FORM-2

Form-2(a)

PERSONAL NET WORTH STATEN	MENT
NAME	S/D/O
W/O	
ADDRESS	AGE
	PROFESSION
POSITION	
MARITAL STATUS	
CHILDREN :	
MALE	FEMALE
Nos-	Nos
Age-	Age-
Profession-	Profession-

For the purpose of obtaining financial assistance from time to time in any form whatsoever from the Bank/DFI/EEF, the undersigned submits the following as being a true and accurate statement of his/her financial condition on the date mentioned herein and also agree that if any change occurs, the undersigned will immediately notify the same to the Bank/DFI/EEF:-

NETWORTH STATEMENT AS ON	
LIABILITIES	ASSETS
Loan from Banks/Financial Institutions	CASH a) In hand Tk
(Schedule-A)	
Secured Tk	b) With other Banks Tk
Unsecured Tk	
	INVESTMENT
Other Creditors Tk	Government securities Tk
Unpaid taxes Tk	Shares, Debenture, Bonds, etc.Tk-
	Debtors Tk
	Real estate (encumbered) (Schedule-B) Tk
	Real estate (unencumbered) (Schedule-C) Tk
Other liabilities	Cash surrender value for
(Details attached) Tk	Life Policy Tk
	Others (Details attached) Tk
TOTAL TK	TOTAL TK
NETWORTH (Total Assets - Total liabil	ities) Tk.

SCHEDULE-A

LIABILITIES TO BANKS/FINANCIAL INSTITUTIONS:

Name & address of the Bank/Financial Institution	Date of availing Of the loan	Limit with validity	Present outstanding	Secured or unsecured with nature of security

SCHEDULE-B

REAL ESTATES (ENCUMBERED)

Location and tenure of	Area of land	Description and	Mortgage and mortgage	Market Price		ee
Market price ownership		Schedule of the Property and type of building	amount	Land	Building	Total

SCHEDULE-C

REAL ESTATES (UNENCUMBERED)

Location and tenure	Area of land	Description and Schedule	Market Price		
of ownership		of the property and type of building	Land	Building	Total

DECLARATION

(a) I do hereby declare that I have/do not have liabilities to any Bank/DFIs other than of the abovenamed Banks/DFIs in my name or in the name of any company/concern in which I hold interest;
(b) I do hereby declare that the above named assets are owned by me; and
(c) I do hereby declare that my Income Tax (Payer's) Identification Number (TIN) is/are and Income Tax liabilities is/are clear up to the assessment year (photo copies of tax payment documents is/are enclosed).
The undersigned certifies that the information furnished herein is true and correct.
Date : Signature of the Sponsor/Director
Note: Please use additional sheets/papers, if necessary.