



Application No. _____
(To be supplied by ESD once submitted)

Instructions: Only fill out this application, if you have answered “yes” to all the questions on the pre-application assessment available on ESD website. Once completed, sign and submit this application by email to BAP@esd.ny.gov.

APPLICATION FOR THE NEW YORK STATE SURETY BOND ASSISTANCE PROGRAM

Company Information:

Corporate Name _____

Corporate EIN/Tax ID _____

Mailing Address: (by fields: Street Address, Floor/Suite/etc., City, State, Zip Code)

Census tract: _____ Please go to this link to find your Census tract:
<http://www.ffiec.gov/Geocode/default.aspx> (Please provide the number as a 9 or 11 digit number. The first 2 digits will be the state code, followed by a 3-digit county code, followed by either a 4 or 6 digit census tract code)

Email: _____ Fax: _____

Contact Person: _____

Office phone: _____ Cell phone: _____

Company website: _____

1. What is your company’s trade? General Contractor Plumbing, Heating, HVAC Electrical/Cabling
 Interior Renovation/Trade Heavy Roadwork Highway, Bridge & Tunnel Construction
 Metal, Iron & Steel Works Masonry, Stone & Concrete Site Work Paving Other _____

Please list the **primary** NAICS code for your specific business/trade:

(Link to NAICS codes) <http://www.census.gov/eos/www/naics/>

2. Please list all principal owners and percentage of ownership: (Fields: Owner name, spouse’s name, Social Security number for both)

| | | | | |
|-----------------------|---------------------|---------------------|-----------------------------|-------------|
| Principal's Last Name | First Name | Birth Date | Social Security Number | % Ownership |
| | | | | |
| Spouse's Last Name | Spouse's First Name | Spouse's Birth Date | Spouse's Social Sec. Number | |
| | | | | |
| Principal's Last Name | First Name | Birth Date | Social Security Number | % Ownership |
| | | | | |
| Spouse's Last Name | Spouse's First Name | Spouse's Birth Date | Spouse's Social Sec. Number | |
| | | | | |
| Principal's Last Name | First Name | Birth Date | Social Security Number | % Ownership |
| | | | | |
| Spouse's Last Name | Spouse's First Name | Spouse's Birth Date | Spouse's Social Sec. Number | |
| | | | | |
| Principal's Last Name | First Name | Birth Date | Social Security Number | % Ownership |
| | | | | |
| Spouse's Last Name | Spouse's First Name | Spouse's Birth Date | Spouse's Social Sec. Number | |
| | | | | |
| Principal's Last Name | First Name | Birth Date | Social Security Number | % Ownership |
| | | | | |
| Spouse's Last Name | Spouse's First Name | Spouse's Birth Date | Spouse's Social Sec. Number | |
| | | | | |
| Principal's Last Name | First Name | Birth Date | Social Security Number | % Ownership |
| | | | | |
| Spouse's Last Name | Spouse's First Name | Spouse's Birth Date | Spouse's Social Sec. Number | |
| | | | | |

3. How long has the company been in business? _____ (years) Year Incorporated _____
4. How many employees for this company? _____ (do not include sub-contractors)
5. How many full-time equivalent employees? _____ (Example: Two part-time employees working 20 hours per week equal one full-time person working 40 hours per week).
6. Certifications: Please check all certifications that apply: Minority Women Disadvantaged
 Veteran 8(a) Other _____

7. Certified by (agency/agencies if more than one) _____
8. File number or certification number: _____
(Please list each certification number separately if more than one)
9. Credit score – please supply the owner’s and spouse’s credit scores. A free copy of a credit report may be obtained by any number of entities via various credit report websites.

Company owner credit score: _____ Company Ownership %: _____ Spouse of owner credit score: _____

Company owner credit score: _____ Company Ownership %: _____ Spouse of owner credit score: _____

Company owner credit score: _____ Company Ownership %: _____ Spouse of owner credit score: _____

Company owner credit score: _____ Company Ownership %: _____ Spouse of owner credit score: _____

If more than one owner, please provide the additional credit scores for all owner(s) and spouse. Note: % of ownership should equal 100%.

Work History:

10. In the past, has your company completed a contract that required a bond? Yes No
11. Does the company currently have a bond line? Yes No
12. If the answer to Question 11 is “Yes”, please list the bond line for both single and aggregate. Single is the largest amount qualified for one project, aggregate is the total number of bonds (in dollars) that the underwriter will approve at one time.

Single: \$ _____ Aggregate: \$ _____

Current surety (if known): _____ (not agent or broker but underwriting company)

13. What are the 3 largest completed contracts by your company:

| Name of Project Owner (who did you work for) | Contract Amount (\$) | Completion Date (month/ year) |
|--|----------------------|-------------------------------|
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |

14. In the last 36 months, what is the range, in \$ amount, of contracts completed:
\$ _____ (smallest) and \$ _____ (largest)

15. Estimated number of completed contracts per year: 1-10 11-25 25+
16. Average length of contract: _____ Months Years (please specify months, years, etc.)
17. In your trade, how many additional employees do you hire for each \$250,000 of contract value?

