Company Profile

1.	Name of the Company								
2.	Address of the Registered Office								
	The area of the region of the control								
					1	1	1	1	1
	BI N		PIN				<u> </u>		
	Phone Nos.		Fax No.			e-mai	l addre	ess	
3.	Name of the State in which the comp	nany is							
O.	registered	carry to							
4.	Address of the Corporate/ Head Off	ice							
	•								
			PIN						
	Phone Nos.		Fax No.			e-mai	l addre	ess	
_	B-t(l								
5.	Date of Incorporation								
6.	Date of Commencement of Busines	S							
7.	Name and Residential Address of : i) Chairman								
	ii) Managing Director/ CEO								
8.	Is it a Government Company (Please	e tick) :		Yes		I	No		
9.	Status of the company (Please tick)	<u>:</u>							
	(i) Public Ltd.					eemed)	
		(iii) Private L			td. (iv) Joint Venture				
10.	Financial Year of the Company								
11.	Nature of business								
12.	Status of registration with RBI								
12.	i) Number and Date of Certificate of								
	issued by RBI								
	100000 57 1151								
	ii) If not registered, indicate whether								
	submitted for registration is rejected/								
13.	Classification of the Company (if giv								
	Bank as HP / Leasing / Loan / Invest								
	etc. and reference number and date								
	classification)								
14.	Credit rating:								
	i) Rating assigned								
	ii) Date of rating								
	iii) Name of the Rating Agency	ourrod oingo							
	iv) Whether any change has oc the last rating (details)	curred SINCE							
	i ide iasi lailiu welalist								
15									
15.	Number of Branches / Offices. (Please enclose a list of names and	addresses							

	thereof in the format given below as per Note 1)	
16.	If a subsidiary company, please indicate the name and address of the holding company	
17.	If the company is having subsidiaries / associate companies, number thereof. (Please enclose a list of names, addresses, Names of Directors and particulars of business activities thereof in the format given below as per Note 2)	
18.	If a Joint Venture, name and address of the promoting institution(s)	
19.	Name of the Company's statutory auditors with address and phone numbers	
20.	Name(s) of the company's Bankers with addresses and phone numbers.	

Note (1): Format for furnishing details of branches:

Sr.No.	Name of the branch	Date of opening	Address	City	District	State	Amount of public deposit
	Total No. of Branches						Total Public Deposits of all the branches (Amount)
							Total Public Deposits as per balance sheet dated(Amount)

Note (2): Format for furnishing details of the subsidiaries:

Sr. No.	Name of the subsidiary	Address	Name of the Directors	Business Activity