

MUNICIPAL SECURITIES APPROVAL PROGRAM ("MSAP")

APPLICATION

Finance Authority of Maine P.O. Box 949 Augusta, Maine 04332-0949 1-800-228-3734 or (207) 623-3263 FAMEmaine.com

FINANCE AUTHORITY OF MAINE MUNICIPAL SECURITIES APPROVAL PROGRAM

BORROWER APPLICATION

TO BE COMPLETED BY THE BORROWER

(Note: Non-profit borrowers should contact FAME before completing this application.)

Legal Status: Corporation	Partnership	Individual
Address:		
Names and addresses of Office partnership.	cers and Directors of	corporation or members
President:		
Vice President:		
Secretary/Clerk:		
Treasurer:		
Directors of the corporation of	or members of the par	rtnership.
Location of present operation	(s) in Maine.	
Years at location:		

Offic	eer or official empowered to act on behalf of the Borrower.
Nam	e:
Addı	ress:
Tele	phone:
Posit	tion Title:
DIIC	INESS DESCRIPTION
<u>воз</u> А.	INESS DESCRIPTION Type of Business:
л.	Type of Business.
B.	Describe principal products and services:
C.	Describe market(s) serviced (geographic and customer base):
	Describe market(s) serviced (geograpme and eastomer base).
D.	Provide names and address of direct and/or principal competitors within state of Maine or a statement that there are none. (If none, state on what basis
you	concluded there are none). If competitor(s) within the State of Maine exist h hereto a draft copy of Notice of Hearing (attach separate sheet as
nece	ssary).
DDO	JECT DESCRIPTION
PKU	GECT DESCRIPTION
	fy that you have examined the allocation of loan proceeds on page 4 of the icipal Application.
	Reviewed and attest as accurate (initial)

	ide a detailed det as necessary).	escription of the use of the loan proceeds (attach a separate
Is th	is a relocation?	yesno
If ye	s, from where?	
Reas	on for relocation	n
—— Disp	osition of prope	rty abandoned as a result of this financing:
Does	s any portion of	the project include:
A.	· -	s at retail? yes no
		What portion of the project will be devoted to retailing (in terms of physical space).
		Dollar value of construction costs allocated to retail component of the project.
		Dollar volume of sales attributable to retail sales for most recently complete fiscal year.
		Projected annual retail sales as percentage of all sales.
B.	An office spa	ace component? yes no
		Square footage % of the project usable for office space.
		What portion of the project (in terms of physical space) is devoted to office space.
	•	y of the percentages of dollar amount are expected to change portion of the bond is outstanding.

Note: For projects involving a retail or office component, a copy of floor plans or blueprints must be submitted. For any retail component questioned by

the Authority, the Authority will require outside accountant certification analysis of retail sales volume.

4. ECONOMIC IMPACT OF THE PROJECT

The number of <u>new</u> direct (end user or committed tenant) full-time (at least 35 hours per week, 50 weeks per year) jobs to be created in Maine for Maine residents upon completion of he project (do not include project construction jobs or intrastate relocations)
Please provide documentation supporting this number and attach firm commitments from proposed tenants if the space is not owner occupied.
The number of Full and part time direct jobs retained which will be lost if the project is not completed as well as <u>new</u> part-time direct jobs created in Maine for Maine residents upon completion of the project (do not include project construction jobs or intrastate relocations).
Full-time retained
Part-time retained
Part-time created
Please provide documentation supporting these numbers.
Annual payroll of jobs identified in sections 4A & 4B above:
The current number of full-time employees in Maine:
The current number of part-time employees in Maine:
Export Sales
Total current dollar sales volume for products or services sold to customers outside of Maine:
Estimated <u>new or increase</u> in dollar sales volume due to completion of this project for products sold to customers outside of Maine:
Please describe the basis for your estimate of increased sales outside Maine.

5. <u>SPECIAL PROJECT IMPACT</u>

	Will this project provide or result in expanded markets for Maine natural resource products, or increase the productivity of a textile, apparel or footwear manufacturer? yes no
	If yes, explain.
В.	If your project involves the sale or distribution of goods, does your firm purchase 50% or more of its raw materials, supplies or inventory from other Maine firms that are unaffiliated? yes no If yes, explain
C.	Will this project make a significant contribution to the protection of the Maine environment including land, water and air resources?
	yes no If yes, explain
conti	
conti	t specific contribution(s) will this project make toward the economic growth, rol of pollution or betterment of health, welfare and safety of the residents of tate (other than responses to questions 4 & 5 above)?
will Mair	rol of pollution or betterment of health, welfare and safety of the residents of

		project is implemented, will there be sufficient demand in the market to the efficient capacity of existing competitors?		
	Explai	Explain:		
8.	POLL	<u>UTION</u>		
	A.	Do any of your activities cause any pollution or nuisance such as water or air pollution, odor, noise or dust?		
		Explain:		
	B.	What is the method of waste disposal?		
	C.	This project must be approved by the Department of Environmental Protection. Send the application for Certification directly to the Department of Environmental Protection and attach a copy of that application to this statement (see "Attachments" page 8). This project may also require the approval of other entities (see "Attachments" page 8).		
writing treated	l as pugg to the	All materials contained in the application, including attachments, will be blic information unless the Borrower specifically request and justifies in Finance Authority of Maine that certain components of the application be ifidential. Any such request must specifically state the statutory criteria of 75-A.		
this ap	plication	tification: I the undersigned certify that the information contained on on, including attachments, is correct and accurate. I further certify that I have so sign and submit this application to the Finance Authority of Maine on applicant.		
Date		Legal Entity		
		By: Its:		

ATTACHMENTS

Borrower must submit:

- 1. Application for "Assessment to the Finance Authority of Maine from the Department of Environmental Protection," as FAME receipt of this assessment from the Department of Environmental Protection is necessary prior to approval. This application must be submitted directly to the Department of Environmental Protection with a copy to the Finance Authority of Maine. No public hearings will be scheduled without Department of Environmental Protection approval.
- 2. Health care facility projects must supply copies of any applicable Certificate of Approval or Need from appropriate State and Federal health care supervisory agencies.
- 3. Energy projects require Public Utilities Commission and Office of Energy Resources review.
- 4. Water supply projects require approval from the Public Utilities Commission and the Department of Human Services.
- 5. Current Certificate of Good Standing from Maine Secretary of State.
- 6. Draft copy of Notice of Hearing to any competitor(s) within the state of Maine.
- 7. Completed Finance Authority of Maine Employment Plan.

Borrower Application and Municipal Application cannot be considered for approval unless all attachments are received and every item on the Borrower Application and in the Municipal Application is completed.

IN THE EVENT THAT THE AUTHORITY MUST RESERVE AN ALLOCATION OF THE STATE BOND CAP FOR YOUR PROJECT, THE BORROWER MUST PROVIDE THE AUTHORITY WITH AN EXECUTED COPY OF A COMMITMENT LETTER FOR BOND PURCHASE FOR PRIVATELY PLACED BONDS OR A FIRM LETTER OF INTENT TO UNDERWRITE OR PLACE THE BONDS FOR PUBLICLY FINANCED PROJECTS.

This completed Borrower Application, including all attachments, should be mailed together with the Municipal Application to:

Finance Authority of Maine 5 Community Drive P.O. Box 949 Augusta, Maine 04332-0949

FINANCE AUTHORITY OF MAINE MUNICIPAL SECURITIES APPROVAL PROGRAM

MUNICIPAL APPLICATION

TO BE COMPLETED BY MUNICIPALITY

Address:	
Zip:	County:
Name and title of	municipal official responsible for project oversight:
	Phone:
	ENTIFIC ATION
BORROWER IDI	
Address:	
PROPOSED PRO	<u>JECT</u>
Describe the proje	ect:
PROJECT LOCA	<u>TION</u>
Exact address or le	ocation description:
MUNICIPAL AC	<u>TION</u>
Date of Inducement	nt:
Date of Inducemen	

