	□NEW □ DEDL/	A OFRAERIT			CS	en cone.		
	□ NEW □ REPLA	ACEMENT				P CODE:		
						CSP P	oint Status	
		K	Kiosk Banking		SSA	A /NON-SSA / AL	LOTED URBAN	WARDS
						Date	e:	
	APPLICATION FO	OROPENING OF N	NEW / REPLACED CU	STO	OMER SE	RVICE POI	INT (CSP)	
	<u> </u>							
_	I ne (		lars of the proposed		SP are ç iculars	given belo	w:	
_	1.0111.0	BC Name	NICT TECHNOLGI			חי		
	Business Correspondent(BC) Details	BC Name BC Code	1A760000	ES	TVI. LI	D.		
_	Ouroportaoni(Do, Dotaile	Village/Street:	1/1/0000		Block:			
	l	G.P./Municipality	γ <u>.</u>		Ward:			
<u>)</u>	Address of the CSP	P.O.:	<u>·</u>	$\dashv$	P.S.:			
	proposed to be opened.	District:			PIN: State: West Bengal			
	l	Latitude:			Longitude:			
_	Areas to be covered by	Village / Town	Gram Panchayat / Municipa	ality		Block	Populatio	n Category
	CSP (Only rural	vinage, rem	Oldin Fallonayat, manage	,,,	_	51001.	1 000	ii calogo.,
	and semi-urban areas to be covered							
,	10 00 00 00 00							
_	Name of Link Branch with	Link Branch	Li I Branch Ocale	_	Distance from a near by			
ļ	Code No. and Distance	Name	Link Branch Code		SBI Link Branch	Existing CSP Point	Other Existing Bank	Operator's Residence
	between Link Branch and CSP.			=	Dianon	Polit	LAISHING Dank	
_		Name:						
	l	S/W/D/O:	S/W/D/O:					
	Particulars of proposed CSP Operator with recent	Address(Residence):						
		Vill./Street:			lock:		Ward:	
	color PP photograph dually	G.P./Municipality:			.0.:			
	attested by Bank / Business	P.S.:		Di	District:			
j	Correspondent	PIN:	State: West Bengal		OB:		Age:	
		Edu. Qualification:			No of years of Stay in the present location:			
	Source of funds for business		r business:		lace of Bu	ısiness:	' 000D	
		Marital Status:		_			CIBIL SCOR	E:
		Aadhaar No.:			AN No.:			
		SBI A/C No.:		Br	ranch Nan	ne:		
		Mobile No.:						
		Email ID:						
			r: YES/NO(If yes, nature	of c	qualificatio	on):		
	Experience in Selling Financial Products?							
CSP's existing banking arrangements:  Details of close relative having availed CSP.								
	Signature of Proposed CSP Operator	(If Yes, mention CSP Code):						
	l	Previous CSP code deletion of self/family members? (If Yes, mention CSP Code):						
	Connectivity Issue:		1 0000).					
_	What is the cash balance you are ready to invest for making cash payments / receipt of deposits as CSP?							
	Present Occupation / Business		Monthly Incom		TIPE OF GOP	03113 43 001 .	•	
	Languages known:	, .	Englis		☐ Ben	gali Hir	ndi 🔲 Oth	ore
	Languages known.		Lugui	311	DCII	gan I iii	iui Oti	CIS

Political Affiliation (if any):

Last Designation:

Particulars of liabilities:

Infrastructure available for CSP Location:
Particulars of movable/immovable properties:

Any disciplinary action taken against you while in service?

Name of the office from which retired:

	Busines	s Potential
	Total Population:	No of expected Accounts:
6	No of Households:	Annual business expected:
	Main activity of people:	Potential business through Migrantworkers:

	Details of KYC/Identification /address documents Submitted by CSP operator and verified by Bank & B.C.(Documents are to be enclosed)	Copy verified and signed by BC in respect of each of the documents enclosed.		
		(i)VOTER'S CARD / PASSPORT	(v)PHOTO	
7		(ii)AADHAAR CARD	(vi) POLICE VERIFICATION	
		(iii)PAN CARD	(vii) CIBIL	
		(iv)EDUCATIONAL QUALIFICATION	(viii)	

I certify that the above information is true to the best of my knowledge and belief. I will open my CSP outlet only at approved location by the Bank, otherwise my CSP code may be deleted without any information.

Date:

Place: Signature of the applicant.

