

FORMAT OF APPLICATION FOR FINANCIAL ASSISTANCE FOR TRANSPORT SECTOR (THIS IS ONLY A FORMAT AND NOT AN APPLICATION FORM)

1. DETAILS OF PROMOTER(S):

- a) Name & Address of the Promoter(s) :
- b) Constitution: Proprietorship/Partnership/
Cooperative Society
(Attach documentary support)
- c) Present activities of Promoter(s)

2. PROPOSED ACTIVITY :

- a) Name of the Scheme:
- b) No. of Unit(s) :

Rural :
Urban :
Total :

c) No. of Beneficiaries: <i>(Owners of Assets only)</i>	Per Unit		Total For.....Units	
	Rural	Urban	Rural	Urban
	-----	-----	-----	-----
i) Educated/uneducated unemployed/under employed				
ii) Women				
iii) Others				
	-----	-----	-----	-----
Total:	-----	-----	-----	-----

- d) Location(s) of Unit(s)

3. COST OF THE PROJECT:

(Rs. in Lakhs)

S.No.	Total Type of Vehicle	Cost per Vehicle/ Chassis	Cost of Body Fabrication	Registration,	Total	No. of Units	cost
				Insurance Permit fee & Interest etc	Cost Per Unit		

Note: Separate Proposal for each of type vehicle is to be furnished

1. MEANS OF FINANCE:

<u>S. No.</u>	<u>Source</u>	<u>Per Unit</u>	<u>%age</u>	<u>Total for..... Units</u>
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1. Promoter's Contribution
2. Subsidy
3. Loan –SCA
4. Term Loan – NSTFDC
5. Others, if any(specify)

Total:

➔ **NEXT**

NSTFDC

FORMAT 3

5. IMPLEMENTTION SCHEDULE:

- i) Commencement (Month/year)
- ii) Completion (Month/Year)

6. Details of assumptions regarding operations

- No of Working Days in a year :
- KM operated per Day. :
- Rate per KM/Load :
- Cost of Fuel Per liter(latest rates applicable in the State) :
- Cost of Engine Oil per liter. :
- Qty & replacement norms (in Kms) of Tyres. :
- Consumption of Fuel per KM . :
- Cost of Mobil Oil per ltr. :
- Cost & Period for replacement. :
- Service Cost and periodicity. :

FORMAT NO.3 (ANNEXURE I)

COST OF OPERATIONS AND PROFITABILITY STATEMENT (PER UNIT)

<u>S.No.</u>	<u>Particulars</u>	(Rs. in Lakhs)	
		<u>Ist year</u>	<u>IInd year onwards</u>

A. Earnings

B. Operating Costs

- i) Diesel/Petrol
- ii) Engine Oil/Mobil Oil
- iii) Replacement of Tyres
- iv) Insurance
- v) Repair & Maintenance
- vi) Interest
- vii) Depreciation
- viii) Other Expenses

Total operating Cost

C. Gross Profit(A-B)

CERTIFIED THAT ALL THE SELECTED PERSONS INCLUDED IN THE LIST ARE ELIGIBLE FOR ASSISTANCE AS PER ELIGIBILITY CRITERIA OF NSTFDC.

SIGNATURE _____

(AUTHORISED SIGNATORY)

NAME & DESIGNATION OF OFFICIAL _____

NOTE:

- I) Separate sheet to be used for each scheme
- *II) Please indicate Category Code as (1) for Educated Unemployed/under employed (2) for women (3) for others.

