



**Export-Import  
Bank of the  
United States**

**APPLICATION FOR  
CREDIT GUARANTEE  
FACILITY AND LONG-  
TERM DIRECT LOAN  
OR GUARANTEE**

This application is for requesting financing of a Credit Guarantee Facility (any dollar amount and tenor) and direct loan and guarantee transactions with financed amounts over \$25 million (excluding financed exposure fee), typically with tenors over seven years. It may also be used for Large Aircraft, Limited Recourse Project and Structured Financing, Domestic Financing, and Tied Aid. Additional information on how to apply for an EXIM transaction can be found at EXIM's website: <https://www.exim.gov/resources/applications-forms/applying>.

Email this completed application to [exim.applications@exim.gov](mailto:exim.applications@exim.gov). Please note that applications must be a signed and dated PDF and include all required application attachments.

**COMMITMENT OR FINANCING TYPE REQUESTED**

- |                |                                                    |                                    |                                               |                                         |
|----------------|----------------------------------------------------|------------------------------------|-----------------------------------------------|-----------------------------------------|
| <b>Product</b> | <input type="checkbox"/> Comprehensive Guarantee   | <input type="checkbox"/> Sovereign | <input type="checkbox"/> Public Non-sovereign | <input type="checkbox"/> Private Sector |
|                | <input type="checkbox"/> Political Risk Guarantee  | <input type="checkbox"/> Sovereign | <input type="checkbox"/> Public Non-sovereign | <input type="checkbox"/> Private Sector |
|                | <input type="checkbox"/> Direct Loan               | <input type="checkbox"/> Sovereign | <input type="checkbox"/> Public Non-sovereign | <input type="checkbox"/> Private Sector |
|                | <input type="checkbox"/> Credit Guarantee Facility | <input type="checkbox"/> Sovereign | <input type="checkbox"/> Public Non-sovereign | <input type="checkbox"/> Private Sector |

New     Renewal

For more information: <https://www.exim.gov/solutions/loan-guarantee/credit-guarantee-facility>

- |                                                 |                                    |                                               |                                         |
|-------------------------------------------------|------------------------------------|-----------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Preliminary Commitment | <input type="checkbox"/> Sovereign | <input type="checkbox"/> Public Non-sovereign | <input type="checkbox"/> Private Sector |
|-------------------------------------------------|------------------------------------|-----------------------------------------------|-----------------------------------------|

A justification for a Preliminary Commitment needs to be attached.

**Conversion of a Preliminary Commitment or a Letter of Interest**

No     Yes    The EXIM reference number is: \_\_\_\_\_

**Resubmission**     Check if this is a resubmission of an application that was previously deemed incomplete or was withdrawn for other reasons. The EXIM reference number is: \_\_\_\_\_

**PARTICIPANTS:**

Items marked with an asterisk (\*) are required fields. Under corporate ownership, provide the name of the ultimate parent company, if there is a corporate owner. For number of employees and sales volume, aggregate for the company and all its affiliates, including corporate owners and subsidiaries.

**Applicant:** The applicant may be any exporter, financial institution, supplier, the primary borrower, buyer or controlling sponsor associated with the transaction.  Check if the applicant has been assisted by a city or state export agency and provide the name of the agency: \_\_\_\_\_

\*Applicant Name: \_\_\_\_\_

Tradestyle: \_\_\_\_\_

\*Business Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Duns No. \_\_\_\_\_ UEI No.<sup>1</sup> \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

<sup>1</sup>A Unique Entity Identifier (UEI) No. is a 12-character unique number assigned to all entities (public and private companies, individuals, institutions or organizations) who must register in SAM.gov to do business with the federal government. If your entity is registered in SAM.gov, your UEI has already been assigned and is viewable in SAM.gov. If you do not have a UEI No., then you must register your entity. Visit <https://sam.gov/content/home> to see if your entity has a UEI No. or to register your entity. A UEI No. is required for the Applicant at time of application and is also required for the Borrower and Lender(s). [NOTE: As the UEI No. process becomes fully clarified, EXIM's instructions will be updated accordingly and more information will be added to assist an Applicant and any other affected transactional parties with this process, but it was not ready prior to submission for OMB review.]

