

Applications for SSBCI Capital Programs User Guide

Version 2
Last updated: 05/24/2022

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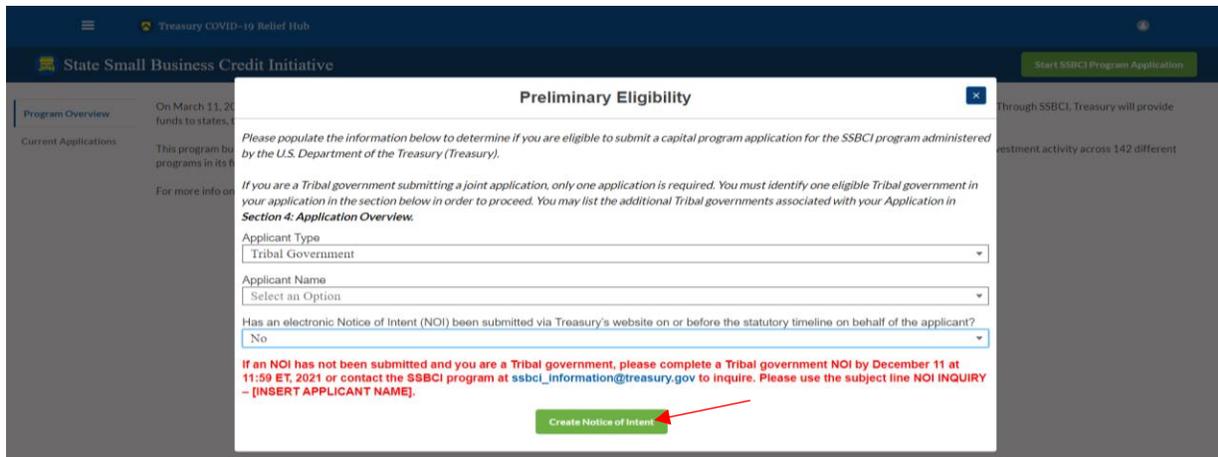
SSBCI Preliminary Eligibility and Application

Preliminary Eligibility

The SSBCI application process begins with determining your eligibility. Please populate the information seen below to determine if you are eligible to submit a capital program application for the SSBCI program administered by the U.S. Department of the Treasury (Treasury). If you are a Tribal government submitting a joint application, only one application is required. You must identify one eligible Tribal government in your application in the preliminary eligibility process to proceed. You may list the additional Tribal governments associated with your Application in **Section 4: Application Overview**.

Select or provide answers to the following:

1. **Applicant Type**
2. **Applicant Name**
3. **Has an electronic Notice of Intent (NOI) been submitted via Treasury’s website on or before the applicable deadline on behalf of the Applicant?**
 - if you are a Tribal government and answered “No” to this question, you will be prompted to complete a NOI. Click “Create Notice of Intent” to start your NOI.



Preliminary Eligibility

Please populate the information below to determine if you are eligible to submit a capital program application for the SSBCI program administered by the U.S. Department of the Treasury (Treasury).

If you are a Tribal government submitting a joint application, only one application is required. You must identify one eligible Tribal government in your application in the section below in order to proceed. You may list the additional Tribal governments associated with your Application in **Section 4: Application Overview**.

