we hereby declare that:

I am not

- a specified near relation to any senior officer of the bank;
- a director or specified near relation of a director of a banking company, as defined in the said circular

Where the borrower is a Partnership Firm: I /we hereby declare that:

None of the partners in our firm, is a specified near relation of any senior officer of the bank;

Where the borrower is a Company: I /we hereby declare that:

None of our directors, is a director or specified near relation of a director of a banking company, as defined in the said circular

- The Borrower shall forthwith inform the Bank of any unhedged foreign currency exposure on a quarterly basis.

- Note:
- Our Door Step Banking representatives are not authorised to accept payments in cash. Please pay by crossed cheque only.
 - Your first cheque book will be sent to you by courier. No application is required.
 - Should you require more information during the course of your meeting with our Representative.

please feel free to call on the Phone Banking numbers advertised.

Section 10 Signature & Photographs

- 1. Please affix passport size photographs of all account holders and all guarantors (individuals, partners in a partnership firm , sole proprietor, authorised signatory (if any).
- 2. Authorised Signatories (in case of HUF, Karta & all adult members of the joint family) From A to D only Please attach another form if necessary.
- 3. Please sign the photograph across the face.
- 4. For signatures, please sign using black ink only.
- 5. Company seal as applicable.

Photo of
Primary Applicant/
Authorised Sign.

Name Primary Applicant
/Authorised Sign.

Sign. Primary Applicant
/Authorised Sign.

Photo of 1st
Co- Applicant/
Authorised Sign.

Name Co- Applicant 1
/Authorised Sign.

Sign. Co-Applicant 1
/Authorised Sign.

Photo of 2nd
Co- Applicant/
Authorised Sign.

Name Co- Applicant 2
/Authorised Sign.

Sign. Co-Applicant 2
/Authorised Sign.

Photo of 3rd
Co- Applicant/
Authorised Sign.

Name Co- Applicant 3
/Authorised Sign.

Sign. Co-Applicant 3
/Authorised Sign.

Photo of 4th
Co- Applicant/
Authorised Sign.

Name Co- Applicant 4
/Authorised Sign.

Sign. Co-Applicant 4
/Authorised Sign.

Photo of 1st
Guarantor/
Non-Authorised Sign.

Name Individual Guarantor 1
/Non-Authorised Sign.

Sign. Individual Guarantor 1
/Non-Authorised Sign.

Photo of 2nd
Guarantor/
Non-Authorised Sign.

Name Individual Guarantor 2
/Non-Authorised Sign.

Sign. Individual Guarantor 2
/Non-Authorised Sign.

Photo of 3rd
Guarantor/
Non-Authorised Sign.

Name Individual Guarantor 3
/Non-Authorised Sign.

Sign. Individual Guarantor 3
/Non-Authorised Sign.

Photo of 4th
Guarantor/
Non-Authorised Sign.

Name Individual Guarantor 4
/Non-Authorised Sign.

Sign. Individual Guarantor 4
/Non-Authorised Sign.

Date : _____

Place : _____

Common

[illegible]

Unique to CASA & TD

Branch Code 	Branch Name 	Product Code 	Sub-product Code
CRM Code 	Corporate Relationship ID 		
Corporate Category ☐ A ☐ B			

Deposit Details

Products	Product Name	Currency	In numbers	In words
CASA				
Term Deposit				

Cheque Details

No.	Cheque Number	Dated	Drawn On	Amount
1				
2				
3				

Recommended by	Approved By
----------------	-------------

Signature of Sourcing Staff

Signature of Credit Officer

Signature of Reviewing Officer

Diagram illustrating the PSID (Personal and Sensitive Information Data) flow for three roles:

- PSID of Sourcing Staff
- PSID of Credit Officer
- PSID of Reviewing Officer

Name of Sourcing Staff

Name of Credit Officer

Name of Reviewing Officer

DD / MM / YYYY

$\frac{\square}{D} \frac{\square}{D} / \frac{\square}{M} \frac{\square}{M} / \frac{\square}{Y} \frac{\square}{Y} \frac{\square}{Y} \frac{\square}{Y}$

