

NOFO 2: Small-Scale Supply Chain Facilities (<\$300M Capital Expenditures)

Under the second NOFO, this application pipeline is for small-scale commercial semiconductor material and manufacturing equipment facilities below \$300 million in capital expenditures

Change Application

Pipeline

Application Pipeline Selection

* Application Pipeline Selection

- NOFO 1: Front-End and Back-End Commercial Fabrication Facilities
- NOFO 1: Large-Scale Supply Chain Facilities (\geq \$300M Capital Expenditures¹)
- NOFO 2: Small-Scale Supply Chain Facilities (<\$300M Capital Expenditures¹)
- Other Facilities

Reminder: If your supply-chain project is at or over \$300M in **Total Capital Expenditures** you should select NOFO 1: Large-Scale Supply Chain Facilities. For more details, refer to the instructions.

- **NOFO 1: Front-End and Back-End Commercial Fabrication Facilities:** Under the first NOFO, this application pipeline is for leading-edge, current-generation, and mature-node front-end manufacturing, and back-end production facilities.
- **NOFO 1: Large-Scale Supply Chain Facilities (\geq \$300M Capital Expenditures¹):** Under the first NOFO, this application pipeline is for large-scale commercial semiconductor material and manufacturing equipment facilities exceeding \$300 million in capital expenditures, as well as wafer manufacturing facilities of any size.
- **NOFO 2: Small-Scale Supply Chain Facilities (<\$300M Capital Expenditures¹):** Under the second NOFO, this application pipeline is for small-scale commercial semiconductor material and manufacturing equipment facilities below \$300 million in capital expenditures.
- **Other Facilities:** The last application pipeline is for other all facility types that are not covered in the first three categories.

You may change this selection at any time until the full application submission.

¹Project capital expenditures refers to expenses incurred in the construction or improvement of physical assets, such as the costs of land, building and construction, equipment and installation, physical improvements, and working capital during the construction phase.

Next

Steps

- Application Pipeline Selection

| Full Application | | OMB Control Number: 0693-XXXX Expiration Date: XX/XX/XXXX |
|---|-------------------------------|--|
| Acknowledgement | SECTION STATUS Not Started | View Burden Statement |
| Cover Page and Applicant Profile | SECTION STATUS Not Started | Get Started |
| Sources and Uses of Funds | SECTION STATUS Not Started | Get Started |
| Concept Plan Project Information | SECTION STATUS Not Started | Get Started |
| Workforce Development Web Form Questions | SECTION STATUS Not Started | Get Started |
| Narrative Uploads | SECTION STATUS Not Started | Get Started |
| Statutory Questions | SECTION STATUS Not Started | Get Started |
| Eligibility Questions | SECTION STATUS Not Started | Get Started |
| Attestation & Submission | SECTION STATUS Not Started | Get Started |
| <small>Submission available on XX/XX/XXXX</small> | | |

Burden Statement

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0693-XXXX. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 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 information collection. All responses to this information collection are required to obtain benefits. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the National Institute of Standards and Technology at: askchips@chips.gov.

Acknowledgement

Any communication, data, or other information stored or transmitted on this system may be accessed and used by federal employees, consultants and contractors in accordance with Section IV.C. of the CHIPS Incentives Program – Facilities for Semiconductor Materials and Manufacturing Equipment (CHIPS-CFF SMME-01). By voluntarily furnishing information through this system, the applicant consents to such access and use.

I acknowledge the above statement

Next

Cover Page and Applicant Profile

View Confidentiality Statement

Consistent with the Notice of Funding Opportunity (NOFO) for the CHIPS Incentives Program – Facilities for Semiconductor Materials and Manufacturing Equipment, NIST will treat the submitted information as confidential business information (CBI). As a result, NIST will strive to protect the submitted information by applying controls commensurate with the FIPS-199 high for confidentiality level. Information that is populated in structured questions will automatically be labeled as Controlled Unclassified Information – confidential business information (CUI//PROPIN). When uploading free form documents, you are responsible for marking those documents for CBI. Please see the instructions and legend language set forth in the NOFO at section IV.C.2. Proper markings on all submitted information will assist the Department in ensuring protection from disclosure as provided by 15 U.S.C. 4652 (with certain exceptions) and Exemptions 3 and/or 4 of the Freedom of Information Act, 5 U.S.C. 552, as applicable. Please see section IV.C.1 of the NOFO for further information regarding confidentiality.

Complete the CHIPS Program Cover Page questions with the following information regarding the proposed application. Instructions for how to complete the form are located here: <https://www.nist.gov/document/XXXXXXX>.

Be sure to include any statements regarding the confidentiality of information contained within the Full application, in accordance with Section IV.C. of the NOFO.

Name of Application

Potential Applicant Organization Information

Provide the legal name of the entity applying for CHIPS Incentives. Note, this is not the name of the individual submitting the Full Application.

Potential Applicant Name (e.g., applying entity)

Corporate Parent Name

Street 1

Street 2

Country/Area

City

International State

Postal C...

Organization Website

Have you registered for a SAM.gov account?

