

**(on Bank letter head)**  
(To be submitted to the concerned NABARD, Regional Office)

**Annexure 1**

**Claim format support under FIF for implementation of Core Banking solution to rural Cooperative Banks- (for banks which have not received any grant support from any agency)**

SN	Particulars	Details
1	Name of the Bank	
2.	Whether bank has a banking license	Yes/No:
3.	Name of the CBS vendor	
4.	Percentage of CRAR as on 31 March 2015. (should not be less than 7%)	
5.	Whether Bank in profit for at least two of the last three years	Yes/No:
6.	Whether bank has a Board approved IT and IS policy in place	Yes/No:
7.	Whether bank a member of Credit Information Companies	Yes/No:
8.	Whether bank providing SMS alerts to its customers in respect of financial transactions.	Yes/No:
9.	Percentage of borrowers from small and marginal farmers, SC/ST, other weaker sections, rural artisans to the total borrowing members. (should be at least 40%) (DCCBs / StCBs in two tier structure)	
10.	Whether bank provides RTGS/NEFT facility	Yes/No:
11.	Whether bank operating fully on CBS	Yes/No:
12.	Whether bank has started issuing RuPay debit cards to its customers.	Yes/No:
13.	Number of Branches	
14	a) Total cost for implementation of CBS under ownership model	
	OR	
	b) ASP charges paid by the bank to the vendor till 31 January 2016.	
15.	Amount claimed Rs. 2 lakh X no. of branches or Sn 14(a) / (b) whichever is lower	

We certify that the above mentioned amount was incurred for the implementation of core banking solution in ..... number of branches in the bank. The expenditure for

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reimbursement involves the cost for hardware, software and connectivity components required specifically for CBS implementation and not for any other purpose. **We also certify that no grant/support has been received from any State Government/other institution for the implementation of CBS.**

**We undertake that we will maintain a minimum CRAR of 7% and strive to reach 9% CRAR as on 31 March 2017.**

The related expenditure bills and vouchers will be preserved by us for a period of three years for verification by NABARD at any point of time. We request you to sanction and reimburse an amount of Rs .....(Rupees ..... ) towards support to licensed rural Cooperative Banks for implementation of Core Banking Solution under FIF.

Place:

Date:

Seal and Signature of the  
Authorized Officer