OMB No. 3048-0023 Expires 08/31/2010

# EXPORT IMPORT BANK OF THE UNITED STATES

SHORT-TERM MULTI-BUYER EXPORT CREDIT INSURANCE POLICY APPLICATION

Applicant:		dba:		
Address:	Fax:		*** 1 **	
Phone:	Fax:	E-Mail:	Website:	
Contact.	1 IIIC	L'-Maii.	I HOHC.	
Brokerage:		_ Broker Contact:		
	ority ownership of your business re			
How did you learn Ex-Im Bank Cit	about Ex-Im Bank? Ex-Im E y/State Partner Other (describ	Bank Regional OfficeBro	okerBank U.S. Export	t Assistance Center
1. Primary reason fo	or application: Trisk mitigation	financing extend mor	re competitive terms	
2. Do you have a cro	edit line with a financial institution	(exclude overdraft protection	n and credit cards)	ES NO
3. Do you have an S	SBA or Ex-Im Bank Working Capit	tal Loan or are you applying	for one? SBA YI YI EXIM YI	
4. Total number of y	your employees and those at compa	nnies with whom you are affi	liated:	
5. Average total of a	annual export credit sales over the	ast two years for you and yo	ur affiliates:\$	
	sure export credit sales made by your # 24. Answers to all remaining qu			ed" eligibility
7. Product and/or ser	rvices to be exported & NAICS (if I	known):		
8. Do you sell Capit	al Goods to foreign manufacturers	or producers?	☐ NO (if yes, atta	ach explanation)
9. Are the products t	o be covered under the policy:			
<ul> <li>Made or re</li> <li>Shipped fro</li> <li>Sold to Mil</li> <li>Used to sup</li> <li>Environme</li> <li>Supporting</li> <li>On the U.S</li> </ul>	red or reconditioned in the U.S.? conditioned with more than 50% Upon the U.S.? litary entities or Security Forces? poport Nuclear Energy? intally Beneficial? Renewable Energy? Munitions List? of title 22 of the Code of Federal R	Yes	0 0 es es es 0	
support, see Ex-Im's them under Section 2	their guarantors (if any), and end us Country Limitation Schedule (CI 201 Trade Act of 1974. For a list or Countervailing Sanctions).	LS) at <u>www.exim.gov</u> . There	e may not be trade measures or s	sanctions against
10. Policy Payment	Limit Requested: \$	(maximum export o	credit receivables outstanding at	any one time)
11. Buyer Types: _	% Manufacturers% Wh	olesalers/Traders% Re	etailers%Service Provide	rs
12. Projected # of b	ouyers to whom you will offer expo	ort credit terms:		
13. Enter the percen	ntage of export credit sales by payn	nent and term type projected	for the next twelve months:	

## **Payment Type**

Sight

1-30

## Terms (# of days)

(must total 100%, collectively) 31-60 61-90 91-120 121-180 181-270 271-360

(enter "Cash Against Documents" in the "Sight" column and "Open account/Draft" row)

14. Export Credit Portfolio (enter amounts for the next 12 months. If more than 9 countries, enter the balance in "all other").

Country Exp	ort Credit Sales	Country Exp	ort Credit Sales
\$		\$	
\$		\$	
\$		\$	
\$		\$	
	\$	"all other countries"	\$

15.	Identify your three	largest buyers:				
Nar			Country		Export Credit Sales \$ \$ \$	<u> </u>
16.	Year you began:		it terms (other than cas	h in advance or c	onfirmed letters of	credit)?
17. For the last three years what were your total export credit: (include factored or insured receivables and attach any comments)  write-offs  # of accounts written-off			\$			
18.	Highest average an	mount of export receivab	oles outstanding over th	e last twelve mor	nths: \$	
19.	Total export receiv	vables outstanding: \$	at _	/(date	should be within 3	30 days of the application)
	\$current	\$1-60 days past due	\$61-90 days past due	\$91-180 days pa	sast due	days past due
20.	Number of buyers	past due more than 60 d	ays for \$10,000 or mor	e:		
	For each buyer over due, due date, and r		10,000 or more, attach	an explanation in	ncluding name of bu	uyer, country, amount past
		credit decision maker(s)	Title(s):		Years of Credit Experience	Years of Foreign Credit Exp.

- 23. Please submit the following as Attachments:
  - Credit Report on your company dated within 6 months of the application or attach a check for \$35 payable to Ex-Im Bank.
  - Your financial statements for the two most recent completed fiscal years (with notes if available)
  - Descriptive product brochures (if available).
  - Other pertinent information you wish to include.