For an Applicant located in the United States, items marked with an asterisk (\*) are required fields.

- \*Woman-owned business: Yes  No  Decline to Answer
- \*Minority-owned business: Yes  No  Decline to Answer
- \*Veteran-owned business: Yes  No  Decline to Answer
- \*Disability-owned business: Yes  No  Decline to Answer

\*Race (One or more boxes may be selected.):

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Other \_\_\_\_\_

\*Ethnicity: Hispanic or Latino  Not Hispanic or Latino

**Exporter:** The “exporter” is the company which is contracting with the Buyer for the sale of the U.S. goods and/or services.  Check if the exporter is the applicant. Otherwise, complete the information below for each exporter including any ancillary service providers. For more information about ancillary services visit: <https://www.exim.gov/solutions/loan-guarantee/ancillary-services>

\*Exporter Name: \_\_\_\_\_

Tradestyle: \_\_\_\_\_

\*Business Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Duns No. \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

\*Corporate Ownership: \_\_\_\_\_

\*Does the Exporter have any affiliates<sup>2</sup>? Yes  No  \*Primary Industry NAICS<sup>3</sup>: \_\_\_\_\_

\*Total Number of Employees: \_\_\_\_\_ \* Annual Sales Volume: \_\_\_\_\_

For an Exporter located in the United States, items marked with an asterisk (\*) are required fields.

- \*Woman-owned business: Yes  No  Decline to Answer
- \*Minority-owned business: Yes  No  Decline to Answer
- \*Veteran-owned business: Yes  No  Decline to Answer
- \*Disability-owned business: Yes  No  Decline to Answer

\*Race (One or more boxes may be selected.):

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Other \_\_\_\_\_

\*Ethnicity: Hispanic or Latino  Not Hispanic or Latino

How many years has the Exporter been in commercial operations? \_\_\_\_\_

Does the Exporter have experience with transactions of similar size, scope and complexity? Explain below:

<sup>2</sup> Affiliations exist when one individual or entity controls or has the power to control another or when a third party or parties control or have the power to control both. Factors such as common ownership, common management, previous relationships with or ties to another entity, and contractual relationships may cause affiliation. The complete definition of ‘affiliation’ is found at 13 C.F.R. § 121.103.

<sup>3</sup> A company’s Primary Industry NAICS code is the NAICS that accounts for the largest share of sales for the most recently completed fiscal year. The full definition of “primary industry” is set forth at 13 C.F.R. § 121.107.

**Supplier.** The "supplier" is the U.S. company which manufactures the goods and/or performs the services to be exported.  
 Check if the Supplier is also the Exporter. Otherwise, complete the information below for each exporter including any ancillary service providers.  Check if the Supplier is not determined. If neither applies, attach the same information for the primary supplier as requested above for the Exporter.

\*Supplier Name: \_\_\_\_\_

Tradestyle: \_\_\_\_\_

\*Business Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Duns No. \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

\*Corporate Ownership: \_\_\_\_\_

\*Does the Exporter have any affiliates<sup>2</sup>? Yes  No  \*Primary Industry NAICS<sup>3</sup>: \_\_\_\_\_

\*Total Number of Employees: \_\_\_\_\_ \* Annual Sales Volume: \_\_\_\_\_

How many years has the Supplier been in commercial operations? \_\_\_\_\_

Does the Supplier have experience with transactions of similar size, scope and complexity? Explain below:

For a Supplier located in the United States, items marked with an asterisk (\*) are required fields.