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ANNEXURE " B"

**FORMAT OF PROGRESS REPORT OF FUNDS UTILIZATION AS ON _____
(REPORT TO BE SENT BY THE SCA TILL DATE OF FULL IMPLEMENTATION OF
SCHEME)**

1. NAME OF THE PROJECT/SCHEME :

2. NSTFDC's FILE NUMBER :

3. IMPLEMENTATION PERIOD AS PER SANCTION ACTUAL

i) Date of Commencement :

ii) Date of Completion :

4. BREAK UP OF NUMBER OF UNIT(S) AS PER SANCTION
ACTUAL

	AS PER SANCTION			ACTUAL		
	Rural	Urban	Total	Rural	Urban	Total
5. <u>STATUS OF BENEFICIARIES</u>						
(No. of Beneficiaries-Owners of asset)	AS PER SANCTION					
ACTUAL	-----			-----		
-	Rural	Urban		Rural	Urban	
	-----	-----		-----	-----	
i) Educated /uneducated						
unemployed/under employed						
ii) Women						
iii) Others						
	-----	-----	-----	-----	-----	-----
Total						
	-----	-----	-----	-----	-----	-----
-						

Note: List of beneficiaries as per Annexure-I to be enclosed

6. COST OF PROJECT AND ACTUAL EXPENDITURE (Rs. In lakhs)

ITEMS	SANCTIONED	ACTUAL
-----	-----	-----
i) No. of Units :		
ii) Cost per Unit :		
iii) Total Cost of Scheme/Project :		

7. DETAILS OF SOURCES AND UTILISATION OF FUNDS

Sources
Actual(Cumulative)

Sanction

Per Unit	Total for..... No.of Units	Per Unit	Total for No.of Units
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- i) Promoter's Contribution
- ii) NSFDC's Share-
- iii) * Term Loan/ Bridge / :
* Working Capital Loan :
- iv) SCA's Share
- v) Subsidy
- vi) Others(Specify)

Total

8 . DETAILS OF RECEIPT AND UTILISATION OF NSTFDC's SHARE

RECEIPT FROM NSTFDC

**FUND RELEASED BY CHANNELISING *
AGENCY TO SUPPLIERS /BENEFICIARIES**

Cheque/ Amount DD No.	Date	Amount	Cheque/ DD No.	Date	In favour
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***NOTE:**

Transfer of funds by Channelising Agency to its Branches/District Offices/Field Offices will not be treated as disbursement of funds .

- 9. Deviations from the Sanction :
if any, alongwith reasons
- 10 Other relevant information :
If any

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ANNEXURE-I

LIST OF BENEFICIAIRES

- NAME OF CHANNELISING AGENCY _____
- NAME OF THE SCHEME _____
- NSTFDC's File No. _____

Sl No.	Name and Address of the Beneficiaries	Age	Sex	Unit Cost	NSTFDC's Share	Beneficiaries		Category Code *	Annual Family Income	Remarks
						Rural	Urban			

CERTIFIED THAT ALL THE BENEFICIARIES COVERED UNDER THE ABOVE LIST ARE ELIGIBLE FOR ASSISTANCE AS PER ELIGIBILITY CRITERIA OF NSTFDC.

SIGNATURE _____
(AUTHORISED SIGNATORY OF SCA)
NAME & DESIGNATION OF

OFFICIAL

NOTE: Separate sheet to be used for each scheme. please indicate Category Code as (1) for Educated Unemployed/under employed (2) for women (3) for others.

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Annexure "C"

FORMAT FOR FUNDS UTILISATION CERTIFICATE IN RESPECT OF WORKING CAPITAL ASSISTANCE

1. Name of the SCA/Agency :
2. Name of the Scheme :
3. NSTFDC's LOI No. & Date:
4. NSTFDC's share released:

Date

Amount

i)

ii)

5. **Certified that:**

- a) Funds have been utilised for the purpose/activities stated in the letter of sanction (LOI).
- b) An amount of Rs. _____ lakhs have been utilised within 60 days from the date of release of funds by NSTFDC for the implementation of the above said scheme.
- c) Total no. of _____ Scheduled Tribes beneficiaries have been assisted under the scheme.
- d) All the beneficiaries covered under the scheme were eligible for assistance as per eligibility criteria of NSTFDC.

Date:

Signature
(Authorised signatory of the Agency)

Name: _____

Designation: _____

(OFFICIAL STAMP)