Name:	
Address:	
	Zip Code:
Principal Amount of Issue: \$	
Rate of Interest:	%
Term of Issue:	
COST OF PROJECT	
How site was acquired:	
DEMAND ON PUBLIC FACILITIES	
The municipality must identify complet	tely the impact upon public facilities tha
result from this project including cost a sheets as necessary).	• • • •
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sheets as necessary).	nd municipality cost recovery (attach se
PERMITS AND ZONING Have all permits necessary for constructions.	nd municipality cost recovery (attach see
PERMITS AND ZONING Have all permits necessary for construction yes	nd municipality cost recovery (attach section, use and occupancy been obtained?
PERMITS AND ZONING Have all permits necessary for construc	nd municipality cost recovery (attach section, use and occupancy been obtained?
PERMITS AND ZONING Have all permits necessary for construction yes	nd municipality cost recovery (attach section, use and occupancy been obtained)

<u>ADJO</u>	INING MUNICIPAL DETRI	<u>MENT</u>	
	his project have a detrimental	impact on an adjoinin	g municipality's facilities or
servic		no (If yes, exp	olain)
PUBL	IC BENEFITS		
What	specific public benefit(s) will	the municipality or sta	ate derive from this project?
A.	What are the estimated annua	al municipal taxes to	be derived from this project?
<u>ENVI</u>	RONMENTAL BENEFITS		
Will t	his project provide any substar	ntial environmental be	enefits?
	yes r	no (if yes, explain)	
COST	<u>ALLOCATION</u>		
Date of	of Land or Building Purchase:		
		New Construction <u>Project</u>	Expansion/ Renovation Project
Land		\$	\$
Land 1	Improvements	\$	\$
Buildi	ng	\$	\$
Fixtur	es	\$	\$

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MUNICIPAL CERTIFICATION

I certify that I am authorized to complete this application on behalf of the municipand that the information provided is true and accurate.		
Municipality	Name and Title of Authorized Municipal Official	
	Official's Signature	
	Date	

^{*} Total Cost of New Project plus Total Cost of Improvement.

The municipality must provide as part of the application:

- A copy of the signed and dated Inducement Resolution,
- A copy of the signed and dated Inducement Agreement,
- A complete letter of commitment or financing for a private placement,
- Commitment letters or letters of intent may be supplied subsequent to filing of application but will be required prior to FAME's public hearing for the issuance of a Certificate of Approval.



BOND FINANCING Fee Schedule

Municipal Securities Approval Program

Application Fee: \$5,000.

Issuance Fee:

Allocation required 0.20% (minimum \$5,000.) Allocation not required 0.10% (minimum \$2,500.)

Revenue Obligation Securities Program

Application Fee: \$5,000.

Issuance Fee:

Allocation required 0.30% (minimum \$10,000.)
Allocation not required 0.20% (minimum \$10,000.)

SMART, SMART-E, and Major Business Expansion Programs

Application Fee¹: \$5,000.

Commitment Fee2:

Calculated under Loan Insurance Program

Issuance Fee:

Allocation required 0.30% Allocation not required 0.20%

Annual Capital Reserve Fund Premium / Loan Insurance Fee: Calculated under Loan Insurance Program

- The Application Fee may be credited towards the Commitment Fee in accordance with the Rules governing the Loan Insurance Program.
 - Application Fees are payable at the time of applications and are nonrefundable.
 - Issuance Fees are due and payable upon issuance of the securities.
 - Fees have been established pursuant to Chapters 201 and 202 of the Rules of the Finance Authority of Maine.

FINANCE AUTHORITY OF MAINE EMPLOYMENT PLAN

In accordance with 10 MRSA Section 979, the Finance Authority of Maine requires that all applicants with more than ten (10) employees who receive financial assistance, describe any potential employment opportunities which may assist recipients of Aid to Families with Dependent Children. The information below must be provided as part of this process. This form will be released to a representative for the State's Employment and Training programs who will then contact the company about any training or openings specified in this application.