\*Woman-owned business: Yes  No  Decline to Answer   
\*Minority-owned business: Yes  No  Decline to Answer   
\*Veteran-owned business: Yes  No  Decline to Answer   
\*Disability-owned business: Yes  No  Decline to Answer

\*Race (One or more boxes may be selected.):

American Indian or Alaskan Native  Asian  Black or African American   
Native Hawaiian or Pacific Islander  White  Other \_\_\_\_\_

\*Ethnicity: Hispanic or Latino  Not Hispanic or Latino

**Borrower or Lessee:** The borrower is the entity that agrees to repay the loan. The lessee is the entity that agrees to lease the goods and services from the lessor and pay rent under a finance lease.  Check if the borrower is the applicant. If not, complete the information below.

\*Borrower/Lessee Name: \_\_\_\_\_

\*Business Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Duns No. \_\_\_\_\_ UEI No.<sup>1</sup> \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

For a borrower located in the United States, items marked with an asterisk (\*) are required fields.

\*Woman-owned business: Yes  No  Decline to Answer   
\*Minority-owned business: Yes  No  Decline to Answer   
\*Veteran-owned business: Yes  No  Decline to Answer

\*Disability-owned business: Yes  No  Decline to Answer

\*Race (One or more boxes may be selected.):

American Indian or Alaskan Native  Asian  Black or African American   
Native Hawaiian or Pacific Islander  White  Other \_\_\_\_\_

\*Ethnicity: Hispanic or Latino  Not Hispanic or Latino

**Guarantor:** The guarantor is the person or entity that agrees to repay the credit if the borrower or lessee does not. Complete the information below for each guarantor if a guarantor is offered or required.

Check to indicate:  There is no guarantor  Guarantor is an individual  Guarantor is a financial institution  
 Guarantor is a corporation. Complete the information below for each guarantor if a guarantor is offered or required.

\*Guarantor Name: \_\_\_\_\_

\*Business Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Buyer:** The buyer is the entity that contracts with the exporter for the purchase of the U.S. goods and services. Check if the buyer is also the  borrower/lessee or lessor or  guarantor. Otherwise complete the information below.

\*Buyer Name: \_\_\_\_\_

\*Business Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Primary Source of Repayment (PSOR).** The PSOR is the entity whose financial statements form the basis of EXIM's evaluation of reasonable assurance of repayment. For this transaction, indicate whether the PSOR is:  
 buyer or  guarantor or  business combination (e.g., the consolidated or combined financial statement of the buyer and one or more corporate guarantors or controlling sponsor(s).) If business combination, indicate which entities comprise the combination:

Is the PSOR a financial institution? Yes  No

The risk category of the PSOR: Sovereign  Public Non-sovereign  Private

Does the PSOR have a bond rating? Yes  No

If yes, indicate the name(s) of the rating agency, rating, and the date of rating:

**End-user.** The end-user is the foreign entity that uses the U.S. goods and services. Check if the end-user is also the  borrower or  guarantor or  buyer or  PSOR. Otherwise, complete the information below.

\*End-user Name: \_\_\_\_\_

\*Business Address: \_\_\_\_\_  
 \*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Lender/Lessor.** The lender is the company that extends the EXIM guaranteed loan to the borrower. The Lessor is the company that extends the EXIM guaranteed finance lease to the Lessee. If the application is for a guaranteed loan, check if the lender is also the  applicant or otherwise, complete the information below. If a direct loan is being requested, complete for Lessor, if applicable.

\*Lender/Lessor Name: \_\_\_\_\_  
 \*Business Address: \_\_\_\_\_  
 \*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Duns No. \_\_\_\_\_ UEI No.<sup>1</sup> \_\_\_\_\_ MGA No.: \_\_\_\_\_

**Controlling Sponsor.** The controlling sponsor is a person providing controlling direct private equity investment (excluding investments made through publicly held investment funds, publicly held securities, public offerings, or similar market vehicles) in connection with a financing. Check if the controlling sponsor is also the  applicant. Otherwise, complete the information below.

\*Sponsor Name: \_\_\_\_\_  
 \*Business Address: \_\_\_\_\_  
 \*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Position Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**SPECIAL FEATURES REQUESTED**

Check the box(es) for the coverage(s) that apply to the transaction. View the fact sheets describing the coverage on EXIM’s website as noted below. Complete and attach the required forms.

