



**CALIFORNIA INFRASTRUCTURE AND ECONOMIC DEVELOPMENT BANK (IBANK)
INDUSTRIAL DEVELOPMENT BONDS APPLICATION (IDBs)**

1. DATE SUBMITTED		2. DATE RECEIVED BY IBANK	
APPLICANT INFORMATION			
3. LEGAL NAME OF APPLICANT		4. a. DATE ORGANIZED b. PLACE THE APPLICANT ORGANIZED c. OWNERSHIP STRUCTURE <i>(e.g., corporation, partnership, sole proprietorship, etc.)</i>	
5. MAILING ADDRESS OF APPLICANT <i>(include street, suite #, city, county, state, ZIP code)</i> Street Suite # City County State ZIP Code		6. PRIMARY CONTACT INFORMATION Name: Title: Address (if different): Phone: E-mail: Website:	
7. OWNERS OF APPLICANT OWNERSHIP	% OF	8. CORPORATE OFFICERS	Title
9. DESCRIPTION OF APPLICANT'S BUSINESS, INCLUDING THE PRODUCTS MANUFACTURED			
10. NAMES OF MAJOR CUSTOMERS		11. WILL THE APPLICANT BE THE PROJECT USER? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", please complete the following section. Otherwise, skip to number 23.	
12. HOW DID YOU HEAR ABOUT IBANK?		13. UNEMPLOYMENT INSURANCE NUMBER	

PROJECT USER INFORMATION

14. LEGAL NAME OF PROJECT USER	15. a. DATE PROJECT USER ORGANIZED b. PLACE THE PROJECT USER ORGANIZED c. OWNERSHIP STRUCTURE <i>(e.g., corporation, partnership, sole proprietorship, etc.)</i>		
16. MAILING ADDRESS OF PROJECT USER <i>(include street, suite #, city, county, state, ZIP code)</i> Street Suite # City County State ZIP Code	17. PRIMARY CONTACT INFORMATION Name: Title: Address (if different): Phone: E-mail: Website:		
18. PROJECT USER - % OF USE	19. USER'S CORPORATE OFFICERS <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; border-bottom: 1px solid black; text-align: center;">Name</td> <td style="width: 20%; border-bottom: 1px solid black; text-align: center;">Title</td> </tr> </table>	Name	Title
Name	Title		
20. DESCRIPTION OF PROJECT USER'S BUSINESS, INCLUDING THE PRODUCTS MANUFACTURED			
21. NAMES OF MAJOR CUSTOMERS	22. UNEMPLOYMENT INSURANCE NUMBER		

PROPOSED PROJECT FIANCING INFORMATION					
23. DESCRIPTION OF PROJECT					
24. PURPOSE OF PROJECT					
25. TOTAL ESTIMATED PROJECT COSTS					
Land	Building	Equipment	Other	Total	
\$	\$	\$	\$	\$	
26. ESTIMATED AMOUNT TO BE FINANCED WITH TAX-EXEMPT AND/ OR TAXABLE BONDS					
A) TAX-EXEMPT BONDS:					
Land	Building	Equipment	Other	Total	
\$	\$	\$	\$	\$	
B) TAXABLE BONDS:					
Land	Building	Equipment	Other	Total	
\$	\$	\$	\$	\$	
27. SOURCE (S) OF OTHER FUNDS FOR THE PROJECT	28. DOES THE PROJECT INVOLVE RELOCATION FROM ANOTHER CALIFORNIA LOCATION? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", please explain the reasons for the relocation:				