#### FOR OFFICE USE

	D 1 (D 1 M /OL: M	
	Remark of Branch Manager / ChiefManager:  All the above particulars and found inorder	
		1) KYC Verified.
		Proposed Site Inspection done and found suitable and viable.
		2) I Toposed Site Inspection done and found suitable and viable.
8		
		Signature of Branch Manager with SS NOStamp & date.
	Due diligence by CM(FI):	
	DSH& R&DB Branches)	
_		
9		
		Signature of CM (FI) (DSH & R&DB Branches) with Stamp &Date.
10		orginators of oil (i.i) (borra rabb branches) mar etamp abate.
	Approved / Rejected – Please advise LHO with valid	
	reason)	
	,	
		Oleman of Danier al Management its attention 2000
		Signature of Regional Manager with stamp & Date

### Annexure - A

Names and occupation of two people to whom reference can be made (KYC documents of referees enclosed)	1) 2)
resident of	REFERENCE  . / Mrshas been a village /town of district in the State of ofyears and has been known to me for period
(Signature)  Name of Referee  Address	
Designation	
resident of	. / Mrshas been a village /town of district in the State of ofyears and has been known to me for period
(Signature)  Name of Referee  Address	
Designation	
Reference from Sarpanch / Mukhiya Inspector / Govt. Teacher.	/ Gazetted Govt. Servant / Post Master / Tahsildar / Police
	Mrs has been a
	for naracter in the area. His photograph is herewith attested and I s
(Signature)	
Name: Address	
(withseal)	Designation

## Annexure - B`

# <u>Declaration by the Applicant for engagement as CSP</u> (to be obtained by Link Branch)

I, Shri / Smt / Mr. / Mrsat		
have applied for engagement as Cus (National / Circle BC), who is workin (location) to provide financial inclusion Branch.	stomer Service Point of M/s <b>NICT Te</b> ng on behalf of State Bank of India,	chnologies Pvt. Ltd. at
I further declare that NICT Technology date. I have been given to learn from money receipts only after generation. Hence, I declare that I shall then according to the BC. I also undertake to before generation of CSP Code. I also to the BC/Bank Official	n the BC that they will do so and proof my CSP Code and prior to due accordingly submit the money receipt aga to submit money receipt aga	ovide me with proper ctivation of the same. ainst the charges paid vices/ goods provider
I understand that the Bank has initiat misleading on the part of all concerned		ances of wrongdoing /
Yours faithfully,		
(Name of CSP) S/W/D/O Address	Place: Date :	
Mobile No: Email address:		

#### Annexure - C

# <u>Declaration by the Applicant for engagement as CSP</u> (to be obtained by CSP Code generating office)

Have applied for engagement as Cus (National / Circle BC), which is (location) to p SBI Branch.	s working on behalf of State I	<del>chnologies Pvt. Ltd.</del> Bank of India, at
I further declare that <b>NICT Technolog</b> date. I have been given to learn from money receipts only after generation Hence, I declare that I shall then according to the BC.	n the BC that they will do so and pro of my CSP Code and prior to due ac	ovide me with proper tivation of the same.
Yours faithfully,		
(Name of CSP) S/D/w/O Address:	Place: Date :	
Mobile No: Email address:		

### **STATE BANK OF INDIA SCORING SHEET FOR CSP**

Name of the Applicant: Category of Applicant:
Part – A: Quantitative Assessment

#	Parameter	Criteria	Marks	Max.	Marks
			_	Marks	Scored
1	Office	i. Nonresidential /	5	5	
		SSA Area			
		ii. Residential	2 5	5	
		iii. Located at central place /	)	5	
		prominent place at the centre	2		
		iv. Located at elsewhere at the			
		centre			
2	Computer Knowledge	i. Yes	1	1	
		ii. No	0		
3	PVR	i. Submitted/ acceptable	1	1	
		ii. Not submitted/ Not			
		acceptable	0		
4	Reference of 2	i. Submitted/ acceptable	1	1	
	persons known to	ii. Not submitted/ Not acceptable			
	bank		0		
5	Distance	i. Distance between the place of	2	2	
	_	business of a BC & base branch			
	area of	(Link) is within 5 kms			
	operation	ii. Beyond 5 km	1		
6	CBIL SCORE	i. No Default	3	3	
		ii. Default	0		
7	Education	i. Graduate & above	3	3	
		ii. 12 <sup>th</sup> class pass	2		
8	Infrastructure	i. Owned premises	2	2	
		ii. Rented premised	1		
9	Experience in	i. YES	2	2	
	Selling Financial	ii. NO	0		
	Products				
		Total		25	

(Minimum eligible quantitative score: 12.5 i.e. 50%)

**CIBIL DEFAULT - NOT ELIGIBLE** 

# **INSPECTION REPORT BY THE LINK BRANCH**

We forward herewith an application for allotment of CSP in the name of(name of CSP Operator), received from(name of BC).
<ul> <li>We have scrutinized the application/proposal and found in order as per the Master Circular for allotment of Csp.</li> </ul>
•We have verified the KYC along with other related documents.
•We have inspected the proposed location of the Csp as per the application submitted.
<ul> <li>One copy of the proposal/application and verified copies of documents etc, including police verification report is kept at the branch.</li> </ul>
We therefore, recommend for allotment of CSP at(name of csp operator) since it is a viable proposition. BM, to ensure that csp outlet open in the location approved by the LHO.
•Distance from linked branch to csp location:
<ul> <li>Distance from resident to csp locationWhether is it commutable. Y/N BM has to ensure that no irregularity should be observed for opening /closing of csp outlet in time. Time taken from resident to location</li></ul>
Branch Manager.