Response

-- Clear --

Yes

No

Save and
Next

Steps

Cover Page and
Applicant Profile

Cover Page

Cover Page

Applicant Point of Contact

Please enter information for the applicant point of contact, who should be an individual authorized to submit an application on behalf of the entity.

| | | | |
|------------|----------------------|---------------|----------------------|
| First Name | <input type="text"/> | Last Name | <input type="text"/> |
| Title | <input type="text"/> | Phone Number | <input type="text"/> |
| | | Email Address | <input type="text"/> |

Additional Applicant Details

Please list all primary officers (first name, last name, title)

| First Name | Last Name | Title |
|------------|-----------|-------|
| | | |

Is the global headquarters address the same as the organization address?

* Response

Global Headquarters Address

* Street 2

* Country/Area * City * International State

* Posta...

Select the applicant organization ownership structure

List all shareholders with >5% total equity (If none, then write 'N/A')

List all countries of operations

Attestation

Elements of this statement may have been prepopulated with data submitted previously. I have reviewed the information to be submitted for accuracy and made updates where necessary.

Steps

- Cover Page and Applicant Profile
- Cover Page**

Previous

Finish

Cover Page

Applicant Point of Contact

Please enter information for the applicant point of contact, who should be an individual authorized to submit an application on behalf of the entity.

| | | | |
|------------|----------------------|---------------|----------------------|
| First Name | <input type="text"/> | Last Name | <input type="text"/> |
| Title | <input type="text"/> | Phone Number | <input type="text"/> |
| | | Email Address | <input type="text"/> |

Additional Applicant Details

Please list all primary officers (first name, last name, title)

| First Name | Last Name | Title |
|------------|-----------|-------|
| | | |

Is the global headquarters address the same as the organization address?

* Response

Global Headquarters Address

* Street 1

* Street 2

* Country/Area * City * International State

* Posta...

Select the applicant organization ownership structure

-- Clear --

Public

Private

List all countries or operations

Attestation

Elements of this statement may have been prepopulated with data submitted previously. I have reviewed the information to be submitted for accuracy and made updates where necessary.

*

Steps

- Cover Page and Applicant Profile
- Cover Page**

Previous

Finish

Uses of Funds Form

Complete the summarized project sources and uses. Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

Schedule A: Summation Across Projects – Cost Schedule (\$ USD)

| | |
|--|-----------------|
| 1. Capital Investment | \$ 4,590,000.00 |
| 1a. Land | \$ 2,500,000 |
| 1b. Construction Costs (Labor, Materials) | \$ 1,000,000 |
| 1c. Equipment | \$ 500,000 |
| 1d. Infrastructure Improvements (Utility Plants, Access to Infrastructure, Wastewater Treatment) | \$ 500,000 |
| 1e. Administrative Expenses directly attributable to the construction, expansion, or modernization (Legal, engineering, permitting fees) | \$ 30,000 |
| 1f. Other Capital Investment | \$ 60,000 |
| 2. Operating Losses and other cash outflows until project cash flows breakeven | \$ 45,000 |
| 3. Workforce Development Costs | \$ 45,000 |
| 4. Other Uses of Funds | \$ 45,000 |
| Total Project Costs | \$ 4,725,000.00 |

Next

Steps

- Uses of Funds Form
- Sources of Funds Form
- Attestation

Uses of Funds Form

Complete the summarized project sources and uses. Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

Schedule A: Summation Across Projects – Cost Schedule (\$ USD)

| | |
|--|--|
| 1. Capital Investment | <input type="text" value="\$ 2,002,590,000.00"/> |
| NOFO 2 is only for supply chain projects with capital expenditures below \$300M. With the current proposed capital expenditure, this project is not eligible for this NOFO. Please apply under NOFO 1 for supply chain projects at or above \$300M in capital investment. | |
| 1a. Land | <input type="text" value="\$ 2,000,500,000"/> |
| 1b. Construction Costs (Labor, Materials) | <input type="text" value="\$ 1,000,000"/> |
| 1c. Equipment | <input type="text" value="\$ 500,000"/> |
| 1d. Infrastructure Improvements (Utility Plants, Access to Infrastructure, Wastewater Treatment) | <input type="text" value="\$ 500,000"/> |
| 1e. Administrative Expenses directly attributable to the construction, expansion, or modernization (Legal, engineering, permitting fees) | <input type="text" value="\$ 30,000"/> |
| 1f. Other Capital Investment | <input type="text" value="\$ 60,000"/> |
| 2. Operating Losses and other cash outflows until project cash flows breakeven | <input type="text" value="\$ 45,000"/> |
| 3. Workforce Development Costs | <input type="text" value="\$ 45,000"/> |
| 4. Other Uses of Funds | <input type="text" value="\$ 45,000"/> |
| Total Project Costs | <input type="text" value="\$ 2,002,725,000.00"/> |

Next

Steps

- Uses of Funds Form
- Sources of Funds Form
- Attestation

Uses of Funds Form

Complete the summarized project sources and uses. Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

Schedule A: Summation Across Projects – Cost Schedule (\$ USD)

| | |
|--|---------------|
| 1. Capital Investment | \$ 652,000.00 |
| 1a. Land | \$ 2,000 |
| 1b. Construction Costs (Labor, Materials) | \$ 10,000 |
| 1c. Equipment | \$ 50,000 |
| 1d. Infrastructure Improvements (Utility Plants, Access to Infrastructure, Wastewater Treatment) | \$ 500,000 |
| 1e. Administrative Expenses directly attributable to the construction, expansion, or modernization (Legal, engineering, permitting fees) | \$ 30,000 |
| 1f. Other Capital Investment | \$ 60,000 |
| 2. Operating Losses and other cash outflows until project cash flows breakeven | \$ 45,000 |
| 3. Workforce Development Costs | \$ 45,000 |
| 4. Other Uses of Funds | \$ 45,000 |
| Total Project Costs | \$ 787,000.00 |

