









## PM Vishwakarma

(Registration Form)

**Personal Details** 

Full Name Father/Spouse Name Date Of Birth

Gautam Debnath Nani Gopal Debnath 20-10-1989

Marital Status Gender Category

Married Male OBC

Divyangjan Business in same state?

No No

Business in same district? Minority?

No No

**Contact Details** 

Mobile No. Aadhaar No. PAN Card

8638615049 XXXXXXX8969 N.A.

**Family Details** 

Ration Card No.

N.A.

NameRelationshipAadhaar No.ANAMIKA DEBNATHWIFExxxxxxxxx1466

Aadhaar Address			
Aadhaar Address			
C/o: C/O: Nani Gopal Debnath House: 288 Loc: Hailakandi W/No-16 PO-Lakshmisahar vtc: Hailakandi Subdist: Hailakandi Street: Indra Nagar Colony State: Assam po: Hailakandi pc: 788151 dist: Hailakandi Country: India			
State	District		Pin code
ASSAM	HAILAKANDI		788151
Do you Come under Gram Panchayat?			Name of ULB
No			Hailakandi
Current Address			
Current Address			
C/o: C/O: Nani Gopal Debnath House: 288 Loc: Hailakandi W/No-16 PO-Lakshmisahar vtc: Hailakandi Subdist: Hailakandi Street: Indra Nagar Colony State: Assam po: Hailakandi pc: 788151 dist: Hailakandi Country: India			
State	District		Pin code
ASSAM	HAILAKANDI		788151
Do you Come under Gram Panchayat?			Name of ULB
No			N.A.
Profession/Trade Details			
Profession / Trade Name		Sub Category	
Goldsmith (Sunar)			
Business Address			
C/o: C/O: Nani Gopal Debnath House: 288 Loc: Hailakandi W/No-16 PO-Lakshmisahar vtc: Hailakandi Subdist: Hailakandi Street: Indra Nagar Colony State: Assam po: Hailakandi pc: 788151 dist: Hailakandi Country: India			
Business State		Business District	
ASSAM		HAILAKANDI	

Saving Bank Details

Name of Bank IFSC Code

Name of Branch

**Indusind Bank** 

INDB0000711

HAILAKANDI

Account No.

Confirm Account No.

XXXXXXXXXXXXXX5647

100063225647

**Credit Support** 

Do you want Credit Support? Loan Amount Required (1st Tranche) Preferred Bank to Take Loan

Yes 100000 Indusind Bank

HAILAKANDI Yes Yes

Working Capital / Operating Expanses Business Expansion Outstanding Amount (in Rs.)

No Yes N.A.

Existing Loan Monthly EMI Amount (in Rs.) Total Monthly Family Income (in Rs.)

N.A. N.A. N.A.

**Digital Incentive Details** 

Are you Digitally Active? UPI ID UPI ID UPI ID Linked Mobile Number

No N.A. N.A.

**Skill Training** 

You are eligible for skill training for below training programes.

- Basic (5 Days) Skill Training
- Advance (15 Days) Skill Training

**Tool Kit** 

Once you are registered and skill training certified you will be given a grant of ₹15,000

**Marketing Support** 

Marketing Support question that applies to your business expansion

**Logistics support Required** 

**Brand Building Support Required** 

## **Declaration Details**

## **Declaration and Authorization**

- 1. I hereby declare that I am engaged in the trade as indicated in the application form.
- 2. I hereby declare that apart from myself, no other member of my family has registered for PM Vishwakarma and that no member of my family is in government service.
- 3. I have no objection to authenticate my Aadhaar number, share the same with other Ministries / Departments under the Government of India or the State Government for the purpose of extension of benefits under any of their Schemes, carry out e-KYC and accessing my credit history & credit score from credit bureau by the lenders and their authorized agents. The consent and purpose of collecting Aadhaar has been explained to me in local language. MoMSME/Lending Institution has informed me that my Aadhaar submitted herewith shall not be used for any purpose other than mentioned above, or as per requirements of law. I have been informed that this consent and my Aadhaar will be stored along with my account details with MoMSME or their authorised agent as per the extant law.
- 4. I hereby agree that my application may also be processed for availing Udyam Assist Certification which will enable me for Priority Sector Lending (PSL) benefits.
- 5. I hereby declare that information given above is true to the best of my knowledge. I am well aware of the fact that, if the information given by me is proved false/not true, I will be liable for action as per the law. Also, all benefits shall be summarily withdrawn.

Date: 10/12/2023 Signature of Applicant(s)

Place: HAILAKANDI