SOFTLOGIC FINANCE PLC

No 13, De Fonseka Place, Colombo 04 TEL: 112-359700, 112-359600 WEB: www.softlogicfinance.lk



APPLICATION FOR RECEIVABLE FINANCE / FACTORING / INVOICE DISCOUNTING FACILITY

APPLICANTS INFORMATION											
NAME OF BUSINES	S ESTABLISHMENT										
LEGAL FORM (X appropriate box)		PROPRIETORSHIP		PARTNERSHIP	LTD. LIABILITY CO.]					
BUSINESS REGISTE	RATION NO.		VAT	REGISTRATION NO.							
DATE OF REGISTRAT	TION/INCORPORATION										
REGISTERED BUSINESS ADDRESS											
LOCATION OF FACTORY & STORES											
NATURE OF BUSINE	ESS										
CONTACT NOS.	TELEPHONE										
	FAX										
CONTACT PERSON	& DESIGNATION										
NATURE OF SERV	/ICE REQUIRED (X a	opropriate box)									
FUNDING LIMIT REC	QUIRED (RS.)										
HAVE DEBTS BEEN THIRD PARTY	ASSIGNED TO A	YES		NO							
ASSIGNMENT OF DEBTS DEBT COLLECTION LEDGER ADMINISTRATION		ENTIRE PORTFOLIO		SELECTED CLIENTS							
		YES YES		NO NO							
CREDIT TERMS ON	ASSIGNED DEBTS	30 DAYS		60 DAYS	90 DAYS]					
		OTHER (Specify)									
SECURITY PROPOS (Collateral Offered)	SED										
PERSONAL GUAR	ANTEES		NIC. NO.	NIC. NO.							
]							
				J							
DETAILS OF EXIS	TING FACILITIES W	TH SOFTLOGIC FINANC									
NATURE OF FACILITY		ORIGINAL AMOUNT (R	s.) BALANCE O/S (Rs.)		SECURITY						
CAPITAL STRUCT	URE										
AUTHORISED CAPITAL											
ISSUED/PAID UP CAPITAL											
MANAGEMENT											
Details of Proprieto	r/Partner's/Director's										
NAME			STAKE (%)	NIC. NO.	CONTACT NO.						
	· · · · · · · · · · · · · · · · · · ·										

SUBSIDIARIES/AS	SOCIATE COMPANIES										
1	NAME		ADDRESS		NATUI	RE OF BUSINESS		i			
								ı			
DETAILS OF BANK	CACCOUNTS										
	BANK		BRANCH	Ι	ACCOUNT TYPE	ACCOUNT NO.					
	D/ WW		BIOTION		TOOCONT TITE	ACCOUNT NO.		ı			
								I			
DETAILS OF AUDI	TORS										
	Г										
NAME CONTACT PERSON	}										
TELEPHONE NO.'S	ľ										
DETAILS OF CREE	OIT FACILITIES WITH OT	HER INST	TITUTIONS								
NAME OF INSTITUTION		NATU	IRE OF FACILITY	ORIC	BALANCE O/S (Rs.)		SECURITY				
ASSETS OWNED B	BY APPLICANT										
LAND & PROPERT	Υ										
Name	e & Location of Property		Mortgaged to (if a	ny)	Deed No / Date & Notary		Estimated Value (Rs.)				
			<u> </u>			ļ					
MOTOR VEHICLES											
	Registration no.		Make			Value	Leased	from/Mortgaged to			
DOCUMENTS TO 1	BE FORWARDED TOGET	THED WIT	I THE APPLICATION								
			H THE APPLICATIO	IN							
I/We enclose herew	rith the following documen										
	Memorandum & Articles of Association										
	Copy of Certificate of Business Registration/Incorporation/Trading Certificate										
	Bank statements for the										
	Copy of latest form 48 fi				oroo vooro						
	Audited financial statem Turnover tax paying in s			e pasi i	nee years						
	List of Debtors (name, a			turnove	r for last 6 months)						
	Age analysis of Debtors			turriove	rior last o montrio,						
	Copies of applicant's an										
	Copy of VAT Registration										
	1										
PARTICULARS OF	TWO PERSONS FROM	WHOM W	E CAN OBTAIN A RI	EFERE	NCE ABOUT YOU/T	HE COMPANY					
	•		1				2				
NAME ADDRESS											
OCCUPATION											
TELEPHONE NO.											
DECLARATION											
	nformation provided in this A							e of all			
	y way whatsoever in this appove particulars from the ban					ecessary for credit assess	ment or				
Commission of the ab	ovo particulais IIOIII lile Dall	no, audituis	and other parties halfle	o abuv	or any onier source.						
	application remains the prop		-			ed facility is granted or					
	PLC reserves the right to re	geor mis app	piloation without stating	апу геа	sons whatsoever.						
Aut	thorised Signatory		Name	& Desi	gnation	NIC. No.		Date			

Submitted to:

Date: