

# Export-Import Bank of the United States

# APPLICATION FOR MEDIUM-TERM INSURANCE, DIRECT LOAN OR GUARANTEE

This application is to be used for insurance and guarantee transactions, including Domestic Financing, with financed amounts of \$25 million or less (excluding financed exposure fee/premium) and repayment terms between twelve months and seven years. An online version of this application is available on EXIM's website. EXIM encourages customers to apply on-line, as it will facilitate our review and allow customers a faster response time. If you are requesting a medium-term direct loan, please email a completed application to <a href="mailto:exim.applications@exim.gov">exim.applications@exim.gov</a>. Please note that applications must be a signed and dated PDF and include all required application attachments.

Please note that if your financing request is between \$20 and \$25 million or a direct loan for any amount, excluding exposure fee, the transaction will be subject to U.S. flag shipping requirements. For more information, visit EXIM's website: https://www.exim.gov/policies/us-flag-shipping-requirements.

INANCING TYPE RE	QUESTED			
Product	□Loan Guarantee MGA No. (if known):	□Sovereign	☐ Public Non-sovere	ign □ Private Sector
	□Finance Lease Guarantee	□Sovereign	□ Public Non-soverei	ign □ Private Sector
	□Direct Loan	□Sovereign	☐ Public Non-soverei	ign □ Private Sector
	□Insurance	□Sovereign	☐ Public Non-soverei	ign □ Private Sector
Coverage Type	□Comprehensive Risk	☐ Political Risk	(	
Conversion of a	Preliminary Commitment or	a Letter of Inter	est	
	□No □Yes The EXIM			
Resubmission				•
_	was withdrawn for other reas		-	<del></del>
Renewal	□MTR (Medium-Term Repetitiv	e Insurance Polic	sy)	
parent company, if th and all its affiliates, ir <b>Applicant</b> : The ap controlling sponsor export agency and	n asterisk (*) are required fields. ere is a corporate owner. For nuncluding corporate owners and supplicant may be any exporter, fine associated with the transaction provide the name of the agency	umber of employsubsidiaries.  ancial institution  □ Check if the	ees and sales volume, a , supplier, the primary b applicant has been ass	aggregate for the company orrower, buyer or sisted by a city or state
*Applicant Name: _				
	:			
	· *State:			*Country:
Contact Person:		Position	on 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.]

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*Minority-owned business: Ye *Veteran-owned business: Ye *Disability-owned business: Ye *Race (One or more boxes may be so American Indian or Alaskan Native [ Native Hawaiian or Pacific Islander [ *Ethnicity: Hispanic or Latino <b>Exporter:</b> The "exporter" is the composervices.   Check if the exporter is including any ancillary service provide https://www.exim.gov/solutions/loan-	elected.):  As  W  No  way which is contra the applicant. Oth ders. For more info	nerwise, comple rmation about	uyer for the sale of the U.S. goods and/or etc the information below for each exporte
*Veteran-owned business: Ye *Disability-owned business: Ye  *Race (One or more boxes may be see American Indian or Alaskan Native In Native Hawaiian or Pacific Islander In Items and the American Indian or Pacific Islander In Items and Indian India	elected.):  As  W  No  wany which is contra the applicant. Oth	sian  hite  thispanic or Lacting with the Brancrwise, completermation about	Decline to Answer □ Decline to Answer □  Black or African American □ Other  atino □  uyer for the sale of the U.S. goods and/or ete the information below for each exporte
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services.   Check if the exporter is including any ancillary service provion https://www.exim.gov/solutions/loan-	the applicant. Oth ders. For more info	nerwise, comple rmation about	ete the information below for each exporte
*Exporter Name:			
*Exporter Name:			
*Business Address:			
*City: *	State:	*Zip/Postal	Code: *Country:
Contact Person:		_ Position Titl	le:
Phone:		_ Email:	
Duns No		Taxpayer ID	O No
*Corporate Ownership:			
*Does the Exporter have any affiliates	<b>2</b> ? Yes 🗌 No [	*Primary Ind	dustry NAICS <sup>3</sup> :
*Total Number of Employees:		_ * Annual Sa	ales Volume:
For an Exporter located in the United S	States, items marke	ed with an asteri	isk (*) are required fields.
*Woman-owned business: Ye	s □ No	<b>D</b>	Decline to Answer □
Minority-owned business: Ye	s □ No	<b>D</b>	Decline to Answer □
*Veteran-owned business: Ye	s □ No	<b>D</b> 🗆	Decline to Answer □
*Disability-owned business: Ye	s □ No	D 🗆	Decline to Answer □
*Race (One or more boxes may be se American Indian or Alaskan Native □ Native Hawaiian or Pacific Islander □	As	sian □ hite □	Black or African American □ Other
*Ethnicity: Hispanic or Latino □	No	ot Hispanic or La	
Thispanie of Latino	140	ot i iispailio oi Le	
How many years has the Exporter bee	en in commercial op	erations?	
Does the Exporter have experience wi	ith transactions of s	imilar size, scop	pe and complexity? Explain below:

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<sup>&</sup>lt;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>&</sup>lt;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.

☐ Check if the Supplier is also	the Exporter. Otherws.   Check if the Sup	/ise, co plier is	omplete the s	oods and/or performs the services to be exported. information below for each exporter including ned. If neither applies, attach the same
*Supplier Name:				
*Business Address:				
				Code: *Country:
				e:
Phone:				
Duns No.				) No
*Corporate Ownership:			. ,	<del></del>
*Does the Exporter have any af	filiates²? Yes □ N	√о П	*Primary Inc	dustry NAICS <sup>3</sup> :
				les Volume:
How many years has the Suppli				
				e and complexity? Explain below:
For a Supplier located in the Un	ited States, items mar	ked wi	th an asterisl	κ (*) are required fields.
*Woman-owned business:	Yes □	No □		Decline to Answer □
*Minority-owned business:  *Veteran-owned business:	Yes □ Yes □	No □ No □		Decline to Answer □  Decline to Answer □
*Disability-owned business:	Yes □	No □		Decline to Answer □
*Race (One or more boxes may American Indian or Alaskan Nat Native Hawaiian or Pacific Islan	tive 🗆	Asiar White	-	Black or African American □ Other
*Ethnicity: Hispanic or Lati	ino □	Not F	lispanic or La	atino 🗆
	om the lessor and pay	_		e loan. The lessee is the entity that agrees to be lease. □ Check if the borrower is the
*Borrower/Lessee Name:				
*Business Address:				
*City:	*State:		*Zip/Postal	Code: *Country:
Contact Person:			Position Titl	e:
Phone:			Email:	· · · · · · · · · · · · · · · · · · ·
Duns No	UEI No.1		Tax	payer ID No
For a borrower located in the Ur	nited States, items ma	rked w	ith an asteris	k (*) 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 □

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*Race (One or more boxes	-			
American Indian or Alaska		Asian □		can American □
Native Hawaiian or Pacific	Islander □	White □	Other	
*Ethnicity: Hispanic o	or Latino □	Not Hispanic o	or Latino □	
Refer to the Medium-Term situations personal or corp Complete the information Check to indicate:   Ther	Credit Standards (at horate guarantors are rebelow for each guarante is no guarantor	ttp://www.exim.gov/tequired for medium-totor if a guarantor is constanted in the constant of t	ools/credit-standa erm transactions offered or required an individual	
*Guarantor Name:				
*Business Address:				
*City:	*State:	*Zip/Pos	stal Code:	*Country:
Contact Person:		Position	Title:	
Phone:		Email: _		
	*State:	*Zip/Pos	stal Code:	*Country:
Phone:				
EXIM's evaluation of reas □buyer or □guarantor or l	sonable assurance of □business combinatio guarantors or controll	repayment. For thing the repayment of the repayment. For this repayment.	s transaction, induted or combined	statements form the basis of dicate whether the PSOR is: financial statement of the buyer tion, indicate which entities
Is the PSOR a financial in	nstitution?Yes □ No l			
The risk category of the F	PSOR: Sovereign [	Public Non-so	vereign □	Private □
Does the PSOR have a build by the liftyes, indicate the name(		☐ No ☐ y, rating, and the da	ate of rating:	
		hat uses the U.S. g		es. Check if the end-user is also

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\*End-user Name: \_\_

Broker. ☐ Check if there is no broker  Broker Name: Contact Person: Phone: Duns No.  ECIAL FEATURES REQUESTED  eck the box(es) for the coverage(s) that apply to the transaction. Viete EXIM's website as noted below. Complete and attach the required for the structured Finance:    Used Equipment: Required Attachment (Form EIB 11-03): Used https://www.exim.gov/policies/used-equipment   Structured Finance: Required Attachment G (Form EIB 95-10c https://www.exim.gov/solutions/project-and-structured-finance/		*Country:
Lender/Lessor. The lender is the company that extends the EXIM the company that extends the EXIM guaranteed finance lease to the check if the lender is also the □applicant or otherwise, complete the requested, complete for Lessor, if applicable.  *Lender/Lessor Name:  *Business Address:  *City:*State:*Zip/Po Contact Person:Position Phone:Email: _ Duns NoUEI No.¹MGA N  Agent. An agent is a business entity or individual, usually located in has assisted in the sourcing, packaging, and/or preparation of a rereceive compensation in some form for their services. Is an agent in If yes, complete the information below.  *Agent's Name:*State:*Zip/Po Contact Person: Position Phone:	Title:	
the company that extends the EXIM guaranteed finance lease to the check if the lender is also the □applicant or otherwise, complete the requested, complete for Lessor, if applicable.  *Lender/Lessor Name:  *Business Address:  *City:*State:*Zip/Po Contact Person:Position Phone:Email: _ Duns NoUEI No.¹ MGA N  Agent. An agent is a business entity or individual, usually located in has assisted in the sourcing, packaging, and/or preparation of a rereceive compensation in some form for their services. Is an agent in If yes, complete the information below.  *Agent's Name:*State:*Zip/Po Contact Person: Position Phone: Position Phone: Position Phone:		
*City: *State: *Zip/Po Contact Person: Positior Phone: Email: _ Duns No UEI No.¹ MGA N  Agent. An agent is a business entity or individual, usually located in has assisted in the sourcing, packaging, and/or preparation of a rereceive compensation in some form for their services. Is an agent in lif yes, complete the information below.  *Agent's Name:* *Business Address:* *State:* *Zip/Po Contact Person: Positior Phone: Positior Phone: Positior Broker Name:	Lessee. If the a	pplication is for a guaranteed lo
Contact Person:		
Phone:	stal Code:	*Country:
Agent. An agent is a business entity or individual, usually located in has assisted in the sourcing, packaging, and/or preparation of a rereceive compensation in some form for their services. Is an agent in If yes, complete the information below.  *Agent's Name:  *Business Address:  *City:  Contact Person:  Phone:  Broker.  Check if there is no broker  Broker Name:  Contact Person:  Duns No.  ECIAL FEATURES REQUESTED  eck the box(es) for the coverage(s) that apply to the transaction. Vie EXIM's website as noted below. Complete and attach the required for https://www.exim.gov/policies/used-equipment  Structured Finance: Required Attachment (Form EIB 11-03): Used https://www.exim.gov/policies/used-equipment  Structured Finance: Required Attachment G (Form EIB 95-10c https://www.exim.gov/solutions/project-and-structured-finance/structured-finance/structured-finance/structured-finance/structured-finance/structured-finance/structured-finance/structured-finance: Required Attachment I (Form EIB 22-05) [we	Title:	
Agent. An agent is a business entity or individual, usually located in has assisted in the sourcing, packaging, and/or preparation of a receive compensation in some form for their services. Is an agent in If yes, complete the information below.  *Agent's Name:  *Business Address:  *City:  *State:  *Zip/Po Contact Person:  Phone:  Broker.  Check if there is no broker  Broker Name:  Contact Person:  Phone:  Duns No.  ECIAL FEATURES REQUESTED  eck the box(es) for the coverage(s) that apply to the transaction. Vie EXIM's website as noted below. Complete and attach the required for https://www.exim.gov/policies/used-equipment  Structured Finance: Required Attachment (Form EIB 11-03): Used https://www.exim.gov/solutions/project-and-structured-finance/structured-finance: Required Attachment I (Form EIB 22-05) [we		
Agent. An agent is a business entity or individual, usually located in has assisted in the sourcing, packaging, and/or preparation of a receive compensation in some form for their services. Is an agent in If yes, complete the information below.  *Agent's Name:  *Business Address:  *City:  *State:  *Zip/Po Contact Person:  Phone:  Broker.  Check if there is no broker  Broker Name:  Contact Person:  Phone:  Duns No.  ECIAL FEATURES REQUESTED  eck the box(es) for the coverage(s) that apply to the transaction. Vie EXIM's website as noted below. Complete and attach the required for https://www.exim.gov/policies/used-equipment  Structured Finance: Required Attachment (Form EIB 11-03): Used https://www.exim.gov/solutions/project-and-structured-finance/structured-finance: Required Attachment I (Form EIB 22-05) [we		
Broker.  Check if there is no broker  Broker Name: Contact Person: Phone: Duns No.  ECIAL FEATURES REQUESTED Eck the box(es) for the coverage(s) that apply to the transaction. Vie EXIM's website as noted below. Complete and attach the required for https://www.exim.gov/policies/used-equipment  Structured Finance: Required Attachment (Form EIB 11-03): Used https://www.exim.gov/policies/used-equipment  Co-financing with a Foreign Export Credit Agency: Required Attachment I (Form EIB 22-05) [we	Title:	
Contact Person:		
Duns No		
ECIAL FEATURES REQUESTED  eck the box(es) for the coverage(s) that apply to the transaction. Vie EXIM's website as noted below. Complete and attach the required f  □ Used Equipment: Required Attachment (Form EIB 11-03): Used https://www.exim.gov/policies/used-equipment  □ Structured Finance: Required Attachment G (Form EIB 95-10g https://www.exim.gov/solutions/project-and-structured-finance/structured-financing with a Foreign Export Credit Agency: Required Attachment I (Form EIB 22-05) [we]		
95-10f): Foreign and Domestic Project Finance. For more informa  ☐ Foreign Dealer Support: Required Attachment C (Form EIB 22-0	Equipment Que  Credit Informactured-finance-fachment (Formw.exim.gov/policolink TBD] and Fation: [web link T	stionnaire. For more information: ation. For more information: or-small-projects EIB 11-04): Co-financing with cies/co-financing Required Attachment F (Form I
☐ Pre-Export Payment Questionnaire: <i>Required</i> Attachment J (Form ☐ Ancillary Service Fees: For more information: <a href="https://www.exim.g">https://www.exim.g</a>	n EIB 22-02) [we	blink TBD]