Applicant Type

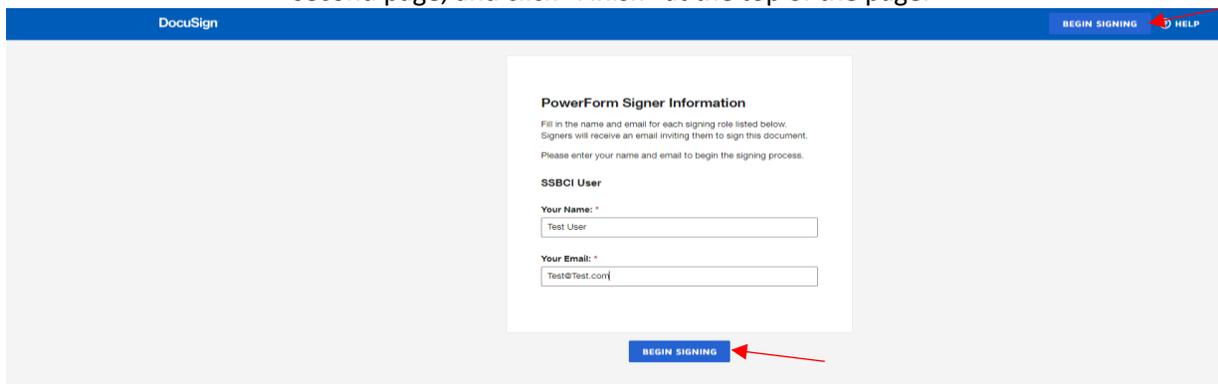
Applicant Name

Has an electronic Notice of Intent (NOI) been submitted via Treasury’s website on or before the statutory timeline on behalf of the applicant?

If an NOI has not been submitted and you are a Tribal government, please complete a Tribal government NOI by December 11 at 11:59 ET, 2021 or contact the SSBCI program at ssbc_info@treasury.gov to inquire. Please use the subject line NOI INQUIRY -- [INSERT APPLICANT NAME].

Create Notice of Intent

- Once you click “Create Notice of Intent,” a new tab for “DocuSign” will open. Enter your name and your email address and click “Begin Signing.”
- Fill in the two-page NOI form, electronically sign the form at the bottom of the second page, and click “Finish” at the top of the page.



DocuSign BEGIN SIGNING HELP

PowerForm Signer Information

Fill in the name and email for each signing role listed below. Signers will receive an email inviting them to sign this document. Please enter your name and email to begin the signing process.

SSBCI User

Your Name: *

Your Email: *

BEGIN SIGNING

NOTICE OF INTENT TO APPLY

I hereby notify the Department of the Treasury ("Treasury") that

"Applicant" intends to apply for approval to be a participating State under Treasury's State Small Business Credit Initiative. The Applicant intends to file a complete application with Treasury no later than 5:00 pm ET December 11, 2021.

Authorized Official for the Applicant	
First Name	Last Name
Title	Email
Organization	
Street	City
State	Zip Code
Phone	Additional Phone

Contact Person

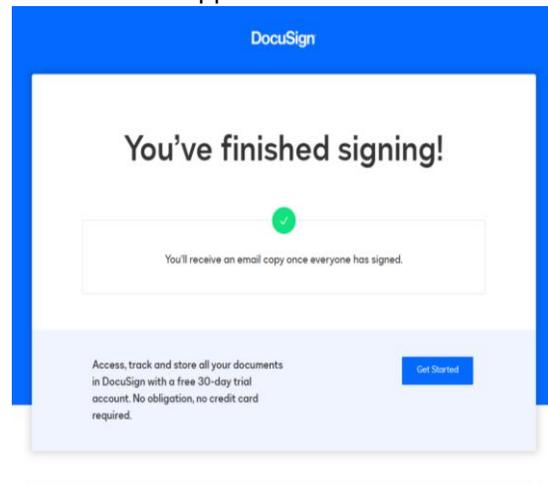
First Name	Last Name
Title	Email
Organization	
Street	City
State	Zip Code
Phone	Additional Phone

Signature of Authorized Official

The undersigned affirms that the undersigned is authorized to file this Notice with Treasury on behalf of the Applicant. The Authorized Official for a Tribal government must be an individual within the Tribal government designated on behalf of the Tribal government or a delegated third party. If the Authorized Official is a delegated third party, a Tribal resolution or other delegation of authority signed by the Tribal's primary Tribal leader authorizing the third party to act on behalf of the Tribal government for the purposes of submitting this Notice must be uploaded with this form or submitted to ssbci_information@treasury.gov.

Signature: Date: 12/16/2021

- Click close and you will receive a confirmation in an email to the email address you provided that "You've finished signing." You will also receive your NOI number in the email and can proceed with the application.



- What is the Unique Identifier (ID) associated with the submitted NOI?**
- Please confirm this is the state, territory, the District of Columbia, or Tribal government you intend to apply on behalf of.**
 - If you are a Tribal government and answered "No" to this question, you will be asked to complete an NOI. If you are a state, the District of Columbia, or territory and answered "No" to this question, you will be asked to contact SSBCI at [SSBCI_Information@treasury.gov](mailto:ssbci_information@treasury.gov) for further assistance. Please use the subject line NOI INQUIRY – [INSERT APPLICANT NAME]."
 - Otherwise, proceed with the next steps.