Please make sure your units for your request is not in Thousands or Millions

Next

Steps

- Uses of Funds Form
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Sources of Funds Form

Complete the summarized project sources and uses. Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

Schedule B: Summation Across Projects – Sources Schedule (\$ USD)

| | |
|---|-----------------|
| 1. Equity Funding | \$ 500,000.00 |
| 1a. Sponsor Equity (Applicant and/or Corporate Parent) | \$ 500,000 |
| 1b. Third-Party Equity | \$ 0 |
| 1c. Other Equity Funding | \$ 0 |
| 2. Debt Funding | \$ 3,000,000.00 |
| 2a. Sponsor Debt | \$ 3,000,000 |
| 2b. Third-Party Debt (e.g., Bonds or Loans) | \$ 0 |
| 2c. Other Debt Funding | \$ 0 |
| 3. Government Support | \$ 620,000.00 |
| 3a. Anticipated CHIPS Direct Funding Request | \$ 500,000 |
| Please make sure your units for your request is not in Thousands or Millions | |
| 3b. Investment Tax Credit (estimated) | \$ 120,000 |
| 3c. State and Local Government Incentives (Grants + Loans + Tax Credits) | \$ 0 |
| 4. Other Sources of Funds | \$ 0 |
| Total Project Funding | \$ 4,120,000.00 |

The request for CHIPS funding exceeds 10% of project capital expenditures. Please provide your CHIPS Incentives Justification with a particular focus on (1) how your project advances economic and national security objectives and (2) why the additional funding is necessary to make the project commercially viable.

Please explain why your project's total costs exceed total sources of funds

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Sources of Funds Form

Complete the summarized project sources and uses. Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

Schedule B: Summation Across Projects – Sources Schedule (\$ USD)

| | |
|--|-----------------|
| 1. Equity Funding | \$ 500,000.00 |
| 1a. Sponsor Equity (Applicant and/or Corporate Parent) | \$ 500,000 |
| 1b. Third-Party Equity | \$ 0 |
| 1c. Other Equity Funding | \$ 0 |
| 2. Debt Funding | \$ 3,000,000.00 |
| 2a. Sponsor Debt | \$ 3,000,000 |
| 2b. Third-Party Debt (e.g., Bonds or Loans) | \$ 0 |
| 2c. Other Debt Funding | \$ 0 |
| 3. Government Support | \$ 5,120,000.00 |
| 3a. Anticipated CHIPS Direct Funding Request | \$ 5,000,000 |
| 3b. Investment Tax Credit (estimated) | \$ 120,000 |
| 3c. State and Local Government Incentives (Grants + Loans + Tax Credits) | \$ 0 |
| 4. Other Sources of Funds | \$ 0 |
| Total Project Funding | \$ 8,620,000.00 |

The request for CHIPS funding exceeds 10% of project capital expenditures. Please provide your CHIPS Incentives Justification with a particular focus on (1) how your project advances economic and national security objectives and (2) why the additional funding is necessary to make the project commercially viable.

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- Uses of Funds Form
- Sources of Funds Form**
- Attestation

Sources of Funds Form

Complete the summarized project sources and uses. Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

Schedule B: Summation Across Projects – Sources Schedule (\$ USD)

| | |
|--|--|
| 1. Equity Funding | <input type="text" value="\$ 500,000.00"/> |
| 1a. Sponsor Equity (Applicant and/or Corporate Parent) | <input type="text" value="\$ 500,000"/> |
| 1b. Third-Party Equity | <input type="text" value="\$ 0"/> |
| 1c. Other Equity Funding | <input type="text" value="\$ 0"/> |
| 2. Debt Funding | <input type="text" value="\$ 300,000,000.00"/> |
| 2a. Sponsor Debt | <input type="text" value="\$ 300,000,000"/> |
| 2b. Third-Party Debt (e.g., Bonds or Loans) | <input type="text" value="\$ 0"/> |
| 2c. Other Debt Funding | <input type="text" value="\$ 0"/> |
| 3. Government Support | <input type="text" value="\$ 5,120,000.00"/> |
| 3a. Anticipated CHIPS Direct Funding Request | <input type="text" value="\$ 5,000,000"/> |
| 3b. Investment Tax Credit (estimated) | <input type="text" value="\$ 120,000"/> |
| 3c. State and Local Government Incentives (Grants + Loans + Tax Credits) | <input type="text" value="\$ 0"/> |
| 4. Other Sources of Funds | <input type="text" value="\$ 0"/> |
| Total Project Funding | <input type="text" value="\$ 305,620,000.00"/> |

Provide your CHIPS Incentives Justification

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Uses of Funds Form

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Attestation

| |
|--|
| Attestation |
| Elements of this statement may have been prepopulated with data submitted previously. I have reviewed the information to be submitted for accuracy and made updates where necessary. |
| <input type="checkbox"/> |

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Uses of Funds Form

Sources of Funds Form

Attestation

Consortium and Partner Information

Is the applicant a part of a consortium?