- Large Aircraft: **Required** [Attachment A \(Form EIB 95-10a\): Large Aircraft Transactions](https://www.exim.gov/policies/aviation-exports). For more information: <https://www.exim.gov/policies/aviation-exports>
- Tied Aid Program: **Required** [Attachment C \(Form EIB 95-10c\): Tied Aid Capital Project Fund](https://www.exim.gov/sites/default/files/newsreleases/tied_aid_procedures_10-29-20.pdf). For more information: [https://www.exim.gov/sites/default/files/newsreleases/tied\\_aid\\_procedures\\_10-29-20.pdf](https://www.exim.gov/sites/default/files/newsreleases/tied_aid_procedures_10-29-20.pdf)
- Used Equipment: **Required** [Attachment E \(Form EIB 11-03\): Used Equipment Questionnaire](https://www.exim.gov/policies/used-equipment). For more information: <https://www.exim.gov/policies/used-equipment>
- Project Finance: **Required** [Attachment F \(Form EIB 95-10f\): Foreign and Domestic Project Finance](https://www.exim.gov/what-we-do/loan-guarantee/project-and-structured-finance). For more information: <https://www.exim.gov/what-we-do/loan-guarantee/project-and-structured-finance>
- Structured Finance: **Required** [Attachment G \(Form EIB 95-10g\): Credit Information](#)
- Co-financing with a Foreign Export Credit Agency: **Required** [Attachment H \(Form EIB 11-04\): Co-financing with Foreign Export Credit Agency](https://www.exim.gov/policies/co-financing). For more information: <https://www.exim.gov/policies/co-financing>
- Domestic Finance: **Required** Attachment I (Form EIB 22-05) [weblink TBD] and **Required** [Attachment F \(Form EIB 95-10f\): Foreign and Domestic Project Finance](#). For more information: [web link TBD]
- Pre-Export Payment Questionnaire: **Required** Attachment J (Form EIB 22-02) [weblink TBD]
  
- Ancillary Service Fees: For more information: <https://www.exim.gov/what-we-do/loan-guarantee/ancillary-services>
- Capitalization of Interest During Construction: For more information: [weblink TBD]
- China and Transformational Exports Program: For more information: <https://www.exim.gov/about/special-initiatives/ctep>
- Environmental Exports Program: For more information: <https://www.exim.gov/about/special-initiatives/environment>

- Finance Lease Structure: For more information: <https://www.exim.gov/what-we-do/loan-guarantee/transportation/finance-lease-structure>
- Foreign Currency Guarantee: For more information: <https://www.exim.gov/what-we-do/loan-guarantee/foreign-currency-guarantee>
- Local Cost Support: For more information: <https://www.exim.gov/policies/local-cost>
- Military/Security/Police: For more information: <https://www.exim.gov/policies/military> and <https://www.exim.gov/policies/security-forces-sales>
- Nuclear: For more information: <https://www.exim.gov/policies/ex-im-bank-and-the-environment/international-environmental-and-social-guidelines#a-3>
- Other: \_\_\_\_\_

## TRANSACTION DESCRIPTION

Describe Goods and Services, which are proposed for the scope of supply. Include make, model, manufacturer/supplier, NAICS of goods and services, number of units, values, and estimated U.S. and foreign content.

Describe the purpose of the transaction. Address the following in the description: Will the goods be used to create or expand production capacity for an exportable product?

Are the goods and services destined for an identifiable project? If so, provide information on the total estimated project cost in US dollars. Also provide information as to other proposed sources of financing for the project, including working capital.

Indicate whether an application for support of this export contract or a related project has been filed with the Agency for International Development, Maritime Administration, U.S. International Development Finance Corporation, Trade Development Agency or a multilateral financing agency. If so, include a brief description of the additional support being sought and identify the name and contact at each.