Once the steps above have been completed, you will be able to "Create your SSBCI Application" and will automatically proceed to SSBCI's application portal.

Application Highlights

The SSBCI application consists of the following 10 sections:

- Section 1: User Instructions
- Section 2: Application Documents
- Section 3: Definitions of Terms
- Section 4: Application Overview
- Section 5: Entity Information
- Section 6: Awardable Amount
- Section 7: Program Overview
- Section 8: Program Details
- Section 9: Compliance & Oversight
- Section 10: Application Certification

Provide instructions, downloadable documents, and background information.

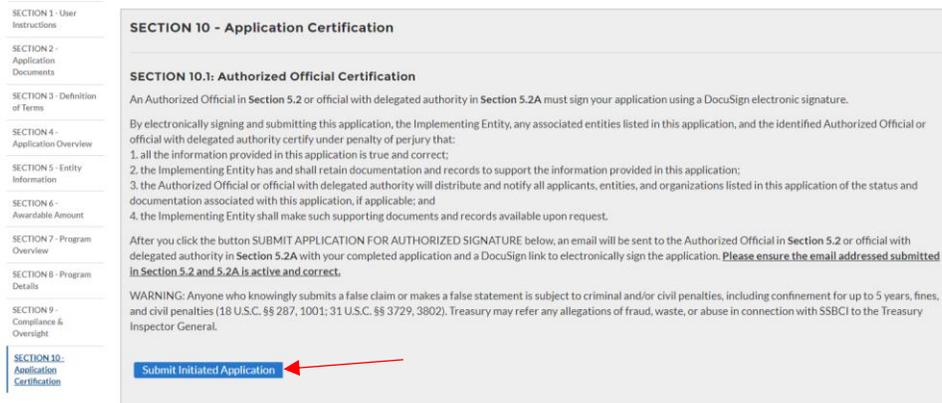
Includes questions to answer or fields to populate. Please answer each question or enter information in each field in accordance with the instructions in the section.

As indicated in the [Notice Regarding Applications for State Small Business Credit Initiative](#) issued on September 27, 2021 on Treasury’s website, applications for SSBCI capital programs must be initiated by December 11, 2021. This “Initiated Application” is defined as the sections listed below and requires applicants to complete and submit these sections by December 11, 2021 at 11:59 p.m. ET.

- *Section 4.1: Applicant Overview*
- *Section 4.1A: Joint Application (if applicable)*
- *Section 4.2: Application Contacts*
- *Section 4.2A: Permission to Share Contact Information*
- *Section 5.1: Implementing Entity*
- *Section 5.2: Authorized Official*
- *Section 5.2A: Delegation of Authority (if applicable)*
- *Section 6.1: Applicant Awardable Amount: Statement on Legal Actions and the Question on Qualifying Loan or Swap Funding Facility*
- *Section 7.1: Program Overview*

In the “Application Portal” the required fields for an “Initiated Application” in these sections are marked in red as:
“(Required for Initiated Application)”

The Initiated Application is not considered complete until you have clicked the “Submit Initiated Application” button in **Section 10: Application Certification**.



The screenshot shows the application portal interface. On the left is a vertical navigation menu with links for SECTION 1 - User Instructions, SECTION 2 - Application Documents, SECTION 3 - Definition of Terms, SECTION 4 - Application Overview, SECTION 5 - Entity Information, SECTION 6 - Awardable Amount, SECTION 7 - Program Overview, SECTION 8 - Program Details, SECTION 9 - Compliance & Oversight, and SECTION 10 - Application Certification. The main content area displays the details for SECTION 10 - Application Certification, including SECTION 10.1: Authorized Official Certification. A red arrow points to the 'Submit Initiated Application' button at the bottom of the page.

All remaining sections, also referred to as the “Full Application,” of the capital program application are due by February 11 at 11:59 p.m. ET, 2022. Applicants may also amend portions of their submitted “Initiated Application” from December 12, 2021, to February 11 at 11:59 p.m. ET, 2022.