1.	APPLICANT IN	FORMATION		
Comp	oany Name:			
Proje	ct Address:			
Phone	e:	Fax:	E-Mail:	
If the	e expansion is occu	urring at a site other than the	main office, please complete the follo	wing
Office	e Address:			
Phone	e:	Fax:	E-Mail:	
	e indicate the com mation:	pany representative who sho	uld be contacted to follow-up on this	
Name Title:				
		Fax:	E-Mail:	
Descr	ribe principal prod	ucts/services:		<u> </u>
3. inforr	mation from the Fa	AME, application. ent employees: urrent employees in various jo	e any general employment-related b categories. rofessional Sales echnical Production	<u> </u>
	_		created as a result of FAME assistance	: :
	FT 	PT 1st year 2nd year 3rd year		

Revised October 2015

TOTÁL

Title(s) and brief job description(s) for all new positions. (Attach additional sheets, if ne	cessary.
4. TRAINING INFORMATION. In what ways could a training program assist your company?	
What training will your company provide?	
How would wage assistance be helpful in training new employees?	
What is your projected hiring schedule?	

For additional details and information, please contact FAME:

Finance Authority of Maine 5 Community Drive P.O. Box 949 Augusta, ME 04332-0949

1-800-228-3734 (207) 623-3263 (207) 623-0095 (207) 626-2717 info@famemaine.com Tel: Fax: TTY: E-mail:

URL: www.famemaine.com

FINANCE AUTHORITY OF MAINE DEPARTMENT OF ENVIRONMENTAL PROTECTION ASSESSMENT APPLICATION

NOTICE OF PROJECT INTENT

1.	Must be filed with the:	Attn: Kevin Nelson # 17 State House Sta Augusta, Maine 043	ation	al Protection
2.	Please indicate the appropria	Please indicate the appropriate section of the Statute for your application.		
	☐ Loan Insurance Sec. 10☐ Taxable Bonds Sec. 96☐ Tax Exempt Bonds (Re☐ Tax Exempt (Municipa	51 venue Obligation Secu		
Al	PPLICANT INFORMATIO	<u> N</u>		
1.	Contact person: Address:	Zip:		- - -
	Telephone:	Zip Fax:		_
2.	address:	-		ldress listed above, please provide that
	Contact person: Title: Address:	Zip:		_ _
	Telephone:			
3.	•		ES 🗆 NO	_
4.	. If the applicant is a Maine corporation, please submit a copy of the Certificate of Good Standing from th Maine Secretary of State. Certificate submitted?			
5.	. If the applicant is not a Maine corporation, please identify the state of incorporation:			
6.	. If the applicant is not a Maine corporation, is it registered with the Secretary of State? \Box YES \Box NO			
7.	If the applicant is commonl	y known by a name of	her than its legal	name, please provide that name:
<u>E</u> 1	– NVIRONMENTAL INFOR	MATION		_
1.	Will the project under consi	deration produce an in	dustrial liquid ef	fluent? YES NO
2.	Will the project under considera	tion produce an industria	l air emission?	□ YES □ NO

3.	Will the project under consideration involve the storage of more than 500 barrels of petroleum products and/or the handling and transfer of oil products in areas adjacent to tidal waters or the estuaries of tributaries? \Box YES \Box NO		
4.	Will the project under consideration exceed 20 acres, or, if adding to the site conditions in existence since 1970, will such an addition cause the cumulative size of the project site to exceed 20 acres? □ YES □ NO		
5.	. Will the project under consideration involve the construction of a new structure(s) occupying a ground are in excess of 60,000 square feet, or, if adding to an existing structure, which has been constructed since 197 will the addition cause the cumulative ground area of the structures to exceed 60,000 square feet? □ YES □ NO		
6.	Will the project under consideration involve the excavation of natural resources of: 1) three acres (this includes the cumulative area of all excavation since 1970) or, 2) 1,000 cubic yards per year? ☐ YES ☐ NO		
7.	Will the project under consideration result in the generation, treatment, storage, or disposal or any hazardou waste as defined in Chapter 850 of the regulations of the Maine Department of Environmental Protection VES NO		
sho	TE: If you answered YES to any of the questions in the Environmental Information, the project developerald contact the Maine Department of Environmental Protection as soon as possible to discuss the propose ect.		
PR	OJECT DESCRIPTION		
Ple	se describe in general terms the project in question. Please use additional space as necessary.		
<u>CF</u>	RTIFICATION		
I co	rtify that I am authorized to submit this application and I am familiar with the information contained in it and the best of my knowledge and belief such information is true, complete and accurate.		
Ap	licant (please print): Phone:		
Ap	licant Signature: Fax:		
Tit	e (print): Date:		
Bu	iness Address:		
FC	R ADDITIONAL DETAILS AND INFORMATION, PLEASE CONTACT FAME:		
	Finance Authority of Maine Tel: 1-800-228-3734		
	5 Community Drive (207) 623-3263 P.O. Box 949 Fax: (207) 623-0095		
	Augusta, ME 04332-0949 TTY: (207) 626-2717		

URL: www.famemaine.com

E-mail: <u>info@famemaine.com</u>

FINANCE AUTHORITY OF MAINE ENVIRONMENTAL QUESTIONNAIRE

1.	Name of Applicant:
2.	List all locations of the applicant's business:
	(State whether the applicant is the owner or lessee of any premises referred to above.)
3.	Describe briefly the nature of the applicant's business:
4.	List all real estate owned by the applicant or by any guarantors of the loan, including any real estate which may have been referred to above and all real estate which is to secure this loan. Please state location and describe whether residential, commercial or industrial and describe improvements. If any such real estate is commercial or industrial, describe the nature of any activities occurring al those premises, whether such activities are conducted by the applicant or any guarantor as owner of the real estate or by a tenant and indicate for how long such activity has been taking place. If known, describe prior uses or activities at any such locations:
	Regarding each piece of property, indicate date of transfer to current owner and state whether property was or mau have been included in a property description with any other properties at
5.	Please indicate if the applicant's business or any of the activities, past or present, at any of the properties referred to in 2 and 4 above, whether conducted by the applicant or any guarantor as owner or lessee of the real a state or by any other lessee, ever included any of the following: gas stations, car washes, auto, truck, bus or boat maintenance or repairs, auto dealers, auto body shops, chemical manufacturing, metal plating, electronic component manufacturing, machine shops, dry cleaning, tanning, coal, gas or tar plants, railroad yards, electrical substations, sand or gravel pits, pigfarms, landfills or junkyards:
6.	Identify all environmental or land use licenses, permits, approvals, authorizations, certifications, notices or filings which are required by any governmental agency for the applicant's business. Indicate those now held or delivered, date of issuance or filing and date of expiration or date of application (for those not yet held). If issued or filed, attach copies.
7.	Do the applicant's business operations involve the generation, treatment, storage or disposal of any hazardous wastes or substances as defined in Chapter 850 of the Regulations of the Maine Department of Environmental Protection, the Resource Conservation and Recovery Act, 42 U.S.C. §6901 et seq. ("RCRA") or the Comprehensive Environment Response, Compensation and Liability Act, 42 U.S.C. §9601 et seq. ("CERCLA"), or under any regulations implementing RCRA or CERCLA?