## CHINA AND TRANSFORMATIONAL EXPORTS PROGRAM (CTEP)

Check one or both applicable boxes, as appropriate, below if (a) the items to be exported from the U.S. face export subsidies from competing goods and/or services financed by the People's Republic of China (PRC) or by other countries (as designated by the U.S. Secretary of the Treasury)<sup>4</sup>; and/or (b) the export items qualify as one or more of the Transformational Export Areas designated by Congress, as necessary to advance the comparative leadership of the U.S. which include:

- Artificial Intelligence
- Biotechnology
- Biomedical sciences
- Wireless communications equipment
- Quantum computing
- Renewable energy, energy efficiency, & energy storage
- Semiconductor and semiconductor machinery manufacturing
- Emerging financial technologies
- Water treatment and sanitation
- High-performance computing
- Associated services necessary for use of any of the foregoing exports

<sup>4</sup> As of this writing, no other country besides the PRC has been designated a covered country.

- Face export subsidies for competing goods and/or services financed by the PRC or other covered countries
- Transformational Export Area

If either is checked, provide an explanation via attachment.

**REQUESTED FINANCING AMOUNTS AND STRUCTURE**

EXIM financing support is based on the value of the eligible goods and services in the exporter's supply contract(s) or purchase order(s). The total level of support will be the lesser of: 85% of the value of all eligible goods and services; or 100% of the U.S. content included in all eligible goods and services in the exporter's supply contracts or purchase order(s). In addition, EXIM may also finance certain local costs, ancillary services as approved, and the exposure fee/premium. Complete the chart below for Uses and Sources of Funds.

Uses of Funds	(\$mm)	Sources of Funds	(\$mm)
_____	\$ _____	EXIM Bank	\$ _____ -
_____	\$ _____	_____	\$ _____ -
_____	\$ _____	_____	\$ _____ -
_____	\$ _____	_____	\$ _____ -
_____	\$ _____	_____	\$ _____ -
_____	\$ _____	<b>Total Senior Debt</b>	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	Equity	\$ _____
_____	\$ _____	_____	\$ _____
<b>Total Uses of Funds</b>	\$ _____	<b>Total Sources of Funds</b>	\$ _____

**Exposure Fee.** Check one box.

- EXIM to finance the fee, which will be paid as the credit is drawn down.
- EXIM to finance the fee, which will be paid up front.
- EXIM will not finance the fee, and it will be paid as the credit is drawn down.
- EXIM will not finance the fee, and it will be paid up front.

**Transaction Structure.**

**Principal Repayment Term.** \_\_\_\_\_ (years). Unless otherwise requested, equal installments of principal will be repaid semi-annually beginning six months after the starting point.

**Starting Point.** The starting point is generally the event that marks the fulfillment of the exporter's contractual responsibility, except for project finance, when it occurs at the time the project meets all completion tests. (Check one box.)

- Shipment (single shipment)
- Services Completion.
- Final Shipment (multiple shipments)
- Completion of Installation. Specify date: \_\_\_\_\_
- Mean Shipment (multiple shipments)
- Project Completion. Specify date: \_\_\_\_\_
- Other

**Shipment Period.** Shipments will be completed and/or services will be performed from: \_\_\_\_\_ (month/year) to \_\_\_\_\_ (month/year) excluding any acceptance, retention, or warranty period.

**Interest rate.** The interest rate to be charged on the guaranteed loan is: \_\_\_\_\_

### REASON FOR REQUESTING EXIM SUPPORT

The basic rationale for EXIM support is that the export of U.S. goods and services needs financing but there are one or more obstacles to obtaining such financing. Please check all the boxes below that apply to this transaction, to the best of your knowledge. Please also check the appropriate box to indicate which factor is most important.

#### Export-credit competition.

Most Important?

Are any non-U.S. companies competing for this sale?

Yes  No  Don't Know

If yes, please identify non-U.S. competitor: \_\_\_\_\_

If yes, is the non-U.S. competitor receiving support from any export credit agency for this sale?