* Response

Partnering Entities, if applicable

Are there other entities (e.g. customers, suppliers, investors, advisor(s)) you anticipate partnering with in a meaningful way?

* Response

Please describe any potential partners referred to above. (max. 1500 characters)

* Response

Next

Steps

Consortium and Partner Information

Project Information

Facilities Information

Facility Outputs

Attestation

Consortium and Partner Information

Is the applicant a part of a consortium?

* Response

Yes

Has anyone from the consortium already applied?

* Response

No

You will be given a Consortium Key on the following screen. Please share this key with your Consortium partners to use in their application. Describe your consortium partners.

Consortium Title

Group ABC

Consortium Description

ABC Group Consorts

Partnering Entities, if applicable

Are there other entities (e.g. customers, suppliers, investors, advisor(s) you anticipate partnering with in a meaningful way?

* Response

Yes

Please describe any potential partners referred to above. (max. 1500 characters)

* Response

This is a description of potential partners - separate from Consortium

Steps

- Consortium and Partner Information
- Project Information
- Facilities Information
- Facility Outputs
- Attestation

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Project Information

Consortium Details

Consortium? Yes

Consortium Id: ed21b22b-7268-aabb-9411-8aab1a360fa1

Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

Site Location

City

Danbury

State

Connecticut

ZIP Code

06811-0000

Site location not yet known

Previous

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Steps

Consortium and Partner Information

Project Information

Facilities Information

Facility Outputs

Attestation

Consortium and Partner Information

Is the applicant a part of a consortium?

* Response

No

Partnering Entities, if applicable

Are there other entities (e.g. customers, suppliers, investors, advisor(s)) you anticipate partnering with in a meaningful way?

* Response

Yes

Please describe any potential partners referred to above. (max. 1500 characters)

* Response

This is a description of potential partners - separate from Consortium

Next

Steps

Consortium and Partner Information

Project Information

Facilities Information

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Consortium and Partner Information

Is the applicant a part of a consortium?

* Response

Yes

Has anyone from the consortium already applied?

* Response

Yes

Please provide the Consortium Key. This was generated when another member of the Consortium applied.

Consortium Key

ed21b22b-7268-aabb-9411-6aab1a360fa1

Partnering Entities, if applicable

Are there other entities (e.g. customers, suppliers, investors, advisor(s) you anticipate partnering with in a meaningful way?

* Response

Yes

Please describe any potential partners referred to above. (max. 1500 characters)

* Response

This is a description of potential partners - separate from Consortium

Next

Steps

- Consortium and Partner Information
- Project Information
- Facilities Information
- Facility Outputs
- Attestation

Consortium and Partner Information

Is the applicant a part of a consortium?

* Response

No

Partnering Entities, if applicable

Are there other entities (e.g. customers, suppliers, investors, advisor(s) you anticipate partnering with in a meaningful way?

* Response

No

Next

Steps

- Consortium and Partner Information
- Project Information
- Facilities Information
- Facility Outputs
- Attestation

Facilities Information

Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

According to the NOFO, an application may include one project, a set of capital expenditures for the construction, expansion, or modernization of a single facility.

Name

Project Type

- Clear --
- Construction of New Facility
- Expansion or Modernization of Existing ...

Facility Type

Construction Start

Expected Total Capital Expenditures for...

Previous

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Steps

- Consortium and Partner Information
- Project(s) Information
- Facilities Information
- Facility Outputs

Facilities Information

Instructions for how to complete these questions are located here: <https://www.nist.gov/xyz>

According to the NOFO, an application may include one project, a set of capital expenditures for the construction, expansion, or modernization of a single facility.

Name

Project Type Facility Type

Project Start Production Total Expenditures for...

Steps

- Consortium and Partner Information
- Project(s) Information
- Facilities Information**
- Facility Outputs

Facility Outputs

| Name | Project Type | Facility Type | Number of Materials / Equipment Produced |
|------------|------------------------------|----------------------------------|--|
| Facility 1 | Construction of New Facility | Semiconductor Materials Facility | 2 |

EQUIPMENT

| Equipment Type | Peak Weekly Capacity | Unit of Production | Cost per Unit of Production | Proposed Price per Unit |
|----------------|----------------------|--------------------|-----------------------------|-------------------------|
| Deposition | 100 | Widget A | \$2.50 | \$12.00 |

MATERIALS

| Material Type | Peak Weekly Capacity | Unit of Production | Cost per Unit of Production | Proposed Price per Unit |
|---------------|----------------------|--------------------|-----------------------------|-------------------------|
| wafers | 200 | Widget B | \$100.00 | \$12.00 |

Enter Equipment Details

Equipment Type:

If Type = Other:

Other Type:

Peak Weekly Capacity:

Unit of Production:

Cost per Unit of Production:

Proposed Price per Unit:

Enter Material Details

Material Type:

If Type = Other:

Other Type:

Material Details:

If Material Details = Other - Other Description:

Specific Material:

Peak Weekly Capacity:

Unit of Production:

Cost per Unit of Production:

Proposed Price per Unit:

Material Uses:

Is Material Hazardous or Non-Hazardous?:

Method(s) of Delivery to Customers:

Container Size:

Container Size Units (e.g., Liters):

Steps

- Consortium and Partner Information
- Project Information
- Facilities Information
- Facility Outputs**
- Attestation

| Name | Project Type | Facility Type | Number of Materials / Equipment Produced |
|------------|------------------------------|----------------------------------|--|
| Facility 1 | Construction of New Facility | Semiconductor Materials Facility | 2 |

EQUIPMENT New

| Equipment Type | Peak Monthly Capacity | Unit of Production | Cost per Unit of Production | Projected Price per Unit |
|----------------|-----------------------|--------------------|-----------------------------|--------------------------|
| Deposition | 100 | Widget A | \$2.50 | \$12.00 |

Edit

MATERIALS New

| Material Type | Peak Monthly Capacity | Unit of Production | Cost per Unit of Production | Projected Price per Unit |
|---------------|-----------------------|--------------------|-----------------------------|--------------------------|
| wafers | 200 | Widget B | \$100.50 | \$12.00 |

Edit

Enter Equipment Details

Equipment Type:

If Type = Other
Other Type:

Peak Monthly Capacity:

Unit Of Production:

Cost per Unit of Production:

Projected Price per Unit: Save

Enter Material Details

Material Type:

If Type = Other
Other Type:

Material Details:

If Material Details = Other - Other
Description:

Peak Monthly Capacity:

Unit Of Production:

Cost per Unit of Production:

Projected Price per Unit:

Material Uses:

Is Material Hazardous or Non-Hazardous?:

Method(s) of Delivery to Consumers:

Container Size:

Container Size Units (e.g., Liters): Save

Attestation

Attestation

Elements of this statement may have been prepopulated with data submitted previously. I have reviewed the information to be submitted for accuracy and made updates where necessary.

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- Consortium and Partner Information
- Project Information
- Facilities Information
- Facility Outputs
- Attestation**

Workforce Development Information

View Confidentiality Statement

Consistent with the Notice of Funding Opportunity (NOFO 2) for the CHIPS Incentives Program – Commercial Fabrication Facilities, NIST will treat the submitted information as confidential business information (CBI). As a result, NIST will strive to protect the submitted information by applying controls commensurate with the FIPS-199 high for confidentiality level. Information that is populated in structured questions will automatically be labeled as Controlled Unclassified Information – confidential business information (CUI//PROPIN). When uploading free form documents, you are responsible for marking those documents for CBI. Please see the instructions and legend language set forth in the NOFO 2 at section IV.C.2. Proper markings on all submitted information will assist the Department in ensuring protection from disclosure as provided by 15 U.S.C. 4652 (with certain exceptions) and Exemptions 3 and/or 4 of the Freedom of Information Act, 5 U.S.C. 552, as applicable. Please see section IV.C.1 of the NOFO 2 for further information regarding confidentiality.

Instructions for completing this form are located here: [Insert Link]

Does the project require construction activities?

Response

No

Provide an estimate of the number of jobs that will be created during the production phase of the project(s). Do not include any jobs that will be performed outside of the United States.

Direct Jobs in Production: Enter an estimate for the number of jobs that will be directly involved in the operation of the facility or facilities. This includes all employees of the entity that will be onsite for activities relating to manufacturing, overhead, research & development, and administration.

* Number ...

2000

Indirect Jobs: Enter an estimate for the number of jobs that will be created in the broader ecosystem as a result of operating the facility or facilities. Examples include incremental needs for materials suppliers (e.g., silicon, chemicals, consumables), utilities suppliers, contractors for equipment needs (e.g., cleaning and repair), product transport, etc.

* Number ...

2000

Provide an explanation of your job creation estimates above. Provide any assumptions, sources, or other explanations for the estimates included for the direct or indirect jobs created.

* Response

Job creation explanation here

Next

Steps

- Workforce Development Information

Workforce Development Information

View Confidentiality Statement

Consistent with the Notice of Funding Opportunity (NOFO 2) for the CHIPS Incentives Program – Commercial Fabrication Facilities, NIST will treat the submitted information as confidential business information (CBI). As a result, NIST will strive to protect the submitted information by applying controls commensurate with the FIPS-199 high for confidentiality level. Information that is populated in structured questions will automatically be labeled as Controlled Unclassified Information – confidential business information (CUI//PROPIN). When uploading free form documents, you are responsible for marking those documents for CBI. Please see the instructions and legend language set forth in the NOFO 2 at section IV.C.2. Proper markings on all submitted information will assist the Department in ensuring protection from disclosure as provided by 15 U.S.C. 4852 (with certain exceptions) and Exemptions 3 and/or 4 of the Freedom of Information Act, 5 U.S.C. 552, as applicable. Please see section IV.C.1 of the NOFO 2 for further information regarding confidentiality.

Instructions for completing this form are located here: [\[Insert Link\]](#)

Does the project require construction activities?

Response

Yes

Provide an estimate of the number of jobs that will be created for any construction required for the project. Do not include any jobs that will be performed outside of the United States.

Direct jobs on the construction site: Enter an estimate for the number of jobs that will be directly involved in construction activities for the construction, expansion, or modernization of a facility. Examples include laborers and foremen for construction activities.

* Number of J...