After completing a section, you must click the NEXT button at the bottom right corner of the screen to save your responses and advance to the next section.

At any time, you may also click the SAVE button on the bottom right corner of the screen to save an application in progress. Once an Initiated or Full application in progress is saved, you may return to it later to amend or complete your Application.

The last section “Certification and Signature” will require an Authorized Official of your implementing entity to certify and electronically sign the application using a DocuSign electronic signature. After you finish filling out the application, an email with a DocuSign link will be sent to the email address of the Authorized Official you identify in **Section 5.2** allowing them to electronically sign and submit the application. Your application is not complete until the Authorized Official has certified and submitted the application. Please be sure to monitor the email address identified in **Section 5.2** during the submission process.

After the application is completed, electronically signed, and submitted successfully, the primary and secondary contacts identified in **Section 4.2** will receive an automated confirmation email from Treasury.

If you have any additional questions, please contact ssbci_information@treasury.gov.

For additional information on SSBCI, please see the [SSBCI homepage](#).

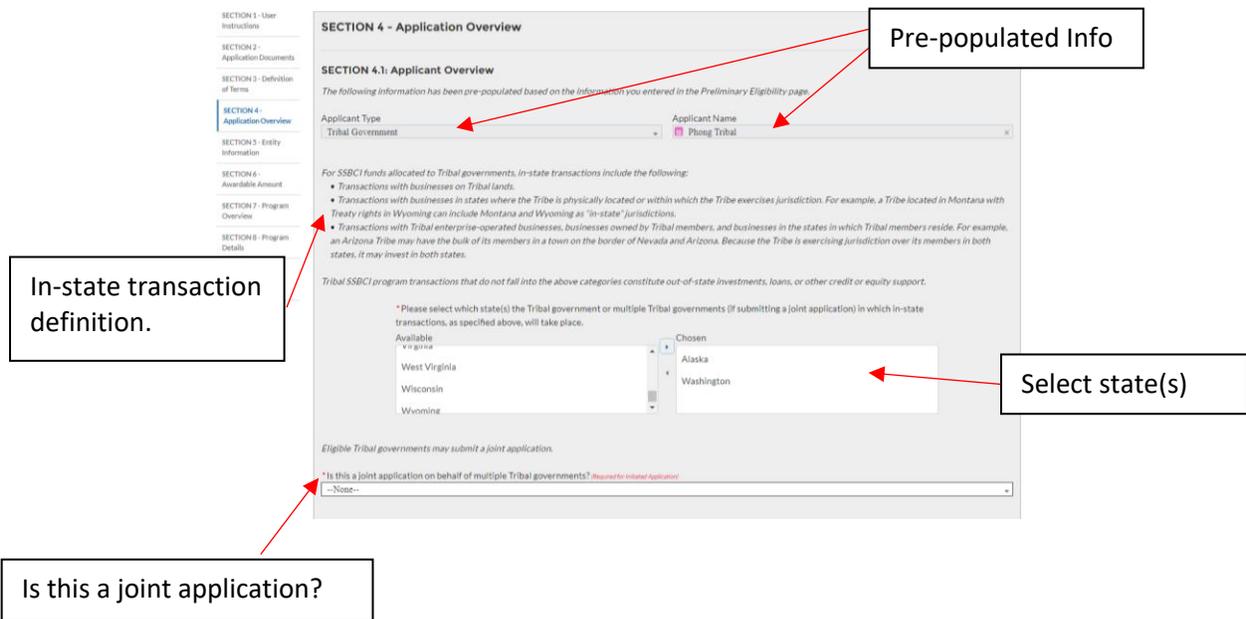
Application Portal - (Sections Required for the Initiated Application)

Application Section 4: Application Overview

Section 4.1: Applicant Overview (Required for Initiated Application)

The information on Applicant Type and Applicant Name will be pre-populated based on the information you entered in the Preliminary Eligibility page.