Yes  No  Don't Know

If yes, please list the export credit agency: \_\_\_\_\_

#### Structural constraints.

Most Important?

Is commercial financing for this sale limited by bank requirements (such as maturity limits or capacity limits on the borrower, industry, or country)?

Yes  No  Don't Know

If yes, are the relevant limits related to risk or liquidity or both?

Yes  No  Other  \_\_\_\_\_

#### Risk constraints.

Most Important?

Is commercial financing for this sale limited because providers of commercial financings are unwilling or unable to accept the commercial and/or political risks of the borrower or the country?

Yes  No  Don't Know

If yes, what risks are creating the limitation?

Yes  No  Other  \_\_\_\_\_

#### China and Transformational Exports Program (CTEP).

Most Important?

Are any Chinese companies competing for this sale?

Yes  No  Don't Know

If yes, please identify the Chinese competitor: \_\_\_\_\_

If yes, is the Chinese competitor receiving support from any government financing agency for this sale?

Yes  No  Don't Know

If yes, please list the agency: \_\_\_\_\_

#### Other.

Most Important?

Is commercial financing for this sale limited because of other considerations?

Yes  No  Don't Know

If yes, please describe: \_\_\_\_\_

### OTHER INFORMATION AND CERTIFICATIONS

**General Information.** Be prepared to provide the following upon request:

- Credit Agency report(s) on the borrowers and exporter(s).
- Annex A to the Master Guarantee Agreement (Guarantees only) at:  
<https://www.exim.gov/sites/default/files/forms/mtmgaannexes.pdf>
- Lender's mandate letter (required when applicant is a financial institution).

Environmental Screening ([Attachment B \(Form EIB 95-10b\): Environmental Screening Document](#)).



### Supply Contracts Between the Exporter and Buyer.

- Sales contract(s), pro forma invoice(s), or purchase order(s) are attached.
- No contract is attached. (Project Finance, CGF, and Preliminary Commitment only)

### Commitment/Facility Fee Agreement

A commitment fee accrues starting 60 days after the authorization of a final commitment and is payable semi-annually in arrears on a schedule determined at the time of authorization. The commitment fee is either:

- 1/8 of 1% per annum on the undisbursed and uncanceled balance of a guaranteed loan **or**
- 1/2 of 1% per annum for a direct loan.

A facility fee, applicable only to a credit guarantee facility (and in lieu of a commitment fee), is 1/16 of 1% of the principal amount of the facility, due in full at the time of authorization of a final commitment, and payable in two equal installments due approximately 90 and 270 days from the date of authorization of the final commitment.

Choose one of the options below regarding the payment of the commitment or facility fee:

- The applicant is the borrower or project sponsor, and by signing the application, is irrevocably committing to pay the commitment fee.
- The applicant is the guaranteed lender, and is (check one):
  - signing the application which irrevocably commits it to pay the fee, or
  - signing the application and enclosing with it an EXIM standard form fee letter signed by the borrower (at <https://www.exim.gov/sites/default/files/forms/mtmgaannexes.pdf>). This letter irrevocably commits the borrower to pay the fee.
- The applicant is the exporter, and is signing the application and enclosing with it an Ex-Im Bank standard form fee letter from the  borrower or  guaranteed lender (at <https://www.exim.gov/sites/default/files/forms/mtmgaannexes.pdf>). This letter irrevocably commits the borrower or guaranteed lender to pay the fee.