2000

Indirect jobs: Enter an estimate for the number of jobs that will be indirectly involved in construction activities for the construction, expansion, or modernization of a facility. Examples include contracted equipment suppliers and technicians, architects and engineers consulted.

* Number of J...

2000

Provide an explanation of your job creation estimates above. Provide any assumptions, sources, or other explanations for the estimates included for the direct or indirect jobs created.

* Response

Job creation explanation here

Provide an estimate of the number of jobs that will be created during the production phase of the project(s). Do not include any jobs that will be performed outside of the United States.

Direct Jobs in Production: Enter an estimate for the number of jobs that will be directly involved in the operation of the facility or facilities. This includes all employees of the entity that will be onsite for activities relating to manufacturing, overhead, research & development, and administration.

* Number of Jobs

2000

Indirect Jobs: Enter an estimate for the number of jobs that will be created in the broader ecosystem as a result of operating the facility or facilities. Examples include incremental needs for materials suppliers (e.g., silicon, chemicals, consumables), utilities suppliers, contractors for equipment needs (e.g., cleaning and repair), product transport, etc.

* Number of Jobs

2000

Provide an explanation of your job creation estimates above. Provide any assumptions, sources, or other explanations for the estimates included for the direct or indirect jobs created.

* Response

Job creation explanation here

Next

Steps

Workforce Development Information

Consortium Narrative

View Confidentiality Statement

Has there been any changes to your consortium narrative since you submitted the Concept Plan? If there have been updates, consortium members may resubmit the narrative submitted as part of the concept plan.

Response

Submit a PDF attachment that provides a consortium narrative of no more than 8 pages. For complete details on the Consortium Narrative, please refer to the instructions ([link here](#)). The consortium narrative must include the following information, and each member is responsible for ensuring consistency across all related applications:

- i. The individual entities that are members or proposed members of the consortium and the roles of each entity
- ii. A narrative description of the consortium's overall strategic vision: how that vision aligns with the Department's economic and national security objectives; and the relevance of each proposed project to that vision
 1. Include an explanation of why the proposed projects are necessary to advance the consortium's vision, and why CHIPS funding is necessary to incentivize the relevant investment
 2. For consortia that include a state and/or local government (including quasi-governmental) entity, this narrative should also list any actions that entity is taking or intends to take to facilitate cluster development, such as efforts to coordinate with suppliers on site selection, infrastructure development, workforce development, permitting, and/or community engagement
- iii. The structure of the consortium, including how members intend to coordinate and/or collaborate with one another
- iv. If applicable, any documentation and evidence of the planned operating model, such as the governance structure, decision-making authority/rights, contractual obligations, financial obligations, roles and responsibilities, and any memoranda of understanding

Required Upload – 1 pdf of Consortium Narrative of no more than 8 pages indicating confidential pages in accordance with Section IV.C.2 of the NOFO

Upload

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Consortium Narrative

View Confidentiality Statement

Has there been any changes to your consortium narrative since you submitted the Concept Plan? If there have been updates, consortium members may resubmit the narrative submitted as part of the concept plan.

Response

Yes

No

Attachment that provides a consortium narrative of no more than 8 pages.

For details on the Consortium Narrative, please refer to the instructions (link

Consortium narrative must include the following information, and each

responsible for ensuring consistency across all related applications:

i. Individual entities that are members or proposed members of the

consortium and the roles of each entity

ii. A narrative description of the consortium's overall strategic vision: how that

vision aligns with the Department's economic and national security objectives;

and the relevance of each proposed project to that vision

1. Include an explanation of why the proposed projects are necessary to advance the consortium's vision, and why CHIPS funding is necessary to incentivize the relevant investment

2. For consortia that include a state and/or local government (including quasi-governmental) entity, this narrative should also list any actions that entity is taking or intends to take to facilitate cluster development, such as efforts to coordinate with suppliers on site selection, infrastructure development, workforce development, permitting, and/or community engagement

iii. The structure of the consortium, including how members intend to coordinate and/or collaborate with one another

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Full Application Narrative

View Confidentiality Statement

Consistent with the Notice of Funding Opportunity (NOFO) for the CHIPS Incentives Program – Facilities for Semiconductor Materials and Manufacturing Equipment, NIST will treat the submitted information as confidential business information (CBI). As a result, NIST will strive to protect the submitted information by applying controls commensurate with the FIPS-199 high for confidentiality level. Information that is populated in structured questions will automatically be labeled as Controlled Unclassified Information – confidential business information (CUI//PROPIN). When uploading free form documents, you are responsible for marking those documents for CBI. Please see the instructions and legend language set forth in the NOFO at section IV.C.2. Proper markings on all submitted information will assist the Department in ensuring protection from disclosure as provided by 15 U.S.C. 4652 (with certain exceptions) and Exemptions 3 and/or 4 of the Freedom of Information Act, 5 U.S.C. 552, as applicable. Please see section IV.C.1 of the NOFO for further information regarding confidentiality.