initiatives/ctep

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	xports Program. For more imormation. https://www.exim.gov/about/special-initiatives/environime
	structure: For more information: <a href="https://www.exim.gov/what-we-do/loan-">https://www.exim.gov/what-we-do/loan-</a> portation/finance-lease-structure
	y Guarantee: For more information: <a href="https://www.exim.gov/what-we-do/loan-guarantee/foreign-">https://www.exim.gov/what-we-do/loan-guarantee/foreign-</a>
currency-guarant	
	ort: For more information: https://www.exim.gov/policies/local-cost
	Police: For more information: <a href="https://www.exim.gov/policies/military">https://www.exim.gov/policies/military</a> and <a href="https://www.exim.gov/policies/military">https://www.exim.gov/policies/military</a> and <a href="https://www.exim.gov/policies/military">https://www.exim.gov/policies/military</a> and
	i.gov/policies/security-iorces-sales
ANSACTION DESCR	IPTION
	d Services, which are proposed for the scope of supply. Include make, model, manufacturer/sup d services, number of units, values, and estimated U.S. and foreign content.
Describe the number	as afthe transportion. Address the fall environ in the description, Mill the ground be used to
	se of the transaction. Address the following in the description: Will the goods be used to roduction capacity for an exportable product?
Create or expand pr	oddelion capacity for an exportable product:
Are the goods and s project cost in US d including working co	services destined for an identifiable project? If so, provide information on the total estimated lollars. Also provide information as to other proposed sources of financing for the project, sapital
morading working of	apron.
	application for support of this export contract or a related project has been filed with the Agency
	velopment, Maritime Administration, U.S. International Development Finance Corporation, Trade cy or a multilateral financing agency. If so, include a brief description of the additional
	yht and identify the name and contact at each.
T support being soug	int 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
- 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
- Wireless communications equipment

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<sup>&</sup>lt;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	\$
\$			\$
\$			\$
\$			\$
\$			
\$		Total Senior Debt	\$
\$			,
\$		Equity	\$
\$			<del></del>
Total Uses of Funds		Total Sources of Funds	Ś

\$	Equity				
\$					
otal Uses of Funds \$	Total Sources of Funds \$				
Exposure Fee (Guarantee)/Premium (Insurance). 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					
<b>Principal Repayment Term.</b> (years). Unless otherwise requested, equal installments of principal will be repaid semi-annually beginning six months after the starting point. In the case of a finance lease, unless otherwise requested, rent will be calculated based on equal installments of principal, paid semi-annually beginning six months after the starting point.					
<b>Starting Point.</b> 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:					
<ul><li>☐ Mean Shipment (multiple shipments)</li><li>☐ Other</li></ul>	□ Project Completion. Specify date:				
Shipment Period. Shipments will be completed and/or (month/year) to (month/year) excluding	services will be performed from:any acceptance, retention, or warranty period.				

