









PM Vishwakarma

(Registration Form)

Personal Details

Full Name Father/Spouse Name Date Of Birth

Shekhar Goala 21-11-1994

Marital Status Gender Category

Unmarried Male OBC

Divyangjan Business in same state?

No No

Business in same district? Minority?

No No

Contact Details

Mobile No. Aadhaar No. PAN Card

9859081202 XXXXXXXX4553 N.A.

Family Details

Ration Card No.

N.A.

NameRelationshipAadhaar No.SHANTI GOALASELFxxxxxxxxx0725AMBIKA GOALAHUSBANDxxxxxxxxx7000PRITY GOALADAUGHTERxxxxxxxxx1494PRABHATI GOALADAUGHTERxxxxxxxxx2837

Aadhaar Address		
Aadhaar Address		
C/o: C/O: Ambika Goala Loc: PO - CHANDPUR WEST vtc: Chakchandpur Subdist: Hailakandi Street: VILL - SERISPORE T.E State: Assam po: Lakshmisahar pc: 788152 dist: Hailakandi Country: India		
State	District	Pin code
ASSAM	HAILAKANDI	788152
Do you Come under Gram Panchayat?		
Yes		
Block	Gram Panchayat	
HAILAKANDI	SERISPUR	
Current Address		
Current Address		
C/o: C/O: Ambika Goala Loc: PO - CHANDPUR WEST vtc: Chakchandpur Subdist: Hailakandi Street: VILL - SERISPORE T.E State: Assam po: Lakshmisahar pc: 788152 dist: Hailakandi Country: India		
State	District	Pin code
ASSAM	HAILAKANDI	788152
Do you Come under Gram Panchayat?		
Yes		
Block	Gram Panchayat	
N.A.	N.A.	

Profession/Trade Details

Profession / Trade Name

Sub Category

Masons (Mistri)

Business Address

C/o: C/O: Ambika Goala Loc: PO - CHANDPUR WEST vtc: Chakchandpur Subdist: Hailakandi Street: VILL - SERISPORE T.E State: Assam po: Lakshmisahar pc: 788152 dist: Hailakandi Country: India

Business District Business State

ASSAM HAILAKANDI

Saving Bank Details

Name of Bank IFSC Code Name of Branch

State Bank of India SBIN0000087 HAILAKANDI

Confirm Account No. Account No.

XXXXXXXXXXXXXXX363 20344980363

Credit Support

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

100000 Yes State Bank of India

Preferred Branch to Take Loan Loan Purpose Purchase of Equipments

HAILAKANDI Yes Yes

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

N.A.

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

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

Digital Incentive Details

Are you Digitally Active? **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