



BANKMITRA BC

BRING BUSINESS, EDUCATION, DEVELOPMENT AND GOVERNMENT TO RURAL INDIA

(Under the aegis of the National e-Governance plan of BANKMITRA BC Authority of India)

Application No 18

M/s Bankmitra Bc Channel Partner Application Form for KIOSK banking for any query please call +91-9163289915 or Write to: - info@bankmitrabc.co.in

support@bankmitrabc.co.in

THIS KIT CONTAINS THE FOLLOWING FORMS:

FORM 1:- PERSONAL PROFILE

FORM 2:- INFRASTRUCTURE / FINANCE

(NOTE: Filling of both forms is mandatory the information furnished by the applicants shall be treated in strict confidence.)

DETAILS OF INVESTMENT TO BE MADE BY CHANNEL PARTNERS IN STOCKS

The investment to be made by Channel Partners is based on the District/state level partner, Details are as under.

- (a) District Level Channel Partner: - Rs 49000/- only
- (b) State Level Channel Partner: - Rs 149000/- only

Mode of Payment:-

- (1) By Cash Deposit Method (Please send Xerox copy of cash receipt.)
- (2) By Cheque
- (3) By RTGS/NEFT/Online transfer

Terms & Conditions:-

- (1) This agreement is only valid for 5 years from the date of initial approval.
- (2) Every channel partner will be awarded by 25% commission on every BANKMITRA BC Application form.
- (3) Channel Partner will also get 25% Royalty on every transition from concerned BANKMITRA BC Centre.
- (4) Channel partner is also responsible for any type of abnormality related to its concerned KIOSK centre.
- (5) Local audit authority is also concerned with channel partner.

Declaration:-

I have read and understand all information/terms & conditions and signed this agreement

Date: -

Applicant Signature

FORM 1 PERSONAL PROFILE

PERSONAL DETAILS _____

NAME (IN FULL AND BLOCK LETTERS): _____

FATHER'S/HUSBAND'S NAME: _____

COMPLETE POSTAL ADDRESS: _____

CITY/TOWN DISTRICT: _____

PIN CODE STATE: _____

DATE OF BIRTH: _____

TELEPHONE No. _____ Resi. _____ Mobile _____

Fax _____ e-mail: _____

QUALIFICATIONS

Degree/Diploma Certificate	University/Institution	Subjects	Year of Passing

(Strike out unutilised rows)

BUSINESS EXPERIENCE (if any)

NATURE OF INVOLVEMENT	NAME OF ORGANISATION	NATURE OF BUSINESS	YEAR (TO)	TURNOVER (RS. LAC)	PRODUCTS	NO. OF EMPLOYEES

(Strike out unutilised rows)

EXPERIENCE AS EMPLOYEE (if relevant)

ORGANISATION	DESIGNATION	SALARY DRAWN	YEAR (TO)	NATURE OF WORK	MAIN PRODUCTS	NO. OF EMPLOYEES

(Strike out unutilised rows)

FAMILY DETAILS (Father, Mother, Spouse, Brother/s, Sister/s, Children)

Name	Age	Relationship	Qualification	Occupation

(Strike out unutilised rows)

PLEASE MENTION IN BRIEF A FEW DETAILS ABOUT YOUR ACHIEVEMENTS, YOUR TYPICAL DAILY ROUTINE, YOUR BUSINESS GOALS AND AMBITIONS.

DECLARATION

I We declare that the details and information provided by me /us herein above, are true to the best of my /our knowledge and belief

DATE: _____

PLACE: _____

Signature _____

FORM 2 - INFRASTRUCTURE I FINANCE

STRUCTURE OF THE BUSINESS ENTITY FOR CHANNEL PARTNERSHIP

Proprietorship Organisation	<input type="checkbox"/>	Private Limited Company	<input type="checkbox"/>
Partnership Firm	<input type="checkbox"/>	Limited Company	<input type="checkbox"/>

Others (Please specify _____)

INVESTMENT CAPABILITY

(A) Rs. 49000/-

(B) Rs. 149000/-

(AB are relevant if you would be interested in becoming a Channel Partner In multiple cities or in becoming a Master Distributor)

FINANCIAL STRENGTH (Please indicate the amount to be invested) FROM OWN SOURCES

Name	Amount Available for Investment
Total	

(Strike out unutilised rows)

(NOTE: Please check that the details are in tune with the investment required for the city chosen by you.)

