

Upon approval, a Grow Maine SSBCI Eligibility Application will require submission of all attachments listed in the Lender Instructions before it will be approved for State Small Business Credit Initiative (SSBCI) funding.

Note: All direct investments require private financing leverage in the form of other private capital. All requests must exhibit a minimum leverage of three dollars of private capital for every dollar of SSBCI allocation including SEDI and VSB eligible applications of \$1 million or more. SEDI and VSB eligible investments and guarantees under \$1million require a one for one private capital match.

| INVESTOR INFORMATION | | | | | | | | |
|---|-----------------------------------|----------------------------|--|--|--|--|--|--|
| Has your institution signed a FAME Participation Agreement? | | | | | | | | |
| C Yes | No (if no, stop and contact FAME) | | | | | | | |
| Investment Institution Name | Federal Tax ID# | FDIC# | | | | | | |
| | | | | | | | | |
| Mailing Address | City/State/Zip | County | | | | | | |
| | | | | | | | | |
| Type of Investment Institution Direct Investment | Fund Investment | | | | | | | |
| Investment Officer Name | Title | | | | | | | |
| | | | | | | | | |
| Mailing Address (if different from above) | City/State/Zip | County | | | | | | |
| | - | | | | | | | |
| Email Address | Phone Number | | | | | | | |
| | | | | | | | | |
| INVESTMENT INFORMATION No investment may exceed \$5,000,000 or participate in financing exceeding \$20,000,000 | | | | | | | | |
| Is this application for | | | | | | | | |
| Direct Investment | Other | | | | | | | |
| SSBCI Funds Requested (must be new money investing) | Proposed Terms of Investment CI | Climate Aligned Investment | | | | | | |
| | | Yes No | | | | | | |
| Purpose of Investment | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Investment Structure (explain, attach separate sheet as necessary) | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |



Page 2 of 6

ELIGIBILITY REQUIREMENTS

- SSBCI fund must be the cause of the resulting financing proposal, (committed prior to all other sources of private capital)
- SSBCI request must leverage at least three dollars of private capital for every one dollar of SSBCI funds including SEDI and VSB eligible applications of \$1million or more.
- SEDI eligible investments must leverage one dollar of private capital for every one dollar of SSBCI funds
- SSBCI investments must be a new money request, recapitalization is not permitted except for special circumstances
- Private capital may be other loans, cash equity contributions of owners, or equity capital from outside sources
- No SSBCI funds from another institution participating in the same transaction is permitted
- Eligible business must employ less than 750 employees
- The maximum investment involving SSBCI related financing is \$5,000,000
- The maximum project related financing is \$20,000,000
- Investors must have at least 20% of their own capital participating in the proposed financing
- All proceeds involved in the proposed transaction must be for a business purpose
- Business purposes include acquisition of business owner occupied operating real estate, (Investment, residential or rental real estate is not permitted)
- Purchase of equipment machinery and equipment
- Working capital
- Business acquisitions, (Goodwill is not permitted if the transaction includes the purchase of a business any Goodwill must be financed separately.)

| Is this a new monev request? | 🖵 Yes | D No | | | | | |
|--|-------|------|--|--|--|--|--|
| Does it involve any refinancing? | Yes | □ No | | | | | |
| Is the applicant claiming SEDI status? | | | | | | | |
| | C Yes | □ No | | | | | |
| Does this transaction include New Markets Tax Credits? | | | | | | | |
| | Yes | □ No | | | | | |
| Does this transaction include any Goodwill? | | | | | | | |
| | Yes | No | | | | | |
| If yes, please indicate source of funds: | | | | | | | |



| BUSINESS INFORMA | TION | | | | | | | | | | | | |
|---|---|-------------|-------------------------|--------------|---|--|-----------|---|-----------------|-------------------------|-----|--|--|
| Legal Business and Investee Name | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Federal Tax ID Number | | | | NAICS Number | | | Date Es | Date Established State | | | | | |
| | | | | | | | | | | | | | |
| Mailing Address | | | City/State/Zip | | | | County | | | | | | |
| Business Contact | | | | Title | | | | | | | | | |
| | | | | | | | | | | | | | |
| Email Address | | | | | Phone Number Mobile Phone | | | | | | | | |
| | | | | | | | | | | | | | |
| Census Tract | Census Tract Gross Revenue (from recent t | | | | | nt tax return) Net Income (from recent tax return) | | | | | rn) | | |
| | | | | | | | | | | | | | |
| Is the applicant a minority-owned or controlled business?* Is the applicant a work on trolled business? | | | | | | | | Is the applicant a veteran-owned or controlled business?* | | | | | |
| □ Yes □ No □ Prefer not to respond □ Yes □ No □ Prefer not to respond □ Yes □ No □ Prefer not to respond | | | | | | not to respond | | | | | | | |
| *N01 | TE: Must b | e owne | ed or contr | rolled by at | least | 51% mino | ority, wo | oman, or Vete | ran to q | ualify. | | | |
| BUSINESS TYPE | | | | | | | | | | | | | |
| Proprietorship | | Partnership | | | | S-Corp | C-Corp | | | | | | |
| | | Co-Op | Op / ESOP | | | Nonprofit | | Other (describe) | | | | | |
| Is there any legal action currently pending or threatened against the applicant(s) or guarantor(s)? | | | | | | | | | | | | | |
| Employment Information (| (business | must h | ave less | than 750 e | emplo | yees) | | | | | | | |
| Current FTE Expected jobs created in two years | | | | | Expected jobs retained as a result of SSBCI funding | | | | | | | | |
| F | ull Time: | | _ Part Time: Temp: Full | | | | Full Ti | Time: Part Time: Temp: | | | | | |
| BUSINESS PRINCIPALS / GAURANTORS | | | | | | | | | | | | | |
| List all Partners or Stockholders and their ownership percentage. (Attach additional sheets if necessary.) | | | | | | | | | | | | | |
| Name & Title Add | | | Addr | dress | | | | | Phone Number | Ownership Percentage | | | |
| | | | | | | | | | % | | | | |
| | | | | | | | | | | | % | | |
| | | | | | | | | | | | % | | |