If Applicant Type is Tribal government, select the state(s) of the United States that the Tribal government “in-state” transactions will take place and indicate if this is a joint application on behalf of multiple Tribal governments. (Go to **Section 4.2: Application Contacts** if Applicant Type is not Tribal government)



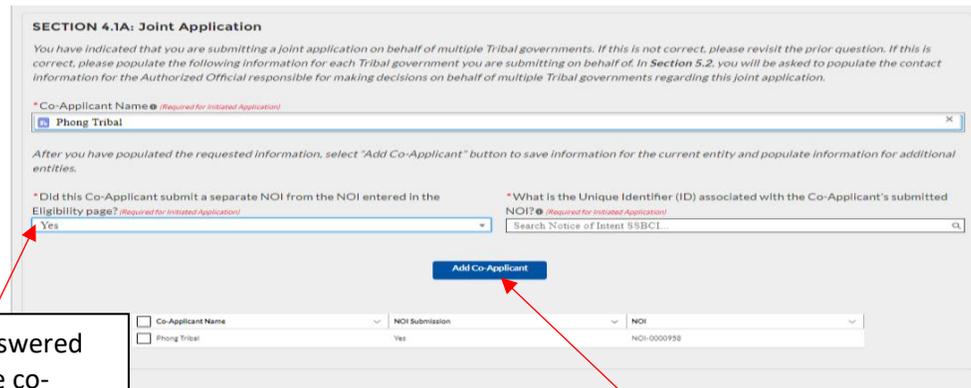
The screenshot shows the 'SECTION 4 - Application Overview' page. On the left is a navigation menu with sections 1 through 8. The main content area is titled 'SECTION 4.1: Applicant Overview' and contains the following information:

- Applicant Type:** Tribal Government (pre-populated)
- Applicant Name:** Phong Tribal (pre-populated)
- In-state transaction definition:** For SSBCI funds allocated to Tribal governments, in-state transactions include:
 - Transactions with businesses on Tribal lands.
 - Transactions with businesses in states where the Tribe is physically located or within which the Tribe exercises jurisdiction. For example, a Tribe located in Montana with Treaty rights in Wyoming can include Montana and Wyoming as "in-state" jurisdictions.
 - Transactions with Tribal enterprise-operated businesses, businesses owned by Tribal members, and businesses in the states in which Tribal members reside. For example, an Arizona Tribe may have the bulk of its members in a town on the border of Nevada and Arizona. Because the Tribe is exercising jurisdiction over its members in both states, it may invest in both states.
- Out-of-state transactions:** Tribal SSBCI program transactions that do not fall into the above categories constitute out-of-state investments, loans, or other credit or equity support.
- State Selection:** A list of 'Available' states (West Virginia, Wisconsin, Wyoming) and a 'Chosen' list (Alaska, Washington). A callout box points to this section with the text 'Select state(s)'.
- Joint Application:** A question: '*Is this a joint application on behalf of multiple Tribal governments?' (Required for Initiated Application) with a dropdown menu currently set to '--None--'. A callout box points to this question with the text 'Is this a joint application?'.

Additional callout boxes include 'Pre-populated Info' pointing to the Applicant Type and Name fields, and 'In-state transaction definition.' pointing to the definition text.

Section 4.1A: Joint Application (If Applicable) (Required for Initiated Application)

If you indicated that you are submitting a joint application on behalf of multiple Tribal governments, populate the information for each Tribal government you are submitting on behalf of. In **Section 5.2: Authorized Official**, you will be asked to populate the contact information for the Authorized Official responsible for making decisions on behalf of multiple Tribal governments regarding this joint application.



If you answered “No”, the co-applicant would need to submit a NOI. A link will be provided.

Select “Add Co-Applicant” to save information for the current Co-Applicant and populate information for additional Tribal governments.

Section 4.2: Application Contacts (Required for Initiated Application)

Please enter information for the primary and secondary contacts who will be notified regarding this application. These contacts will be contacted with any status updates for the application. These contacts may or may not have authorizing authority and thus, may or may not be the same individuals identified in **Sections 5.2 and 5.2A**. You will be asked to provide program level contact information later in the application.

Section 4.2A: Permission to Share Contact Information (Required for Initiated Application)

Please respond to the question on whether you permit Treasury to share your application contacts’ information in **Section 4.2** with other states, the District of Columbia, Tribal governments, and territories for program collaboration purposes.