*Subject to terms & conditions.

CHOICE OF DISTRICT/STATE FOR DISTRIBUTION PURPOSES _____

PROPOSED LOCATION WITHIN THE CITY _____

REASONS FOR CHOICE OF LOCATION _____

MENTION REASONS FOR INTEREST IN THIS BUSINESS _____

CURRENT INFRASTRUCTURE AVAILABLE _____

WHETHER HAVING ANY PREMISES

If Yes, Nature of Premises Yes No

Owned Rented/Leased Single Ownership Joint Multiple

PLEASE FURNISH DETAILS OF THE PREMISES _____

CENTRALITY OF LOCATION & THE RATIONALE

(Please give details regarding location, proximity to industrial belt | educational institutions | residential localities and the status of the neighborhood etc.)

DETAILS OF ADDITIONAL OFFICE INFRASTRUCTURE

Telephone	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Fax	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Internet	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Final Check list:-

- 1 Please provide only correct Information otherwise your application may be Canceled in future.
2. Please provide your Security money in above mention account only.
3. After filling application form please send it to under mention address: - BANKMITRA BC ONLINE BANK

**Circular Garden Reach Road,
Garden Reach, Kolkata, West
Bengal,700018,
Phone: +91-9163289915**

4 you can also submit your app 'cation form online on

E-mail: info@bankmitrabc.co.in/support@bankmitrabc.co.in

Email: info@bankmitrabc.co.in | Website: bankmitrabc.co.in

5 For any further query please contact our customer care executive.

DECLARATION

I / We declare that the details and information provided by me / us herein above are true to the best of my / our knowledge and belief.

DATE: _____

PLACE: _____

Signature _____

**BRING BUSINESS, EDUCATION, DEVELOPMENT
AND
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(Under the aegis of the National e-Governance plan of BANKMITRA BC Authority of India)

VLE Registration form under Rural Banking/ Authority

Application No 18

Name of VLE.....
Father/Husband Name.....
Blood Group.....SCA ID..... (Please leave blank)

Paste your
Recent
Passport Size
Photograph

Product For which VLE want to Apply

(a) Kiosk Banking (b) Recharge

(i) SBI (c) Utility

(ii) PNB (d) Tatkal Rupya

(iii) BOB (e) Booking

(iv) CBI (f) Loan under SGH Group

(v) OBC

(vi) ICICI Bank

(vii) Vijaya Bank

(viii) Any Other Then Name of Bank

Permanent Address.....

Contact Number.....E-mail.....

Are you in job.....?

Monthly Income from all sources.....

Type of Property for BANKMITRA BC
outlet.....

Mode of Payment office.....

If cash Deposit then cash receipt no.....

Declaration:- Above mention all information about me are true in my knowledge and I declared that if found any wrong information then Bankmitra Bc Authority of India will not responsible for any type of cancellation,

Date: -

Your Faithfully VLE

1 Location (Village /Town) – Location.....District.....State.....PIN.....

2. Name (IN BLOCK LETTERS).....

3 Father's / Husband's Name

4. Date of Birth.....

5. Gender (Please Tick) – Male Female

6. Marital Status (Please Tick) –Married Unmarried

7. Education (Please Tick) - Below Class X Class XI Class XII

8. Permanent Address – Vill./Moh.....District.....P.O.....P.S.....
Tehsil.....State.....Pin.....

9. Communication Address Vill./Moh.....District.....P.O.....P.S.....
Tehsil.....State.....Pin.....

10. Telephone No. With STD Code) – Residence.....Office.....Mobile.....

11. E-mail ID, if any-.....

12 Currently Banking with (Bank) -

13. Bank Account Number if any -.....

14. Cheque Facility (Please Tick): Available Not Available

15 *Proof of Name (Please Tick) - Driving License PAN Card
(Anyone) Voter's ID card Passport

16. "Proof of address (Please Tick) Electricity E3 (Latest) NSC (Copy)
Letter from landlord LIC Policy {Copy)
Telephone Bill (Latest) Gas Connection

17. Present Business I Occupation, if any.....

18. Computer Literacy Yes No

19. If yes, nature of qualification:

20. If you already own a business or are working your revenue/income per month is

Less than Rs.10000 Rs.10000 –Rs.25000 Rs.25000 - Rs.40000

21. Do you have any experience in selling financial products?

If yes give detail.....

