

APPLICATION FOR SHORT-TERM EXPRESS EXPORT CREDIT INSURANCE POLICY

PRINT

OMB No. 3048-0031 PENDING 2025

An online version of this application is available on EXIM's web site. EXIM encourages customers to apply online to facilitate our review and allow customers a faster response time. Additional information on how to apply for EXIM insurance can be found at EXIM's web site www.exim.gov

Send this completed application to EXIM, 811 Vermont Ave NW, Washington, D.C. 20571. EXIM will also accept E-mailed PDF and faxed applications. EXIM will not require the originals of these applications to be mailed. The application must be a PDF scan of the original application and all required documents. (Fax number: 202.565.3380, E-mail: exim.applications@exim.gov)

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 affiliates¹, including corporate owners and subsidiaries.

| Exporter | | | | | | | | | | | |
|--|-------------------------|-----------------|--------------------|----------------|-----------------------|----------------------|-----------------------|--|--|-------------------------------------|---------------------------|
| *Exporter Legal Name: | | | | | | Trade | style Name: | | | | |
| *Business Address: | | | | | *City | | | | *State: | | *Zip + 4: |
| Country: | | | | | | | | | | | |
| Contact Person: | | | | Title |) : | | | Phone #: | | | |
| E-mail: | | | Fax: | | | | | | | | |
| *DUNS #: | | | *U | IEI #: | | | | *Primary In | dustry NAIC | :S1: | |
| *Does the Exporter have any | affiliates ² | ² ?: | Yes | No | *Is there of | orporate ow | nership?: | Yes | No | | |
| *Name of ultimate parent com | pany: | | | | | | | | | | |
| *Annual sales volume: | | | *To | otal numbe | er of employe | es: | | | | | |
| *Woman-owned Business: | Yes | No | Decline t | o Answer | Race | (one or more | boxes may be | selected) | Ethnicity | | |
| *Minority-owned Business: | Yes | No | Decline t | o Answer | А | sian A | merican Indian o | or Alaska Nati | ve Blad | ck or African | American |
| *Veteran-owend Business: | Yes | No | Decline t | to Answer | Н | awaiian Native | e or Pacific Islar | nder | His | panic or Lat | no |
| *Disability-owned Business: | Yes | No | Decline t | to Answer | N | /liddle Eastern | of North Africar | n Whi | te De | cline to ansv | wer |
| 1A company's Primary Industry NAICS codes ² Affiliations exist when one individual or ent relationships with or ties to another entity, a | ity controls o | r has the po | wer to control and | ther or when a | third party or partie | s control or have th | he power to control b | of "primary indust ooth. Factors such a | ry" is set forth at 1 3s common owner | 3C.F.R. § 121.10 rship, common r | 7. nanagement, previou |
| Brokerage: | | | | | | | | | | | |
| General Questions | | | | | | | | | | | |
| How did you learn about EX | IM? | EXIM F | Regional Off | ice | Broker | Bank | EXIM RE | PP | U.S. Export | Assistand | e Center |
| | | Other | (explain): | | | | | | | | |
| 2. Primary reason for application | n: | Risk N | Mitigation | | Financing | E | ktend more co | mpetitive ter | ms | | |
| 3. Coverage Type Requested: | | Comp | rehensive (| Commerci | ial & Political) | Po | olitical Only | | | | |
| 4. Do you have a credit line with | a financ | cial instit | ution (exclu | de overdra | aft protection | and credit ca | ırds)? | Yes | No | | |
| 5. Do you have an (a) SBA Exp | ort Work | ing Cap | ital Loan? | Yes | No (b) | EXIM Work | ing Capital Lo | an? Ye | s | No | |
| 6. Do you wish to insure export | credit sa | ales mad | de by your a | ffiliates? | Yes | No | If 'Yes', answ | er the follow | /ing questio | ns: | |
| (a) Does each affiliate invoi | ce expor | t credit s | sales in its c | wn name | or tradestyle | ? Yes | No | | | | |
| (b) Are the credit decisions If "No", please comment: | of each a | affiliate o | centralized v | with this ap | oplicant? | Yes | No | | | | |
| (c) Are the products of each | | | | | | | Products section | on on page 2 | 2 of this app | lication? | Yes No |

Note: Your buyers, their guarantors (if any), and end users of the products must be in countries where EXIM is able to provide support, see EXIM's Country Limitation Schedule (CLS) at http://www.exim.gov. There may not be trade measures or sanctions against the good produced with the U.S. export under Section 201 of the Trade Act of 1974. For a list of products and countries with Anti-Duping or Countervailing Duty sanctions, see section AD/CVD Orders available at http://www.usitc.gov/trade_remedy/731_ad 701 cvd/investigations/active/index.htm. Trade sanctions are product and country specific (i.e., all firms within a country are subject to the

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Products

| coverage is available for the U.S. content only in each product with less than 50% U.S. content. Please indicate if you are seeking coverage for products with less than 50% U.S. content. (c) If the answer to 3(a) is "No" you may also obtain coverage on an aggregated basis for all products on an invoice, provided that a Content Report is submitted at the time of shipment (please see applicable). (d) If the answer to 3(a) is "No" you may also obtain coverage on an aggregated basis. (e) If the answer to 3(a) is "No" you may also obtain coverage on an aggregated basis. (f) If the answer to 3(a) is "No" you may also obtain coverage on an aggregated basis. (g) If the answer to 3(a) is "No" you may also obtain coverage on an aggregated basis. (g) If the answer to 3(a) is "No" you may also obtain coverage on an aggregated basis. (g) If the answer to 3(a) is "No" you may also obtain coverage on an aggregated basis. (g) If the answer to 3(a) is "No" you may also obtain coverage on an aggregated basis. (g) If the answer to 3(a) is "No" you may also obtain the policy manufactured or reconditioned with more than 50% U.S. content (labor, materials and direct overhead, but excluding net profility? (g) For Non-SBA Defined Small Businesses: Was each of the products to be covered under the policy. Manufactured of reconditioned in the U.S.? All made or reconditioned with more than 50% U.S. Ontent (labor, materials and direct overhead, but excluding net profility? All made or reconditioned with more than 50% U.S. Yes No Environmentally beneficial? Yes No No No No No No Part 20 the Code of Federal Regulations) Was No (Part 12) of the 22 of the Code of Federal Regulations) Used to support nuclear energy? Yes No Shipped from the U.S.? Yes No No No No No No No Part 20 the Code of Federal Regulations) Exporter Portfolio and Experience The following responses should include amounts attributable if you are insuring expect credit sales made by your affiliates. 1. Policy Payment Limit Requested (maximum expert receivables | 1. F | Products and/or service | ces to be exporter: | | | | | | | |
|---|------|---|----------------------------------|----------------------|--------------|---------------------------------------|--------------------|--------------|----------------|-----------|
| (a) For SBA defined Small Businesses Only: Was each of the products to be covered under the policy manufactured or recorditioned with more than 50% U.S. content (comprised of all direct and indirect costs including but not limited to, labor, materials, research and administrative costs. but excluding ret profit)? (b) If the answer to 3(a) is "No" because one or more of your products contains less than 50% U.S. content, then coverage is available for the U.S. content of your products with less than 50% U.S. content. Please indicate if you are seeking coverage for products with less than 50% U.S. content. Please indicate if you are seeking coverage for products with less than 50% U.S. content. Please indicate if you are seeking coverage on an aggregated basis for all products on an invoice, provided that a Content Report is submitted at the time of shipment (please see applicable East Sheet for information on aggregation). Please indicate if you are seeking coverage on an aggregated basis. (d) For Non-SBA Defined Small Businesses: Was seath of the products to be covered under the policy manufactured or reconditioned with more than 50% U.S. content (labor, materials and direct overthead, but excluding net profit)? (d) For Non-SBA Defined Small Businesses: Was seath of the products to be covered under the policy: Manufactured of reconditioned in the U.S.? (d) For Non-SBA Defined Small Businesses: Was seath of the products to be covered under the policy: Manufactured of reconditioned with more than 50% U.S. (d) For Non-SBA Defined Small Businesses: Was seath of the products to be covered under the policy: Manufactured of reconditioned with more than 50% U.S. (d) For Non-SBA Defined Small Businesses: Was seath of the explanation of the products of the covered under the policy: Manufactured of reconditioned with more than 50% U.S. (d) For Non-SBA Defined Small Businesses of the products of the pro | 2. F | Products NAICS code | (if known): | | | | | | | |
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| reconditioned with more than 50% U.S. content (labor, materials and direct overhead, but excluding net profit)? 4. Do you sell capital goods to foreign manufacturers or producers? (If Yes, attach explanation) 5. Are the Products to be covered under the policy: Manufactured of reconditioned in the U.S.? War No Environmentally beneficial? Yes No New? Was No Supporting renewable energy? Yes No Yes Yes No Content? Sold to military entities or security forces? Was No On the U.S. Munitions List? Yes No On the U.S. Munitions List? Yes No No No No No Part 121 of tills 22 of the Code of Federal Regulations) Used to support nuclear energy? Yes No Shipped from the U.S.? Exporter Portfolio and Experience The following responses should include amounts attributable if you are insuring export credit sales made by your affiliatos. 1. Policy Payment Limit Requested (maximum export receivables outstanding at any one time, NOT total sales for the year): 2. Year you began: Exporting: Exporting on credit terms (other than cash in advance or confirmed letters of credit): 3. Total export credit accounts (buyers) written off over the last three years: 5. Number of export credit accounts (buyers) written off over the last three years: 6. How many foreign buyers do you currently sell to on credit terms? 7. Amount of credit sales outstanding: 8. Total amount of export receivables past due by more than 60 days: 8. Total amount of export receivables past due by more than 60 days: \$ Applicant's Financial Highlights 1. Is the financial data parent-consolidated or combined with any other entity? 2. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: \$ Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ Operating Profit: \$ NET Profit of (Loss): \$ Statement Sales S | (c). | provided that a Con | itent Report is submitted at th | e time of shipmer | nt (please | e see applicable <u>Fact Sheet</u> | nvoice, | Yes | No | |
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| Used to support nuclear energy? Yes No Shipped from the U.S.? Yes No Exporter Portfolio and Experience The following responses should include amounts attributable if you are insuring export credit sales made by your affiliates. 1. Policy Payment Limit Requested (maximum export receivables outstanding at any one time, NOT total sales for the year): \$ 2. Year you began: Exporting: Exporting on credit terms (other than cash in advance or confirmed letters of credit): 3. Total export credit sales for the last three years: \$ 4. Total export credit losses for the last three years: \$ 5. Number of export credit accounts (buyers) written off over the last three years: 6. How many foreign buyers do you currently sell to on credit terms? 7. Amount of credit sales outstanding: \$ as of (date should be within 30 days of the current date) 8. Total amount of export receivables past due by more than 60 days: \$ Applicant's Financial Highlights 1. Is the financial data parent-consolidated or combined with any other entity? 2. Statement dates from (mm/dd/yyyy) to 3. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: \$ Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ Total Assets: \$ | | | | | | On the U.S. Munitions List? | ? Yes | No | No | No |
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| 6. How many foreign buyers do you currently sell to on credit terms? 7. Amount of credit sales outstanding: \$ as of (date should be within 30 days of the current date) 8. Total amount of export receivables past due by more than 60 days: \$ Applicant's Financial Highlights 1. Is the financial data parent-consolidated or combined with any other entity? 2. Statement dates from (mm/dd/yyyy) to 3. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: \$ Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ | 5. 1 | Number of export cred | dit accounts (buvers) written | off over the last th | nree vear | s: | | | | |
| 7. Amount of credit sales outstanding: \$ as of (date should be within 30 days of the current date) 8. Total amount of export receivables past due by more than 60 days: \$ Applicant's Financial Highlights 1. Is the financial data parent-consolidated or combined with any other entity? 2. Statement dates from (mm/dd/yyyy) to 3. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: \$ Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ | | | | | , | | | | | |
| (date should be within 30 days of the current date) 8. Total amount of export receivables past due by more than 60 days: \$ Applicant's Financial Highlights 1. Is the financial data parent-consolidated or combined with any other entity? 2. Statement dates from (mm/dd/yyyy) to 3. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: \$ Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ | | | | on credit terms: | | | | | | |
| 8. Total amount of export receivables past due by more than 60 days: \$ Applicant's Financial Highlights 1. Is the financial data parent-consolidated or combined with any other entity? 2. Statement dates from (mm/dd/yyyy) to 3. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: \$ Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ | 7. A | mount of credit sales | s outstanding: \$ | | | | | | | |
| Applicant's Financial Highlights 1. Is the financial data parent-consolidated or combined with any other entity? 2. Statement dates from (mm/dd/yyyy) to 3. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: Operating Profit: NET Profit of (Loss): Total Assets: \$ Foreitte. | о т | atal amount of avecer | t rassivables past due by ma | ra than 60 dayar | Φ. | (date should be wi | thin 30 days of | the currer | nt date) | |
| 1. Is the financial data parent-consolidated or combined with any other entity? 2. Statement dates from (mm/dd/yyyy) to 3. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: Net Sales: \$ | 0. 1 | otal amount of expon | receivables past due by mo | re man oo days. a | Φ | | | | | |
| 2. Statement dates from (mm/dd/yyyy) to 3. Statement type: Company Prepared CPA Compiled CPA Reviewed with Notes CPA Audited Tax Return Net Sales: \$ Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ | Аp | plicant's Financ | ial Highlights | | | | | | | |
| Net Sales: \$ Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ | | • | | , | entity? | | | | | |
| Operating Profit: \$ NET Profit of (Loss): \$ Total Assets: \$ | 3. S | statement type: | Company Prepared | CPA Compile | ed | CPA Reviewed with Notes | s CPA | Audited | Ta | ıx Return |
| NET Profit of (Loss): \$ Total Assets: \$ | | Net Sales: | \$ | | | | | | | |
| Total Assets: \$ | | Operating Profit: | \$ | | | | | | | |
| \$ Cavity. | | NET Profit of (Loss): | \$ | | | | | | | |
| Earlie. | | Total Assets: | \$ | | | | | | | |
| Equity. | | Equity: | \$ | | | | | | | |

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Buyer Information

OMB No. 3048-0031 01/31/2025

You can submit credit limit requests for up to 5 buyers. Answer the questions below for the first buyer. Attach separate sheets for any additional buyers. Check here if you do not want to submit any buyer credit limit requests with this application.

| Buyer Name | e: |
|--------------------------------|----|
|--------------------------------|----|

Business Address:

City: State/Province: Postal Code:

Country:

2. Requested Credit Limit: \$

3. Requested Terms: Open Account Cash Against Documents Unconfirmed Irrevocable L/C Promiossory Note

Documents Against Acceptance Documents Against Payment

4. Requested Maximum Tenor: Sight Payments 1-30 Days 31-60 Days 61-90 Days 91-120 Days

121-180 Days 181-270 Days 271-360 Days

5. Do you have any ownership interest in or familial ties with the buyer? Yes No If 'Yes', comment below:

6. Will the products be shipped directly to the buyer in the buyer's country? Yes No If 'Yes', comment below:

7. Is the buyer purchasing product(s) for resale to another country/countries? Yes No If 'Yes', comment below:

8. Any prior sales to the buyer? Yes No 9. Year of your first sale to the buyer (YYYY):

10. Any prior sales to the buyer on credit terms? Exclude any Cash-in-Advance or Letter of Credit sales.

11. Year of your first sale to the buyer on credit terms. Exclude any Cash-in-Advance or Letter of Credit sales:

12. Total sales made to the buyer on credit terms over the last three years. Enter '0' if the buyer is new to you: \$

Payment Terms Extended to the Buyer Over the Last 12 Months

13. Transaction Type: Open Account Cash Against Documents Unconfirmed Irrevocable L/C Promiossory Note

Documents Against Acceptance Documents Against Payment

14. Maximum Tenor: Sight Payments 1-30 Days 31-60 Days 61-90 Days 91-120 Days

121-180 Days 181-270 Days 271-360 Days

15.. What is the highest amount outstanding over the last 12 months for which you have been paid?: \$

16. Describe the buyer's history over the last 12 months: Prompt 1-30 Days Slow 31-60 Days Slow 61-90 Days Slow

90+ Days Slow No Experience

17. What is the amount now owed to you by the buyer? Enter '0' if none: \$

18. What is the total amount now more than 60 days past due? Enter '0' if none: \$

19. What is the reason for the buyer being past due to you?

20. Do you hold security on the amount past due? Yes No

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China and Transformational Exports Program

To determine if your transaction is eligible for Sec. 402 consideration, the answer to at least one of the following two questions must be "Yes":

Is your transaction facing competition from an entity backed by the People's Republic of China (PRC) - Section 402(A)?

Yes

No
Is your transaction one of the ten Transformational Export Areas or a related service - Section 402(B)?

Yes

At least one Transformational Export Area value must be selected in the table below if you have responded "Yes" to the 402(B) question immediately above.

| Transformational Export Areas | Export Value The value of the export largely consists of technology used to | Buyer End Use The foreign buyer will use the exports to | Justification |
|---|---|---|---|
| Artificial Intelligence | | | make the best decision given changing circumstances using computerized system, without direct human input or intervention |
| Biotechnology | | | use biological processes for industrial and other purposes |
| Biomedical Sciences | | | diagnose and/or treat medical conditions in humans with advanced medical equipment and processes |
| Wireless communications equipment | | | distribute information by means of digital electromagnetic transmission without the need for wires, optical fibers, or othersynthesized materials |
| Quantum computing | | | facilitate the implementation and use of quantum computers (application of qubit superposition processing) |
| Renewable energy, energy efficiency, energy storage | | | |
| Renewable energy | | | 1generate or use of energy produced from a naturally renewable source 2reduce energy loss or consumption in a |
| Energy efficiency Energy storage | | | system or application 3store energy with a capacity of 1kWh |
| Semiconductor and semiconductor manufacturing | | | make use of semiconductors or the U.S. semiconductor industry |
| Emerging financial technologies | | | improve or automate the delivery and use of financial services |
| Water treatment and sanitation | | | produce or distribute potable water for human consumption, or collect and/or treat wastewater, regardless of origin |
| High-performance computing | | | process more than 500 terabytes/day or exceed a speed of 500 teraflops/second |

Does this transaction require flexibilities to move forward?

Yes N

If yes, please provide a brief description below and your request will be reviewed by EXIM's CTEP division. If necessary, you can directly contact the CTEP team by sending an email to CTEP@exim.gov

Please provide additional comments if your business, products or selling terms are unique and require any special coverages or exclusions:

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CERTIFICATIONS AND SIGNATURE

OMB No. 3048-0031 PENDING 2025

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 of 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**. 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 |
| on behalf o | of | |
| | (Name of Applicant) | |
| | In witness whereof, I have hereunto signed my name thisday of | 20 |
| | Signature: | |

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 of an application.

Paperwork Reduction Act Statement: We estimate that it will take you about 0.5 hour(s) 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# 3048-0023 Washington, D.C. 20503.

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