Submit a PDF attachment that provides the full application narrative. The full application narrative should be responsive to the program description (see section IV.H. of the NOFO) and the Evaluation Criteria (see section V.C of the NOFO). For complete details on the full application upload, please refer to the instructions ([link here](#)). PDF should include a table of contents. The full application must contain the following sections:

1. Table of Contents
2. Covered Incentive
3. Description of Project
4. Applicant Profile
5. Alignment with Economic and National Security Objectives
6. Commercial Strategy
7. Financial Information
8. Chips Incentive Request
9. Project Technical Feasibility
10. Environmental Questionnaire
11. Organization Information
12. Workforce and Community Investments

Required Upload – 1 pdf of Full Application Narrative indicating confidential pages in accordance with Section IV.H. of the NOFO

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Addendum to Full Application


View Confidentiality Statement

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Submit a PDF attachment that provides an Addendum to the Full Application

Required Upload – 1 pdf of Required Addendum

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Supplemental (Optional) Uploads

View Confidentiality Statement

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Submit any PDF attachments that provide supplemental information for the Full Application. The supplemental documents must be uploaded according to the sections in this full application:

1. Cover Page and Applicant Profile
2. Sources and Uses of Funds
3. Project Information
4. Workforce Development Information
5. Narrative Uploads (Organized by Narrative Section)
6. Letters of Reference

Optional Upload – 1 pdf of supplemental documentation for Cover Page and Applicant Profile

Upload

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Optional Upload – 1 pdf of supplemental documentation for Sources and Uses of Funds

Upload

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FileName Upload Date

Optional Upload – 1 pdf of supplemental documentation for Project Information

Upload

[Upload Files](#) Or drop files

FileName Upload Date

Optional Upload – 1 pdf of supplemental documentation for Workforce Development Information

Upload

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FileName Upload Date

Optional Upload – 1 pdf of Letters of Reference

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Supplemental (Optional) Uploads

Supplemental (Optional Uploads) - Narrative Sections

Financial Model Upload

Standard Forms

Supplemental (Optional Uploads) - Narrative Sections

Upload 1 pdf of any supplemental documentation for any section of the Narrative Upload:

Optional Upload - Table of Contents

Upload

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FileName Upload Date

Optional Upload - Covered Incentive

Upload

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FileName Upload Date

Optional Upload - Description of Project

Upload

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FileName Upload Date

Optional Upload - Applicant Profile

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Optional Upload - Alignment with Economic and National Security Objectives

Upload

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FileName Upload Date

Optional Upload - Commercial Strategy

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FileName Upload Date

Optional Upload - Financial Information

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Optional Upload - Chips Incentive Request

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Optional Upload - Project Technical Feasibility

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FileName Upload Date

Optional Upload - Environmental Questionnaire

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FileName Upload Date

Optional Upload - Organization Information

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[Upload Files](#) Or drop files

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Optional Upload - Workforce and Community Investments

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FileName Upload Date

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Financial Model Upload

Confidentiality Statement

Consistent with the Notice of Funding Opportunity (NOFO) for the CHIPS Incentives Program – Facilities for Semiconductor Materials and Manufacturing Equipment, NIST will treat the submitted information as confidential business information (CBI). As a result, NIST will strive to protect the submitted information by applying controls commensurate with the FIPS-199 high for confidentiality level. Information that is populated in structured questions will automatically be labeled as Controlled Unclassified Information – confidential business information (CU//PROPIN). When uploading free form documents, you are responsible for marking those documents for CBI. Please see the instructions and legend language set forth in the NOFO at section IV.C.2. Proper markings on all submitted information will assist the Department in ensuring protection from disclosure as provided by 15 U.S.C. 4652 (with certain exceptions) and Exemptions 3 and/or 4 of the Freedom of Information Act, 5 U.S.C. 552, as applicable. Please see section IV.C.1 of the NOFO for further information regarding confidentiality.

Provide a model displaying cash flow, income statement, and balance sheet projections, as well as relevant metrics in the form of a Microsoft Excel model with formulas. A white paper for the full application can be found at this link for reference: [Link]. Each model should include the following, as outlined in Section IV.H.8 in the NOFO:

1. Detailed Cash Flow Projections for the Project: Provide the cash flow projections on a levered and unlevered basis (as applicable). Provide quarterly cash flows through the first year of cash flow breakeven and then annually thereafter through the end of the facility's useful life. See NOFO section IV.H.8 for more detail on cash flows that should be included.
2. Project Income Statement Projections: Quarterly income statement projections through the first year of cash flow breakeven and then annually thereafter through the lifetime of the facility, including relevant cash flow items noted above as well as other items such as depreciation and amortization.
3. Project Balance Sheet Projections: Quarterly balance sheet projections through the first year of cash flow breakeven and then annually thereafter through the lifetime of the facility.
4. IRR: Project IRR on a levered and unlevered basis.
5. Key Project Financial Performance Metrics: Include summary metrics such as gross margin, EBITDA margin, EBIT margin, return on equity, return on assets, among other relevant metrics over time.
6. Key Project Risk and Debt Service Metrics: Include summary debt servicing related metrics such as Debt/Equity, Debt Service Coverage Ratio (DSCR), Debt/EBITDA, interest coverage, and asset coverage ratios over time.

Note: Applicants should provide Microsoft Excel and PDF attachments to the greatest extent feasible to support the information requested in the Financial Information section. In particular, the financial statements, project cash flows, and sensitivity analyses should be in the format of a dynamic, integrated spreadsheet in Microsoft Excel. The program should permit variable inputs to the key assumptions and clearly identify key inputs and assumptions in the model. Applicant and project-level financials should be prepared in accordance with Generally Accepted Accounting Principles or comparable standards (e.g., International Financial Reporting Standards). The income statement, balance sheet, and statement of cash flows should be linked, and the sensitivity analyses should be included as scenarios within the model.