SIGNATURE and CERTIFICATION

By signing below, I represent that I am the individual authorized to complete this eligibility request on behalf of my organization and the above investee. I also certify that the information provided and submitted in connection with the application is true and accurate and fairly presents the initial request of my organization and status of the business. I authorize FAME to conduct appropriate review to make an eligibility determination.

All Lenders and Investor Partners are required to provide quarterly and annual reporting on their respective projects and continue to report for a ten-year period for all follow-on loans and investments, as described in detail in the U.S. Department of the Treasury, State Small Business Credit Initiative, Capital Program Reporting Guidance Revised September 30, 2022.

Authorized Investor Representative Signature

Date

Authorized Investor Representative Printed Name, Title

Special note: Investees may be eligible for special consideration if they are determined to be an eligible Socially Economically Disadvantaged Individual, (SEDI), or business, or business located in, or planning to locate in a SEDI area of the State Determined by Census Tract. To be determined eligible borrowers are required to self-certify using Exhibit D.

IMPORTANT

Eligibility Determination Application, and all required Exhibits, must be filled out completely and signed.

Incomplete forms will be returned to the Submitter for completion prior to any review by FAME.



FAME DISCLOSURE and CONFIDENTIALITY STATEMENT

Certain information in the Finance Authority of Maine's (FAME's) possession must be available for public inspection after an application for financial assistance is received. This information includes the names of applicants, including principals; the amounts, types, and general terms of financial assistance; description of projects and businesses benefiting from the assistance; the number of jobs and the amount of tax revenues projected in connection with a project; and the names of the financial institutions participating with the Authority.

Certain records at FAME are designated confidential and will not be available to the public for inspection. This includes the disclosure of records which would constitute an invasion of an individual's privacy, such as: personal tax returns, financial statements, assessments of creditworthiness or financial condition, records obtained by FAME in connection with any monitoring or servicing of an existing project, or the release of any records or information which FAME has determined could cause competitive detriment to a business or individual to whom the information belongs and/or pertains.

If an applicant wants certain information to remain confidential, the applicant must clearly identify what information or documents are to remain confidential. The applicant must also explain in writing the basis for such a request. Where the applicant asserts that the basis for the confidentiality request is that release of the information could cause a competitive disadvantage, or loss of a competitive advantage, the applicant must provide FAME with sufficient information to independently determine the likelihood of such a detriment. Applicants may wish to consult an attorney or FAME's legal counsel regarding the scope of public disclosure and confidentiality as it relates to FAME and the business seeking assistance.

FAME does not discriminate in the administration of any of its programs or in its employment practices based on race, color, national origin, age, gender, religion, physical or mental disability, political affiliation, marital status, or sexual orientation. FAME is an equal opportunity employer, provider, and lender.

SIGNATURE and CERTIFICATION

By signing below, I certify that I have read and understand the Finance Authority of Maine's (FAME's) Disclosure and Confidentiality Statement.

Authorized Investor Representative Signature

Date

Authorized Investor Representative Printed Name



APPLICATION CHECKLIST

Upon Approval of eligibility an Investor must complete and submit this Application Checklist as well as the following:

- Direct Investors that are eligibility approved
 - □ A fully approved copy of its Investment Commitment (Accepted Term Sheet, Stock Purchase Agreement, Subscription Agreement, Note Purchase Agreement, Capitalization Table, etc.)
 - List of investor committed/obligated funds, including Applicant and other participating investors / Lenders, with their respective Commitments
 - □ SSBCI Exhibit B Funds Requisition and Certifications
 - SSBCI Exhibit C must be signed by Company Representative and all Principal Owners / Guarantors
 - **L** Exhibit D Self Certification (if the Investee is SEDI eligible)

For more information regarding SSBCI eligibility visit FAMEmaine.com/grow.