29. PROPOSED CLOSING DATE	30. MATURITY Years	31. INTEREST RATE MODE <input type="checkbox"/> Fixed <input type="checkbox"/> Variable	
32. TYPE OF OFFERING <input type="checkbox"/> Public Offering <input type="checkbox"/> Private Placement	33. MINIMUM DENOMINATIONS \$	34. CREDIT ENHANCEMENT <input type="checkbox"/> None <input type="checkbox"/> Letter of Credit <input type="checkbox"/> Bond Insurance <input type="checkbox"/> Other (<i>specify</i>):	
35. NAME OF CREDIT ENHANCEMENT PROVIDER OR PRIVATE PLACEMENT PURCHASER (IF ANY): <input type="checkbox"/> Credit Enhancement Provider: <input type="checkbox"/> Private Placement Purchaser:	36. EXPECTED CREDIT RATING <div style="display: flex; justify-content: space-between;"><div>Borrower</div><div>Credit Enhancement Provider</div></div> <input type="checkbox"/> S&P <input type="checkbox"/> Moody's <input type="checkbox"/> Fitch <input type="checkbox"/> Unrated		
37. TYPE OF FINANCING: <input type="checkbox"/> Acquisition of Existing Facility <input type="checkbox"/> New Construction <input type="checkbox"/> Refunding (Please mark all of the above categories that apply.)			
38. CURRENT OWNER(S) OF EXISTING SITE			
39. OWNER(S) OF NEW SITE (IF APPLICABLE) For construction projects, provide the name of the construction company or developer completing the work: For property acquisition, provide the name of the seller:			
EMPLOYMENT CREATION/RETENTION INFORMATION			
40. CURRENT EMPLOYMENT			
Number of employees statewide	Total Payroll \$	Number of employees at Project site	Total Payroll \$
41. ESTIMATED EMPLOYMENT WITHIN TWO YEARS OF PROJECT COMPLETION (Provide a good faith estimate based on realistic assumptions.)			
Number of employees statewide	Total Payroll \$	Number of employees at Project site	Total Payroll \$
Number of <i>seasonal</i> employees statewide	Total Payroll \$	Number of employees at Project site	Total Payroll \$
42. WILL THE COMPLETION OF THE PROJECT ENABLE THE COMPANY TO RETAIN JOBS THAT WOULD OTHERWISE BE LOST? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," please describe in detail.			

PRINCIPAL FINANCE TEAM INFORMATION

43. UNDERWRITER/RMARKETING AGENT Contact: Title: Firm: Address: Phone: E-mail:	44. BOND COUNSEL Contact: Title: Firm: Address: Phone: E-mail:
45. UNDERWRITER'S COUNSEL Contact: Title: Firm: Address: Phone: E-mail:	46. DISCLOSURE COUNSEL Contact: Title: Firm: Address: Phone: E-mail:
47. TRUSTEE, PAYING & TENDER AGENT Contact: Title: Firm: Address: Phone: E-mail:	48. FINANCIAL ADVISOR/CONSULTANT (IF ANY) Contact: Title: Firm: Address: Phone: E-mail:

MISCELLANEOUS INFORMATION

49. DOES THE APPLICANT HAVE OTHER LOCATIONS IN CALIFORNIA? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", where?	50. DOES THE APPLICANT HAVE LOCATIONS IN OTHER STATES? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", where?									
51. HAVE INDUSTRIAL DEVELOPMENT BONDS BEEN ISSUED FOR THE APPLICANT, PROJECT USER, OR ANY RELATED COMPANIES? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", please answer the following: <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 30%;">Date Issued:</td> <td style="width: 30%;">Amount Issued: \$</td> <td style="width: 40%;">Balance: \$</td> </tr> <tr> <td>Date Issued:</td> <td>Amount Issued: \$</td> <td>Balance: \$</td> </tr> <tr> <td>Date Issued:</td> <td>Amount Issued: \$</td> <td>Balance: \$</td> </tr> </table>		Date Issued:	Amount Issued: \$	Balance: \$	Date Issued:	Amount Issued: \$	Balance: \$	Date Issued:	Amount Issued: \$	Balance: \$
Date Issued:	Amount Issued: \$	Balance: \$								
Date Issued:	Amount Issued: \$	Balance: \$								
Date Issued:	Amount Issued: \$	Balance: \$								

ADDITIONAL INFORMATION

Please provide the following additional information:

ATTACHMENT	DESCRIPTION OF INFORMATION:
A	- History of applicant, including applicant's mission and objectives.
B	- Names, titles, city and state of applicant's corporate officers and board members.
C	- Purpose and description of each facility or project to be financed, including estimated timeline with start and completion dates. For construction projects, provide the name of the Construction Company or Developer completing the work. For property acquisition, provide the name of the seller.
D	- Address of each facility to be financed with any project funds including street address, city, county, and ZIP code.
E	- Comprehensive description of the project public benefits (including, but not limited to: economic values added to the state, number of jobs created and retained and its environmental impacts).
F	- Description of any past, present or potential controversy connected with the project or financing.
G	- Project's sources and uses of funds.
H	- Project's permit status.
I	- Evidence of credit enhancement or intent to purchase bonds (if available).
J	- List of outstanding prior debt (tax-exempt and taxable).
K	- Contact information including name, title, firm, address, phone, and email address for all finance team members.
L	- Audited Financial statements for the three most recent fiscal years.
M	- Bylaws and Conflicts of Interest Policy (if any).
N	- Draft bond documents and copy of lease.