Revised October 2015

□YES □NO

	If yes, identify by chemical and trade name the type(s) of waste(s) and provide an estimate quantity	
	If yes, describe the process which uses or results in the substances or wastes, the methods of storage of any such substances or wastes, and the methods of disposal of any such wastes:	
8.	Have any activities at any of the locations referred to in 4 above, by current or prior owners, ever resulted in the generation of hazardous wastes at any time? \Box YES \Box NO If yes, has the facility been closed in accordance with all applicable laws and received certification of such? \Box YES \Box NO	
	Explain:	
9.	Are any hazardous substances or wastes transported to or from any of the applicant's business locations? $\hfill $	
	If yes, identify by chemical and trade names the type(s) of waste(s) and identify the location(s) to which any such wastes are transported:	
10.	Has an environmental site audit, history, review or assessment ever been performed at any of the locations listed in 4 above? $\ \square$ YES $\ \square$ NO	
	If yes, state at which location(s), when, the result(s) and attach a copy if available.	
11.	Are there or were there ever any above or underground oil or chemical storage tanks on any of the premises listed in 4 above? $\ \square$ YES $\ \square$ NO	
	If yes, indicate the number of tanks at each location, the age of each tank, the location of the tanks on site, the storage capacity of each tank, the contents of any such tanks, the DEP registration number of each tank or owner, whether the tanks are or will be abandoned, and whether and when any such tanks were ever removed or replaced:	
	If yes, indicate whether any tank has been precision tested or had a statistical analysis of product inventory done within the past year. If so, provide a copy of the results.	
12.	Have any of the locations referred to in 4 above ever been used as a junkyard, as a dump for any materials or as a disposal site for arty hazardous wastes or substances? $\hfill \mbox{YES} \hfill \mbox{NO}$	
	If yes, describe the nature and dates of any such use, the generator, if known, of any wastes, and the owner or operator of the site at the time of such use or disposal:	
13.	Do any of the locations referred to in 4 above contain any wastewater treatment lagoons or lagoons for the storage or treatment of any hazardous wastes? \Box YES \Box NO	
	If yes, describe age, capacity and nature of lagoons, and whether or not actively in use:	

If inactive, indicate when abandoned and whether the lagoons have been closed in a with applicable law and received certification of such:				
14.	Has there ever been a release or threat of release of oil or any hazardous wastes at any of the locations referred to in 4 above? $\ \square$ YES $\ \square$ NO			
	If yes, identify location(s), applicable dates and explain, stating whether the release was cleaned up and when:			
	State whether any such releases were reported to any agency of State or federal government and if so, when and to whom reported:			
15.	Do any of the locations referred to in 4 above contain any asbestos? \square YES \square NO			
	If yes, state at which location(s):			
16.	Is any location, referral to in 4 above located on or adjacent to any wetland (fresh water or coastal)? $\ \square$ YES $\ \square$ NO			
	If yes, identify the location(s):			
17.	Are there likely to be any emissions of any "air pollution" or "hazardous air pollutant" (as defined in Title 38 Section 582(3) M.R.S.A. of 1964 as amended, and in Section 582(7-G) of said Title, respectively, and any and all Regulations and Standards adopted pursuant to Chapter 4 of Title 38 M.R.S.A. of 1964, as amended) into the atmosphere at any of the locations listed in 4 above? $\hfill \square$ YES $\hfill \square$ NO			
	If yes, state at which location(s) and explain:			
18.	Has the applicant or any guarantor ever been subject to any governmental enforcement or compliance action or proceeding related to any property referred to in 4 above or to any licenses, permits, approval, authorization, certifications, notices or filings referred to in 5 above or to any environmental or land use laws or regulations? YES NO			
	If yes, explain:			
19.	Is the applicant or any guarantor aware of any environmental problems or potential environmental problems at any of the locations referred to in 4 above or at any other locations ever owned or used in an manner by the applicant or any guarantor, whether or not such problems have been identified by any federal, State or local authorities? YES NO			
	If yes, explain:			
	List all real estate ever owned or used by the applicant or any guarantor of the loan which is or may be the subject of environmental problems.			

20.	approval, authoriza	n by this applicant or any guarantor for an ation or certification ever been denied or not yes, explain:	t renewed?
ind		by certifies he/she has exercised due dilight the questionnaire and that the foregoing in knowledge.	
Pri	inted Name:		_
Sig	gnature:		_
Tit	:le:		_
Da	ite:		