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# Qualification Application for CCC Export Credit Guarantee Program

Fields marked with an asterisk (\*) are required

## Program Applying For:

\* Please check all that apply:

- Applying for the CCC GSM-102 Export Credit Guarantee Program and Facility Guarantee Program in accordance with 7 C.F.R. Section 1493.30 1493.420, eligibility criteria for participation.
- Applying for the CCC Facility Guarantee Program (FGP) in accordance with 7 C.F.R. Section 1493.220, eligibility criteria for participation.

### Name and Address of Applicant's U.S. Office

1. \* Company Name:

\* Street Address:  P.O. Box:

\* City:  \* State:

\* Zip (Postal) Code:  -

\* Telephone:  Fax:

\* E-Mail:

\* Contact Name:

\* Select One:  Business  Private Residence

### Name and Address of Applicant's Headquarters Office (to be completed only if different from above)

2. Company Name:

Street Address:  P.O. Box:

City:  State:

Zip Code:  -

(Postal Code):

Country Name:

Telephone:  (if United States) Fax:  (if United States)

### Name and Address of U.S. Agent for the Service of Process (to be completed only if Exporter has no U.S. office)

3. Name:

Street Address:  P.O. Box:

City:  State:

Zip Code:  -

(Postal Code):

Telephone:  Fax:

E-Mail:

Contact Name:

3. Select One:  Business  Private Residence

**Applicant's Legal Form of Doing Business**

\* Type of Business:

4. If "Other", please specify:

**Country of Incorporation Where Legally Registered (please select a U.S. State if country is the United States)**

5. \* Country Name:  U.S. State:

**Required Exporter Information**

Business Web Site:

\* Dun & Bradstreet (DUNS) Number (Site specific):

\* Tax ID Number:

Is the applicant a "small or medium enterprise" (SME)? An SME is an enterprise, as described by the U.S. Census Bureau, with 500 or fewer employees. For the U.S. Census Bureau's definition of an enterprise, visit their [web site](#):  No  Yes

List any related companies (i.e. affiliates, subsidiaries, or companies otherwise related through common ownership) currently qualified to participate in CCC export programs:

Nature of applicant's business (i.e. agricultural producer, commodity trader, consulting firm, etc.):

**FGP Applicants:**  
Explanation of the applicant's experience/history with agricultural commodities or products for the preceding three years, including a description of the commodities:

**GSM-102 Applicants:**  
Explanation of the applicant's experience/history with exporting U.S. agricultural commodities, including the number of years involved in exporting, types of products exported and destination of exports for the preceding three years:

6. **Certification Statements**

\* Please make one of the following certifications:  
 "I certify that the above named applicant has not participated in any U.S. Government programs, contracts or agreements during the past three years."  
 "I certify that the above named applicant has participated in U.S. Government programs, contracts or agreements during the past three years."

\* Please describe prior participation:

\* Applicant must certify to the following statement(s) by selecting the block(s) below:  
 All [Section 1493.250\(a\)](#) certifications are being made in this document. (GSM-FGP)  
 All [Section 1493.60\(a\)](#) certifications are being made in this document. (GSM-102)

7. \* Name and Position of Individual Submitting Form:

7. (This form must be submitted by an "officer" of the Company making application. Please also fax a copy of your Articles of Incorporation to (202) 720

 

*According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid number. The valid OMB control number for this information collection is 0551-0004. The time required to complete this information is estimated to average 30 minutes per response, including reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.*