APPLICANT CERTIFICATION

I, *(name of signatory)* as *(name of position)*, an authorized officer of the *(name of applicant)*, certify that, to the best of my knowledge, the information contained in this application, including all attachments, is true and accurate. I certify the project is consistent with existing local or regional comprehensive plans.

Signature:

Date:

1- Please note that for Publicly Offered bond transactions the Underwriter must be listed on the California State Treasurer's Underwriter Pool. For more information, please refer to <http://www.treasurer.ca.gov/bonds/pools/underwriter.asp>.

IBank Fee Schedule for Industrial Development Bonds (IDBs)

Application Fee: The Application Fee is due when the application is submitted (non-refundable).

Par Amount	Application Fees
\$500,000 to \$10,000,000	\$2,000

Issuance Fee: The Issuance Fee is payable upon bonds/obligations closing.

Annual Fee: The Annual Fee is based on the par amount outstanding until the bonds/obligations are fully redeemed.

Par Amount	Issuance Fees	Annual Fees
\$500,000	\$1,250	\$500
\$1,000,000	\$2,500	\$500
\$5,000,000	\$12,500	\$500
\$10,000,000	\$25,000	\$500

Agent for Sale Fees for Industrial Development Bonds (IDBs)

State Treasurer's Office (STO) Agent for Sale Fee: On Public Offering transactions that the State Treasurer's Office acts as Agent for Sale, applicants will pay STO's Agent for Sale Fee directly to STO.

Par Value	Variable Rate Transactions Using Template Documents*	All Other Transactions
≤\$5,000,000	\$3,000	\$4,000
\$5,000,001 - \$10,000,000	\$4,000	\$6,000

*Template Documents involve the use of the PFD pre-approved form of bond purchase agreement/contract.

California Debt Limit Allocation Committee (CDLAC) Fee

CDLAC Fee: To obtain information regarding the California Debt Limit Allocation Committee (CDLAC) Application Fees, please refer to: <http://www.treasurer.ca.gov/cdlac/applications/idb/index.asp>.

Note: IBank IDB applicants do not need to submit a duplicate of CDLAC application to California Industrial Development Financing Advisory Commission (CIDFAC).

Please submit one original application, all attachments, and a check made payable to the California Infrastructure and Economic Development Bank for the *non-refundable* Application Fee, to the following:
California Infrastructure and Economic Development Bank
Attn: Bond Financing Unit Manager
P.O. Box 2830
Sacramento, CA 95812-2830

ATTACHMENT A

HISTORY OF APPLICANT INCLUDING APPLICANT'S MISSION AND OBJECTIVES

Note: If applicant is affiliated in any respect with a religious organization, please list the organization and explain the affiliation.

ATTACHMENT B

NAMES AND TITLES AND AFFILIATIONS OF APPLICANT'S CORPORATE OFFICERS AND BOARD MEMBERS

Officers	
[], Chief Executive Officer	
[], Chief Operating Officer	
[], Chief Financial Officer	
Board Members	
[], Choose an item.	Position: Affiliated Company: City, State:
[], Choose an item.	Position: Affiliated Company: City, State:
[], Choose an item.	Position: Affiliated Company: City, State:
[], Choose an item.	Position: Affiliated Company: City, State:
[], Choose an item.	Position: Affiliated Company: City, State:
[], Choose an item.	Position: Affiliated Company: City, State:
[], Choose an item.	Position: Affiliated Company: City, State:
[], Choose an item.	Position: Affiliated Company: City, State:

Please include details of any known relationships between the applicant or affiliate(s) of the applicant, with any of the key financing team members (i.e. common ownership, financial transactions or agreements aside from normal bond financing documents).

ATTACHMENT C

PURPOSE AND DESCRIPTION OF EACH FACILITY OR PROJECT TO BE FINANCED

Please provide:

1. Comprehensive purpose and description of each facility or project that requires financing; and

2. Complete the following Table and include Project photos and/or architectural renderings.

Project Site	Construction Start Date	Expected Construction Completion Date	Estimated Project Cost	Construction Company/Developer	Property Seller (for property acquisition)

**ADDRESS OF EACH FACILITY
TO BE FINANCED WITH ANY PROJECT FUNDS**

Please provide detailed address:

Street
Suite #
City
County
State
ZIP Code

Street
Suite #
City
County
State
ZIP Code

Street
Suite #
City
County
State
ZIP Code

ATTACHMENT E

COMPREHENSIVE DESCRIPTION OF PROJECT PUBLIC BENEFITS

All IDB projects approved through IBank must provide clearly defined public benefits. Please provide:

1. Comprehensive description of the organization's public benefits, as well as any that are associated with the facility (ies) (such as economic, cultural, educational, and environmental benefits and any job creation or retention).

