

FOR DFC REFERENCE ONLY – THIS FORM IS TO BE COMPLETED ONLINE – PAPER SUBMISSIONS WILL NOT BE ACCEPTED

Request for Registration for Political Risk Insurance (DFC-002)

OMB No. 3015-0008

Expiration Date: 8/31/2022

United States International Development Finance Corporation

1100 New York Avenue, NW Washington, DC 20527-0001 An Agency of the United States Government

Responses to questions which call for estimates or projections should take the form of good faith statements made to the best of the applicant's knowledge and belief. Statements of fact provided in this document must be accurate as of the date of submission. Anyone who knowingly makes a false statement with the intent to influence DFC's guarantees, loans, or other investments may be criminally prosecuted. Such false statements are also grounds for DFC to terminate a commitment or declare a contract default. These rights are in addition to any other rights or remedies available to United States government. Neither submission nor acceptance of this application implies that the proposed transaction is eligible for support or that support will be provided.

When trade secrets or confidential commercial or financial information are submitted to the agency in this collection, they will be held in confidence to the extent permitted by applicable law including the Freedom of Information Act ("FOIA") at 5 U.S.C. § 552(b)(4) and the agency's implementing regulations at 22 C.F.R. Part 706.

Paperwork Reduction Act Notice: This information is required to obtain or retain benefits. Federal agencies may not collect information unless a valid OMB Control Number with an expiration date that has not expired is displayed. The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing this burden, to Agency Clearance Officer, Records Management, United States International Development Corporation, 1100 New York Avenue, NW, Washington, DC, 20527 and to the DFC Desk Officer at the Office of Information and Regulatory Affairs, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, DC 20503.

Part 1: Investor(s) Information						
1. Investor*:						
Contact Name:	Title:					
Address:						
City:	State:	Zip/Postal Code:				
Country:	Telephone:					
E-Mail:	Web site:					
Parent Company Name (if a	applicable)					
Applicant's (or parent company's) most recent consolidated annual sales (or stockholder's equity for non-industrial companies):						
2. Investor is:						
A citizen of []; or A company organized in [].						
3. How did you hear about DFC?						
DFC sponsored workshop or event	DFC Web site or other social media (Facebook, Twitter, LinkedIn)	Other US Government Agency (e.g. State/Embassy, Commerce, Treasury, TDA, SBA, USEXIM, etc.)				
☐ DFC speaker at an industry event	☐ Insurance Broker	Current or former DFC clients				
\Box Other (please specify)						

Part 2: Project Information				
4. Where will the project be located?				
City: Country:				
5. Please describe the project (a) What products/services will be rendered?				
(b) Will you have a contract with the host government to provide these products or services? ☐ Yes ☐ No (c) The enterprise you will be investing in is: ☐ New ☐ An existing business to be expanded or improved. (d) Does the host government have any investment in the enterprise? ☐ Yes ☐ No If Yes, the host government owns: (e) Could this project result in significant adverse impact on U.S. employment*? ☐ Yes ☐ No (f) Could this project result in significant adverse environmental impacts? ☐ Yes ☐ No				
Part 3: Investment to be Made				
6. Investment to be Made (a) Total amount of investment: (b) Estimated date of investment:				
(c) Has any portion of this investment been made or irrevocably committed as of the date of registration? Yes No If yes, please explain and indicate when the investment was made. (d) Total project cost:				

^{*}The DFC does not support projects that outsource U.S. jobs or relocate existing U.S. facilities.

(e) What do you plan to insure?						
		Investors		Contractors & Exporters		
□ E	equity	Loan Guaranty	∐Bid Bond	Contract Disputes		
	Debt	☐ Technical Assistance	Assets	Performance/Advance Payment Guaranties		
	ease		☐ Other			
	Other					
Part 4: Insurance Broker, Primary Insurer, Reinsurer, or Agent						
7. This reg	istration	is being submitted:				
By the I	By the Investor					
<u>OR</u>						
By the P	☐ By the Primary Insurer or Reinsurer					
<u>OR</u>	<u>OR</u>					
By a lice	ensed in	surance broker or broker				
agency	agency					
□ OR						
By an ag	gent*					
Conta	ct:		Title	:		
Addre	ss:					
Cit	y:		State:	Zip/Postal Code:		
Count	ry:		Telephone:			
∃-Ma	il:					
*An agent assists the investor without engaging in activities (including, <u>inter alia</u> , the solicitation, negotiation or placement of insurance) for which a license is required pursuant to applicable State or Federal insurance regulation.						

8. Who will complete the DFC insurance application (Form 003)?					
☐ Investor					
☐ Primary Insurer					
Licensed insurance broker or brokerage agency					
☐ Agent					
Part 5: Signature					
Investor Signature:	Date:				