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24. <b>Special Coverages</b> Required:	If "none" check \[ \] N/A			
and each affiliate must in	<b>Insureds (ANI's).</b> Credit decisions of each voice export credit sales in their own name (-25 should include export sales of prospecti	(or tradestyle); if either is a		
Are the products of each affili	ate the same as the applicant's products list	ed in question 4 of this app	olication?	
Affiliate Company/Trade style	Street Address/City / State / Country	NAICS Code	Relationship to Applicant	
those temporarily domicil  Enhanced Assignment of offered to lenders willing  Written bank reference  written trade reference  For applications with	ded overseas, and billed (invoiced) separately of small business insurance policy proceeds. to finance Ex-Im Bank insured receivables. to describing your relationship to date and sonces from principal commercial suppliers. It policy limits over \$500,000, financial state	y from any product sales. This is exporter performa Applicant Please Attacl ize of existing credit line.	nce risk protection that may be	
25. Please complete the <b>Exclusion</b>	<b>Worksheet on page 5</b> to request coverage	exclusion of any export co	redit sales.	
	CERTIFICATIONS	\$		
from participating in, or voluntarily final determination still pending, considerable Regulations, d) delinquent on any execution of this application; or e) certification, permitting participating paragraph.  The applicant further certifies that services to be exported in the transineligible from participating in, or	it, nor its Principals, have within the past 3 y excluded from participation in, a Covered ) indicted, convicted or had a civil judgmen substantial debts owed to the U.S. Governmenthe undersigned has received a written state on in this Covered Transaction despite an intensection described herein, with any individual voluntarily excluded from participation in the Ex-Im Bank Debarment Regulations.	Transaction, b) formally per rendered against it for an ent or its agencies or instrument of exception from Emability to make certification to any agreements, in contact or entity that has been a Covered Transaction. The	proposed for debarment, with a y of the offenses listed in the umentalities as of the date of x-Im Bank attached to this ons a) through d) in this a nection with the products and debarred, suspended, declared ne term "Covered Transaction"	
(1) the Export-Import Bank's Non-OMB Guidelines to Agencies on C Debarment, Suspension, and Inelig of the publicly available debarment	procurement Debarment and Suspension re Government wide Debarment and Suspension gibility provisions of the Federal Acquisition It lists of the following international finance European Bank for Reconstruction and Deve	gulations, 2 C.F.R. Part 35 in (Non-procurement), 2 C in Regulation, 48 C.F.R. Thial institutions: World Ban	513, adopting by reference, the E.F.R. Part 180; and (2) the he applicant is not listed on any k Group, African Development	
In addition, the applicant certifies that neither the applicant nor anyone acting on its behalf, such as agents, has engaged, or will engage, in any activity in connection with this transaction that is a violation of the Foreign Corrupt Practices Act of 1977, 15 U.S.C. 78dd-1 et seq. (which provides for civil and criminal penalties against companies and individuals who directly or indirectly make or facilitate corrupt payments to foreign officials to obtain or keep business). Further, the applicant has not engaged, and will not engage, in any activity in connection with this transaction that is a violation of the Arms Export Control Act, 22 U.S.C. 2751 et seq., the International Emergency Economic Powers Act, 50 U.S.C. 1701 et seq., or the Export Administration Act of 1979, 50 U.S.C. 2401 et seq. The applicant has not been found by a court of the United States to be in violation of any of these statutes within the preceding 12 months, and to the best of its knowledge, the performance by the parties to this transaction of their respective obligations does not violate any other applicable law.				
	the applicant nor anyone acting on its behale 5 years, convicted in any court or subject to			
best of its knowledge and belief, at herein become untrue, Ex-Im Bank	the representation made and the facts stated and it has not misrepresented or omitted any will be promptly informed of such changes alties for fraud against the U.S. Governmen	material facts, and if any o s. The applicant further ur	of the certifications made aderstands that these	

(Print Name and Title)

EIB92-50 Revised 1/2007

(Signature)

(Date)

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## SMALL BUSINESS POLICIES APPLICANT CERTIFICATION

"We are an entity which **together with our affiliates** had **average annual export credit sales** during our preceding two fiscal years not exceeding \$5,000,000, excluding sales made on terms of confirmed irrevocable letters of credit (CILC) or cash in advance (CIA)."

#### NOTICES

The applicant is hereby notified that information requested by this application is done so under authority of the Export-Import Bank Act of 1945, as amended (12 U. S.C. 635 et seq.); provision of this information is mandatory and failure to provide the requested information may result in Ex-Im Bank being unable to determine eligibility for support. The information provided will be reviewed to determine the participants' ability to perform and pay under the transaction referenced in this application. Ex-Im Bank may not require the information and applicants are not required to provide in formation requested in this application unless a currently valid OMB control number is displayed on this form (see upper right of each page).

**Public Burden Stateme nt:** Rep orting for this collection of in formation is estimated to average 1 hour per response, in cluding reviewing instructions, searching data sources, gathering information, completing, and reviewing the application. Send comments regarding the burden estimate, including suggestions for reducing it, to Office of Management and Budget, Paperwork Reduction Project OMB# 3048-0009, Washington, D.C. 20503.

Send, or ask your insurance broker or city/state participant to review and send this application to the Ex-Im Bank Regional Office nearest you. Please refer to Ex-Im Bank's website at <a href="http://www.exim.gov">http://www.exim.gov</a> for Regional Office addresses. Alternatively, email your application and attachments to Ex-Im Bank at <a href="mailto:exim.applications@exim.gov">exim.gov</a>, or fax it to (202) 565-3675.

Ex-Im Bank reserves the right to request additional information upon review of the application. Please refer to Ex-Im Bank's Short Term Credit Standards (EIB 99-09) to determine the likelihood of approval of a policy.