Link to financial model whitepaper available here: [Insert Link]

Applicants may submit their own financial model but have the option of using the Full Application Example Financial Model available here: [Insert Link]

Financial models must include a summary of the expected revenues (broken down by number of units sold and price per unit), costs, and cash flows for the project, including key income statement, cash flow statement, and balance sheet information.

Required File Upload – Upload one Excel file that addresses the instructions above

Upload

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Optional File Upload – Upload additional or supporting documents to the Financial Model

Upload

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| FileName | Upload Date |
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Standard Forms

Please complete and upload SF-328, Certificate Pertaining to Foreign Interests. Link to form: [Insert Link]

Required File Upload – Upload one pdf file that addresses the instructions above

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Please complete and upload CD-511, Certification Regarding Lobbying. Link to form: [Insert Link]

Required File Upload – Upload one pdf file that addresses the instructions above

Upload

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Please complete and upload SF-LLL, Disclosure of Lobbying Activities (if applicable). Link to form: [Insert Link]

Optional File Upload – Upload one pdf file that addresses the instructions above

Upload

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Supplemental (Optional) Uploads

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Eligibility Questions

Please answer the following questions related to statutory requirements (insert link here) of the CHIPS Act. The CHIPS act specifies that the covered entity must have a documented interest in constructing, expanding, or modernizing an eligible facility. If you have answered a question in your narrative uploads, provide reference to the document(s), section(s) and page number(s) in your answer here. For more details refer to instructions/link here.

Describe how you are a "covered entity," meaning a nonprofit entity, a private entity, a consortium of private entities, or a consortium of nonprofit, public, and private entities with a demonstrated ability to substantially finance, construct, expand, or modernize a facility relating to materials used to manufacture semiconductors or semiconductor manufacturing equipment.

* Response

Describe how you satisfy each of these requirements: (See below)

Do you have a documented interest in constructing, expanding, or modernizing an eligible facility?

* Response

Have you been offered a covered incentive from a state or local jurisdiction?

* Response

Have you made commitments to worker and community investment, including through training and education benefits and programs to expand employment opportunity for economically disadvantaged individuals?

* Response

Have you secured commitments from regional education and training entities and institutions of higher education to provide workforce training, including programming for training and job placement of economically disadvantaged individuals?

* Response

Do you have an executable plan to sustain the facility without additional funding from the CHIPS incentives Program?

* Response

Have you documented your workforce needs and produced a strategy to meet such workforce needs?

* Response

Have you determined the types of semiconductor equipment and/or materials you will produce at the proposed facility, and the customers, or categories of customers, to whom the items will be sold?

* Response

Do you have an executable plan to identify and mitigate relevant semiconductor supply chain security risks, such as risks associated with access, availability, confidentiality, integrity, and a lack of geographic diversification in your supply chain?

* Response

To note regarding documented interest: If applying as part of a consortium with other applicants, you may work together to satisfy various statutory eligibility and other requirements

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● Eligibility Questions

Attest and Submit

The CHIPS Program Office (CPO) recognizes the importance of protecting confidential business information and will follow all applicable laws to protect such information, including, for example, the CHIPS Act, the Trade Secrets Act, and the Freedom of Information Act. Please refer to Section IV.C of the CHIPS Incentives Program – Facilities for Semiconductor Materials and Manufacturing Equipment Notice of Funding Opportunity (CHIPS-SMME-01 NOFO) for a further discussion of these laws

Submission Certifications

| |
|---|
| Attestation |
| The individual submitting the Application certifies on behalf of the applicant entity that the applicant information and data submitted and the representations made in the Application are true, complete and accurate, to the best of the applicant's knowledge and belief after due inquiry. |
| <input type="checkbox"/> |
| Attestation |
| The individual submitting the Application certifies on behalf of the applicant that the applicant understands that CPO and the Department of Commerce will rely on the accuracy and completeness of the applicant information and data submitted and the representations made in the Application and that any false, fictitious or fraudulent statement or representation made in the Application may be the basis for rejection of the Application or subject the applicant to criminal, civil, or administrative penalties. (18 U.S. Code, Section 1001.) |
| <input type="checkbox"/> |
| Attestation |
| The individual submitting the Application certifies on behalf of the applicant that the applicant understands that any applicant information and data contained in the Application may be accessed and used by federal employees, consultants and contractors in accordance with CHIPS-SMME-01 NOFO, Section IV.C. (Confidential Information). |
| <input type="checkbox"/> |
| Attestation |
| The individual submitting the Application certifies that they possess the full legal power and authority to submit the Application and make the preceding certifications on behalf of the applicant. |
| <input type="checkbox"/> |
| Attestation |
| The individual submitting the Application agrees that neither the applicant entity nor any of its affiliates may issue any press release or otherwise publicly disclose the status of the Application or the contents of any communications with CPO or the Department of Commerce without CPO's prior written consent. |
| <input type="checkbox"/> |
| Attestation |
| The individual submitting the Full Application certifies that they possess the full legal power and authority to bind the applicant. |
| <input type="checkbox"/> |

Company Name

Title

Applicant Name

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Attest and Submit

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