DD / MM / YYYY

Section 12 Documents to be submitted to Open the Account

Constitution	Document	Loan	CA
Individual	1. Pan card/Pan Information/GIR No./Form 60 And	☐	☐
	2. Any one of the following (Two if only identity or address)		
	2A. PAN Card	☐	☐
	2B. Passport	☐	☐
	2C. Voter ID	☐	☐
	2D. Aadhar Card	☐	☐
	2E. Driving Licence	☐	☐
	2F. Utility bill	☐	☐
Proprietorship	1. Pan card/Pan Information/GIR No./Form 60 And	☐	☐
	2. Certificate/registration document/License document	☐	☐
	3. Utility bill/Bank Statement	☐	☐
Partnership	1. Pan card/Pan Information/GIR No./Form 60 And	☐	☐
	2. Partnership deed	☐	☐
	3. Partnership authority letter	☐	☐
	4. Certificate/registration document/License document	☐	☐
	5. Utility bill/Bank Statement	☐	☐
Private Limited	1. Pan card/Pan Information/GIR No./Form 60 And	☐	☐
	2. Memorandum & articles of association And	☐	☐
	3. Certificate of incorporation And	☐	☐
	4. Certificate of commencement of business	☐	☐
	5. Board resolution And	☐	☐
	6. Form 32 or annual return with ROC And	☐	☐
	7. Form 18 (Certified.. Address) And	☐	☐
	8. Shareholding and directorship pattern And	☐	☐
	9. Utility bill/Bank Statement	☐	☐
Association	1. List of name of office-bearers And	☐	☐
	2. Certified true copy of Registration Certificate (if Registered) and By-Laws	☐	☐
	3. Resolution signed by Chairman /President And	☐	☐
	4. Pan card/Pan Information/GIR No./Form 60	☐	☐
	1. Signature Proof of Applicants	☐	☐
	2. Photographs of all applicants and co-applicant (attested by individual applicants and guarantors)	☐	☐
	3. Latest 2 year's IT Returns and C.A. certified Computation of Income; Audit report with financials and annexures / schedules (including PNL, B/S)	☐	☐
	4. Core/ Main Bank statement for the last 6 months	☐	☐
	5. Gross Block / CA Certificate pertaining to Investment in Plant and Machinery	☐	☐
	6. End Use Declaration	☐	☐
	7. Property Documents	☐	☐
	8. Property Insurance Documents	☐	☐
(the above checklist is only indicative and not exhaustive in nature)			

Non Individual Entity as Home Loan Application Loan Against Property Application

ANNEXURE	For Non Individual entities where Banking exposure exceeds INR 25 Cr, please refer and submit Annexure as applicable below-		
	Non Individual Entity as	Business Loan / Guaranteed Instalment Loan	Loan Against Property Application
	Primary Applicant	Yes	Yes
	Co-Applicant	No	Yes

Standard Chartered Bank is committed to making your banking with us a pleasant experience and values your feedback:

Write to us : sme@sc.com

Visit us : <https://www.sc.com>

Call us : Business Banking Helpline Services (7 Days a Week, 24 Hours a Day)

You can write to us for any further queries at Standard Chartered Bank, Customer Care Unit, 19, Rajaji Salai, Chennai – 600 001

City	Helpline No.
Allahabad, Amritsar, Bhopal, Bhubaneshwar, Chandigarh, Cochin / Ernakulam, Coimbatore, Indore, Jaipur, Jalandhar, Kanpur, Lucknow, Ludhiana, Nagpur, Patna , Rajkot, Surat, Vadodara	6601161 / 3940161
Ahmedabad, Bangalore, Chennai, Delhi, Hyderabad, Kolkata, Mumbai, Pune	66011616 / 39401616
Gurgaon, Noida	011 - 66011616 / 011 - 39401616
Jalgaon, Guwahati, Cuttack, Mysore, Thiruvananthapuram, Vishakhapatnam, Proddatur, Dehradun, Mathura, Saharanpur, Siliguri	1800 425 0109 / 1800 3000 1616