2. Purpose of the Original Debt (s) that will be refunded and the related Trustee.

3. Complete the following Tables with highlights of Project (s) & Job Creation, Current Debt and Analysis of Refunding Cost Savings, if applicable. (Please add rows as needed.):

Project (s) & Jobs Information					
	Current Employees		Job Creation		
Project	Full Time	Part Time	Construction	Full Time	Part Time

Current Debt (Refunding Candidate)							
Bond Series/ Loans	Issuer	Issued Par Amount	Issue Date	Current Outstanding Balance	Interest Rate	Maturity Date	Date Project Completed

Analysis of Refunding Cost Saving				
Bond Series / Loans	Debt Service Savings/Yr.	PV of Total Savings	Ratio of PV Savings to the Par Amount of Refunded Debt	Public Benefits of PV Savings

*Present Value (PV)

Note: If Refunding will not result in any cost savings, please describe the reason(s) for refinancing.

**DESCRIPTION OF ANY PAST, PRESENT OR POTENTIAL CONTROVERSY
CONNECTED WITH THE PROJECT OR FINANCING**

PROJECT SOURCES AND USES OF FUNDS

Please provide a comprehensive accounting of the project, including:

- All sources of funds (including but not limited to bond funds, equity, donations, grants); and
- All uses of these funds.

Sample Sources and Uses:

Estimated Sources of Funds	Amounts	Estimated Uses of Funds	Amounts
Tax-Exempt Bonds Proceeds		Land Acquisition	
Taxable Bonds Proceeds		New Construction	
Borrower Funds		Renovation/Retrofit	
		Equipment/Furniture	
		Cost of Issuance	
Total Sources		Total Uses	

PROJECT PERMIT STATUS

1. Does the project currently comply with all applicable local land use and zoning ordinances (if no, please explain)?

2. Have all local approvals (other than building permits) necessary to begin construction been obtained (if no, please explain)?

3. List any discretionary permits not currently obtained and whether they will be obtained prior to issuance of the bonds.

4. List any non-discretionary permits required for operation of the project facilities that will not be obtained prior to issuance of the bonds.

**EVIDENCE OF CREDIT ENHANCEMENT
OR INTENT TO PURCHASE BONDS (if available)**

ATTACHMENT J**LIST OF OUTSTANDING PRIOR DEBT**

Outstanding Debt	Debt Type (Tax-exempt/taxable)	Issue Date	Issue Par Amount	Final Maturity	Current Outstanding Amount	Trustee

ATTACHMENT K

Finance Team Members' Contact Information

Contact: Title: Firm: Phone: E-mail:	Contact: Title: Firm: Phone: E-mail:
Contact: Title: Firm: Phone: E-mail:	Contact: Title: Firm: Phone: E-mail:
Contact: Title: Firm: Phone: E-mail:	Contact: Title: Firm: Phone: E-mail:
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Contact: Title: Firm: Phone: E-mail:	Contact: Title: Firm: Phone: E-mail:

**FINANCIAL STATEMENTS
FOR THE THREE MOST RECENT FISCAL YEARS**

ATTACHMENT M

BYLAWS AND CONFLICTS OF INTEREST POLICY (IF ANY)

ATTACHMENT N

Please include:

- Indenture
- Loan Agreement
- Bond Purchase Agreement
- Preliminary Official Statement (If applicable.)
- Current or Proposed Facility / Site Lease Agreement

Note: *IBank* prefers to receive these documents **with the application**. However, *IBank* will accept applications without these documents with the condition that these documents be received by *IBank* **no later than 35 days prior to the IBank Board Meeting date**. Substantially Final Draft of Bond Documents should be received **no later than 22 days prior to the IBank Board Meeting date**.

Please note that *IBank* requires a copy of the executed Applicant's Board Resolution (if applicable), authorizing the bond financing with *IBank*, **no later than 7 days prior to the IBank Board Meeting date**.

Reference to the IBank Board Meeting date in this ATTACHMENT M means the IBank Board Meeting at which the applicant wishes the request to be considered.