### Anti-Lobbying Disclosure Form

Please refer to the Anti-Lobbying Declaration/Disclosure forms (see [Attachment D \(Form EIB 95-10d\): Anti-lobbying Declaration/Disclosure](#)) and include a signed copy of the appropriate form(s) with your application

## LONG-TERM LOAN OR GUARANTEE APPLICATION ATTACHMENTS

[Attachment A \(Form EIB 95-10a\): Large Aircraft Transactions](#)

[Attachment B \(Form EIB 95-10b\): Environmental Screening Document](#)

[Attachment C \(Form EIB 95-10c\): Tied Aid Capital Project Fund](#)

[Attachment D \(Form EIB 95-10d\): Anti-lobbying Declaration/Disclosure](#)

[Attachment E \(Form EIB 11-03\): Used Equipment Questionnaire](#)

[Attachment F \(Form EIB 95-10f\): Foreign and Domestic Project Finance](#)

[Attachment G \(Form EIB 95-10g\): Credit Information](#)

[Attachment H \(Form EIB 11-04\): Co-financing with Foreign Export Credit Agency](#)

[Attachment I \(Form EIB 22-05\): Domestic Financing \[weblink TBD\]](#)

[Attachment J \(Form EIB 22-02\): Pre-Export Payments Questionnaire \[weblink TBD\]](#)

[Attachment K \(Form EIB 22-04\): Form of Fee Letter \[weblink TBD\]](#)

Attachment K is to be submitted in the following circumstances:

- the application is for a guarantee or a credit guarantee facility
- the applicant is the guaranteed lender or the exporter, and
- the applicant is signing the application, but the borrower is committing to pay the commitment or facility fee

## CERTIFICATIONS AND SIGNATURE

Please refer to the "Standard Certifications and Covenants for EXIM Applications" set forth in Form [EIB 18-CN](#), posted on the EXIM website at <https://www.exim.gov/tools-for-exporters/applications-forms/complete-list> (the "Standard Certifications"). **THE STANDARD CERTIFICATIONS ARE INCORPORATED INTO THIS APPLICATION AS IF FULLY AND DIRECTLY SET FORTH HEREIN.** When signing this application in the space provided below, the undersigned authorized officer signing on the applicant's behalf certifies and represents that he or she is fully authorized to sign on the applicant's behalf, and that **HE OR SHE HAS READ** the Standard Certifications referenced above **AND IS CERTIFYING AND COVENANTING**, as appropriate, to all the certifications, acknowledgments and covenants set forth in the Standard Certifications.

Applicant further certifies that the representations made, and the facts stated in this application and its attachments **are, true and Applicant has not misrepresented or omitted any material facts, including the reason for requesting EXIM support.** Applicant further covenants that if any statement set forth in this application or in the Standard Certifications, becomes untrue, or is discovered to have been untrue when made, Applicant will promptly inform EXIM of all such changes or discoveries. Applicant further understands that in accepting or approving this application, EXIM is relying upon Applicant's statements set forth in the application and in the Standard Certifications, and all statements and certifications to EXIM are subject to the penalties for false or misleading statements to the U.S. Government (18 USC § 1001, et. seq.).

I, \_\_\_\_\_, do hereby certify that I am the duly appointed and qualified \_\_\_\_\_ (Title)  
of \_\_\_\_\_ and that as such I am authorized to execute this application  
(Name of Applicant)  
on behalf of \_\_\_\_\_.  
(Name of Applicant)

In witness whereof, I have hereunto signed my name this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Name of Applicant:

By: \_\_\_\_\_ (Authorized Officer)  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Tel. #: \_\_\_\_\_  
Email: \_\_\_\_\_

### 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 USC 635 et. seq.); provision of this information is mandatory and failure to provide the requested information may result in EXIM being unable to determine eligibility for support. If any of the information provided in this application changes in any material way or if any of the certifications made herein become untrue, the applicant must promptly inform EXIM of such changes. The information provided will be reviewed to determine the participants' ability to perform and pay under the transaction referenced in this application. EXIM may not require the information and applicants are not required to provide information requested in this application unless a currently valid OMB control number is displayed on this form (see upper right of each page). EXIM reserves the right to decline to process or to discontinue processing any application.

**Paperwork Reduction Act Statement:** We estimate that it will take you about 2.5 hours to complete this form. This includes the time it will take to read the instructions, gather the necessary facts, and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to EXIM and the Office of Management and Budget, Paperwork Reduction Project, OMB# 3048-0013 Washington, D.C. 20503