22. Languages known (say fluent / not so fluent)

Read	Write	Speak
English		
Hindi		
Regional Language (specify)		

23. No. of years of stay in the town/village: 1.2.....

24, Do you have any police records? If yes, give details.....

25. Names address and occupation of two people to whom reference can be made.

1.2.....

I certify that the above information is true to the best of my knowledge and belief

Signature of the applicant

Address & ID Proof*

*May be obtained from Sarpanch /Mukhiya /Gazatted Govt. Servant /Post Master/Tahsildar/Police Inspector /Govt. Teacher

This is to certify that Mr. / Ms. / Mrs.....has been a resident of (Complete Address).....
For.....years and holds a good character in the area His photograph is herewith attested and confirm the same. His date of birth is.....

(Signature)

Name:
Address:
Designation (with seal).....

Nearest Bank Details for where vie Apply: Branch Name.....Branch Code.....
Branch Address.....

CHECKLIST FOR ENCLOSURES

1. Please fill the application form carefully, for any help call help line number +91-9163289915
2. Make sure processing fee was paid after getting inquiry number for [rural 15600/-](#), for [urban 18600/-](#)
3. Mode of Payment: - all payment will be made by following methods
 - (a) By RTGS/NEFT/Online Transfer
 - (b) By Cash Deposit method (please send cash receipt voucher
 - (c) By Cheque
4. Attached self attested Address and Id proof
5. Attached photograph where you want to open your BANKMITRA BC outlet
6. Please provide only correct Information otherwise your application may be Canceled in future,
7. After processing vie get code after approx 45 day
8. After filling application form please send it to under mention address - M /S BANKMITRA BC ONLINE BANK

1255, R.P Complex Reliance tower
Bangalore - 560063, Karnataka, India
Phone: +91-9163289915

Email: -info@bankmitrabc.co.in| Website: -bankmitrabc.co.in

9. You can also submit your application form online on E-mail:- support@bankmitrabc.co.in
 10. For any type of query call to our Help- line Number- [+91-9163289915](tel:+91-9163289915) (8x6 Help line number) 11. Fax No. +91-9163289915
- Note: VLE can also send the application Form by Fax,

DECLARATION

I/We declare that the details and information provided by me/us herein above are true to the best of my /our Knowledge and belief

DATE:-

PLACE: -

(Signature)

BANKMITRA BC
Banking Development Authority (eMudhra Limited)

Final Checklist for applying any product under Rural

1. Read the Terms & Conditions of every product of Bankmitra Bc Carefully on Brochure
2. Before Installation of any software please read the file How to Install or call +91-9163289915
3. Fill up the application-form carefully.
4. Attached all essential document including Demand Draft for Trading Account (min. 25000/- in Favor of bankmitrabc payable at your Regional office for knew your regional office please call +91-9163289915)
5. Essential documents -
 - (a) ID Proof
 - (b)Address Proof
 - (c)Demand Draft (For. trading Account)
6. Complete Fill-up Application Form
7. Please send the application form by registered post or speed post only.
8. Please de not installs any software without prior information from SCA
9. All software is locking with Password for unblock please call +91-9163289915)
10. All Software are procreated by End-user license of BANKMITRA BC Authority, so do not Make any type of amendment and share with anyone.
11. For more information please visit: - www.bankmitrabc.co.in
12. for any type of information please write to: - support@bankmitrabc.co.in

Declaration: - Please provide only correct information and attached all essential document with your application Form. Bankmitra Bc Authority will not Responsible for any type of cancelation due to missing of any Document.

With Best Regard
Bankmitra
Sr. Advisor-Banking /Micro Finance