Financial History:

18. Does the company currently have a bank line of credit? Yes No If Yes, Amount: _____
19. Name of Bank issuing line of credit:

20. Annual Gross Revenues (before expenses) for past 3 years:

| | | |
|----------|----------|----------|
| 20__ | 20__ | 20__ |
| \$ _____ | \$ _____ | \$ _____ |

21. Annual Net Profit (after expenses) for past 3 years:

| | | |
|----------|----------|----------|
| 20__ | 20__ | 20__ |
| \$ _____ | \$ _____ | \$ _____ |

For any year there was a net loss, please indicate with a number in parentheses, ie (25,000).

22. Who prepares the company's financial statements? CPA Tax accountant Internal office/staff
Other

By submitting this application for access to the New York State Surety Bond Assistance Program, the undersigned applicant acknowledges and agrees that:

- (a) The Borrower authorizes the Surety Company to report to Empire State Development such information regarding the issuance of the surety to be enrolled into the New York State Surety Bond Assistance Program as Empire State Development may reasonably request and require;
- (b) As required by Section 3011(c)(2) of the federal Small Business Jobs Act of 2010, Contractor certifies that the principals (as defined below in this subparagraph) of Contractor have not been convicted of a sex offense against a minor (as such terms are defined in section 111 of the federal Sex Offender Registration and Notification Act (42 U.S.C. 16911)), and for the purposes of this certification, principal means the following: if a sole proprietorship, the proprietor; if a partnership, each partner; if a corporation, limited liability company, association or a development company, each director, each of the five most highly compensated executives, officers, or employees of the entity, and each direct or indirect holder of twenty percent (20%) or more of the ownership stock or stock equivalent of the entity.
- (c) Contractor certifies that it is not: a business engaged in speculative activities that develop profits from fluctuations in price rather than through normal course of trade, such as wildcatting for oil and dealing in commodities futures, unless

those activities are incidental to the regular activities of the business and part of a legitimate risk management strategy to guard against price fluctuations related to the regular activities of the business; or a business that earns more than half of its annual net revenue from lending activities; unless the business is a non-bank or non-bank holding company Community Development Financial Institutions; or a business engaged in pyramid sales, where a participant's primary incentive is based on the sales made by an ever-increasing number of participants; or a business engaged in activities that are prohibited by federal law or applicable law in the jurisdiction where the business is located or conducted. (Included in these activities is the production, servicing, or distribution of otherwise legal products that are to be used in connection with an illegal activity, such as selling drug paraphernalia or operating a motel that knowingly permits illegal prostitution); or a business engaged in gambling enterprises.

- (d) Contractor certifies that the BAP assistance provided will be used for a “business purpose.” Business purpose includes, but is limited to, start up costs, working capital, business procurement, franchise fees, equipment, inventory, as well as the purchase, construction renovation or tenant improvements of an eligible place of business that is not for passive real estate investment purposes, provided, however, that Contractor shall only use the BAP assistance as contemplated by this Program. The definition of business purpose excludes: activities that relate to acquiring or holding passive investments, such as commercial real estate ownership and the purchase of securities; and lobbying activities, as defined in Section 3(7) of the Lobbying Disclosure Act of 1995, P.L. 104-65, as amended.
- (e) Contractor certifies that the BAP assistance provided will not be used to: repay a delinquent federal or state income taxes; or repay taxes held in trust or escrow, e.g. payroll or sales taxes; or reimburse funds owed to any owner, including any equity injection or injection of capital for the business’ continuance; or to purchase any portion of the ownership interest of any owner of the business.
- (f) Contractor is not: an executive officer, director, or principal of Surety; or a related interest of such an executive officer, director, principal shareholder, or member of the immediate family.
- (g) The BAP program is funded by the State Small Business Credit Initiative and is overseen by the United States Department of Treasury (Treasury). Contractor shall retain all financial records, supporting documents, statistical records and all other records pertinent to the Contract, Bonds, Surety, Loss and this Application (collectively, the Records) for a period of three years from the date of submission by ESD to Treasury of the final quarterly report pursuant to the State Small Business Credit Initiative Allocation Agreement between Treasury and the State, except as Contractor may be otherwise notified by ESD. After, five years from the date of this Application and annually thereafter, Contractor may request ESD to inform Contractor as to whether the final quarterly report has been issued. Treasury, the Treasury Inspector General, the Comptroller General of the United States, the Comptroller of the State, the State, ESD, or any of their duly authorized representatives, have the right to any books, documents, papers, or other records of the Contractor that are pertinent to the BAP assistance, in order to make audits, investigations, examinations, excerpts, transcripts and copies of such documents. This right also includes timely and reasonable access to the Contractor’s officers, directors, employees, and personnel for the purpose of interview and discussion related to such documents. This right of access shall last as long as the records are retained, except that Treasury’s right of access expires on September 27, 2017.

Electronic signature _____ (type name in box)

Manual signature _____ (Must be manually signed in order to be considered complete and for review)

When completed, submit the entire document to: BAP@esd.ny.gov
Upon review by ESD, an application number will be issued to you via email.