Grow Maine - Investment
Exhibit B – SSBCI Recycled Funds
Reuse Request and Certifications Form

Please assign a "unique loan identifier" to each proposed transaction. This number must coincide with future reporting on your "Annual and Quarterly Reconciliation Reports" (Section 9.1). This form must be accompanied by: (a) the signed commitment letter and your certification that all preconditions to closing have been met and the investment is ready to close; and (b) Certification of the qualifying small business (Exhibit C). FAME must approve all investments prior to closing. **Terms used in this form if not defined herein shall have the same meaning as in the Participant Allocation Agreement between the Authority and the Participant (the "Participation Agreement").**

Participant:________________________________

Participant's EIN: ________________________________

Mailing Address:________________________________

Contract Officer:________________________________

Phone: ________________ **Email:**____________________________

Participant Loan ID #: ________________

Legal Name of Qualifying Small Business (Investee):

____

Investee EIN#: ________________________

NAICS 6-digit code for investee's industry: ________________________

Address: ____

____

Phone: ________________________

Census tract (11 digits total) State Code (2 digits) _____ **County Code: (3 digits)** ______

Tract Code (6 digits) ____________________ **(or attach Geocoding Search Result)**

Zip Code of principal location in Maine: ________________________

Investment will provide access to capital to: (check all that apply) (per SSBCI guidelines)

- ☐ **A Socially or Economically Disadvantaged Individual ("SEDI")-owned business**
- ☐ **A Very Small Business ("VSB")**

Investment will provide access to capital in: (check all that apply) (per HUD guidelines)

- ☐ **Low or moderate income community**
- ☐ **Minority community**
- ☐ **Other underserved community**

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The Investee is (check all that apply) (per HUD guidelines)
- ☐ **A woman or women owned business**
- ☐ **A minority owned business**

Investee's annual sales revenues in last fiscal year:______________________________

Year Investee was incorporated or established: _________________________________

Purpose of Investment (Project Description) (attach additional sheet if necessary):

____

Proposed Investment Structure: You must identify all other sources of funds by name (attach a separate sheet if necessary).

IMPORTANT: Identify if there is Goodwill in your project and report on a separate line item on the Sources and Uses table below and properly reflect which source of funding is paying for Goodwill. NO SSBCI FUNDS OR REQUIRED MATCHING FUNDS CAN PAY FOR GOODWILL.

SOURCES:		**USES**:	
SSBCI Recycled Funds Reuse Requested:	$		$
Lender (*name*): _________________	$		$
Qualifying Small Business:	$		$
Private/Non-Profit:	$		$
Private/For Profit:	$		$
Public (*name*): _________________	$		$
Other: _________________	$	Goodwill	$
TOTAL	**$** $ 0.00		**$** $ 0.00

Please note that the funding partners must directly account for a minimum of 20% of the SSBCI Funds Requested on their balance sheet (Private Capital at Risk – PCAR)

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On behalf of Participant, I certify that all pre-conditions set forth in Investee's financing commitment submitted herewith have been fulfilled, Investee and the project are eligible for funding under the Participant Allocation Agreement between Participant and FAME, and this loan is ready to close upon receipt of funds.

I further certify:

1. The SSBCI-supported investment is not being made in order to place under the protection of the SSBCI program prior debt that is not covered under the SSBCI program and that is or was owed by the investee to the investor or to an affiliate of the lender/investor.

2. If the SSBCI-supported investment is a refinancing, it complies with all applicable SSBCI restrictions and requirements in Sections VII.f and VIII.f of the SSBCI Capital Program Policy Guidelines (Exhibit A-2) regarding refinancing and new extensions of credit, including that the SSBCI-supported investment is not a refinancing of a loan or investment previously made to the investee by the Investor or an affiliate of the investor.

3. The investor is not attempting to enroll any portion of an SBA-guaranteed loan.

4. For an SSBCI-supported venture capital or equity investment, the investment complies with the venture capital program conflict of interest standards as set forth in Section VIII.f of the SSBCI Capital Program Policy Guidelines.

Neither the Participant nor any of its executive officers, directors, or principal shareholders, including immediate family members and related interests of such individuals, is an executive officer, director or principal shareholder of Borrower or an immediate family member or related interest of such individuals.

Signature of Participant's Officer: ________________________________**Date:** _________