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Promissory Notes/Lease  ☐ There will be one promiss	• •		Itiple shipments. Indicate:
☐ Disbursements will be co	nsolidated into one p	romissory note	
☐ There will be one lease s		•	
☐ Lease deliveries will be c	onsolidated under or	ne lease supplement (F	Finance lease only)
Interest rate. The interest	rate to be charged	on the guaranteed loa	n is:
one or more obstacles to obta	support is that the exining such financing	g. Please check all the	nd services needs financing but there are boxes below that apply to this transaction, o indicate which factor is most important.
<b>Export-credit competition</b>			Most Important? □
Are any non-U.S. compar	ies competing for thi	s sale?	
Yes □	No □	Don't Know □	
If yes, please identity non If yes, is the non-U.S. cor			rt credit agency for this sale?
Yes □	No □	Don't Know □	
If yes, please list the expo	ort credit agency: _		
Structural constraints.			Most Important? □
Is commercial financing for the borrower, industry, or o		by bank requirements	s (such as maturity limits or capacity limits or
Yes □	No □	Don't Know □	
If yes, are the relevant lim	its related to risk o	r liquidity or both?	
Yes □	No □	Other 🗆	
Risk constraints.			Most Important? □
Is commercial financing for unable to accept the com	or this sale limited I mercial and/or poli	because providers of tical risks of the borr	commercial financings are unwilling or ower or the country?
Yes □	No □	Don't Know □	
If yes, what risks are crea	ting the limitation?		
Yes □	No □	Other 🗆	
China and Transformatio	nal Exports Progra		Most Important? □
Are any Chinese companies	s competing for this s	sale?	
Yes □	No □	Don't Know □	
If yes, please identity the	Chinese competitor:		
If yes, is the Chinese com Yes $\square$	npetitor receiving su No □	ipport from any gover Don't Know □	nment financing agency for this sale?
If yes, please list the age	ncy:		
Other.			Most Important? □
Is commercial financing for	or this sale limited b	pecause of other cons	siderations?
Yes □	No □	Don't Know □	
If yes, please describe: _			

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### **CREDIT INFORMATION** Complete Attachment A (Form EIB 22-06) Credit Information [weblink to be added]

#### 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 ( <u>Attachment B (Form EIB 95-10b)</u> : <u>Environmental Screening Document</u> ).
Supply Contracts Between the Exporter and Buyer.
□Sales contract(s), pro forma invoice(s), or purchase order(s) and finance lease(s) evidencing the transaction between the exporter and buyer are attached.
□The exporter(s) are not the manufacturers of the goods nor the producers of the services to be exported; the Sales contract(s), pro forma invoice(s), or purchase order(s) and finance lease(s) evidencing the transaction between the supplier(s) and exporter(s) are attached; AND the Sales contract(s), pro forma invoice(s), or purchase order(s) and finance lease(s) evidencing the transaction between the supplier(s) and buyer are attached.
Commitment 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 uncancelled balance of a guaranteed loan <u>or</u>
1/2 of 1% per annum for a direct loan.
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):
$\square$ 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.
$\Box$ 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 <u>Attachment D (Form EIB 95-10d)</u>: <u>Anti-lobbying Declaration/Disclosure</u>) and include a signed copy of the appropriate form(s) with your application

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## **MEDIUM-TERM APPLICATION ATTACHMENTS**

Attachment A (Form EIB 22-06) Credit Information Requirements

Attachment B (Form EIB 95-10b): Environmental Screening Document

Attachment C (Form EIB 22-03) Supplemental Information Requirements for Foreign Dealer Support

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

Attachment J (Form EIB 22-02): Pre-Export Payments Questionnaire

Attachment K (Form EIB 22-04): Form of Fee Letter

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

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## **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 <a href="https://www.exim.gov/tools-for-exporters/applications-forms/complete-list">https://www.exim.gov/tools-for-exporters/applications-forms/complete-list</a> (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 d	uly appointed and qualified	
		(Title)
ofand that as such I am author (Name of Applicant)	rized to execute this application	
on behalf of (Name of Applicant)		
In witness whereof, I have hereunto signed my name this	day of	20
Name of Applicant:		
ву:	(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 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# 3048-0014 Washington, D.C. 20503

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