Application Section 5: Entity Information

Section 5.1: Implementing Entity (Required for Initiated Application)

- Enter information for each department, agency, or political subdivision that has been designated to implement program(s) described in this application. The term “agency” includes government corporations and other entities authorized or supervised by the jurisdiction; this would include, for example, Alaska Native Corporations. If you are a Tribal government and submitting a joint application on behalf of multiple Tribal governments, enter the information for the Implementing Entity designated by the governing officials of the Co-Applicant Tribal governments.

If you are a Tribal government submitting a joint application on behalf of multiple Tribal governments, each Co-Applicant is required to submit Joint Application Designation Documentation expressly stating that the governing officials of the Co-Applicant Tribal governments have designated the Implementing Entity and expressly state that the Implementing Entity has the authority to do the following on behalf of all Co-Applicants:

- Submit complete and accurate information
- Certify the SSBCI Application
- Collect and distribute all documents and notifications associated with this joint Application
- Receive and disburse SSBCI funds on behalf of its Co-Applicants, if approved
- Certify and submit an Allocation Agreement which commits each Co-Applicant to all of the obligations and requirements associated with receiving SSBCI funds
- Comply with reporting requirements.

The Designation Documentation must include Tribal resolutions or other actions taken by each participating Tribal government to delegate such authority to the Implementing Entity. You may either submit one letter of designation listing all eligible Tribal governments in your joint application or submit letters of designation for each eligible Tribal government within your application.

Documents

SECTION 3 - Definition of Terms

SECTION 4 - Application Overview

SECTION 5 - Entity Information

SECTION 6 - Awardable Amount

SECTION 7 - Program Overview

SECTION 8 - Program Details

SECTION 9 - Compliance & Oversight

SECTION 10 - Application Certification

SECTION 5.1: Implementing Entity

Please enter information below for each department, agency, or political subdivision that has been designated to implement program(s) described in this application. The term "agency" includes government corporations and other entities authorized or supervised by the jurisdiction; this would include, for example, Alaska Native Corporations. Once created and saved, the entity information will appear in the table below.

* Implementing Entity Name (Required for Initiated Application)

* Unique Entity Identifier (UEID) (Required for Initiated Application)
Notice: Beginning March 31st, the Treasury will no longer be accepting a DUNS Number as a valid form of identification for an applicant. Instead, it will now be using a Universal Entity Identifier, or UEI, which is requested from and provided by System for Award Management. (SAM.gov). Please provide the applicant's UEI in the field below.

* Implementing Entity TIN/EIN (Required for Initiated Application) Implementing Entity DUNS Number

* Does the Implementing entity have an active SAM.gov registration? (Required for Initiated Application)

* Street Address 1 (Required for Initiated Application)

Street Address 2

* City (Required for Initiated Application) * State (Required for Initiated Application)

* Zip Code (Required for Initiated Application) Zip code +4

Joint Application Designation Documentation: Each Co-Applicant is required to submit Designation Documentation expressly stating that the governing officials of the Co-Applicant Tribal governments have designated the Implementing Entity named above and expressly state that the implementing Entity has the authority to do the following on behalf of all Co-Applicants:

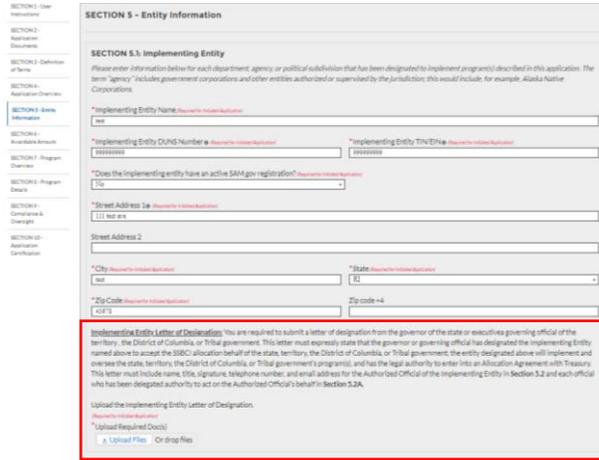
- Submit complete and accurate information
- Certify the SSBCI Application
- Collect and distribute all documents and notifications associated with this joint Application
- Receive and disburse SSBCI funds on behalf of its Co-Applicants, if approved
- Certify and submit an Allocation Agreement which commits each Co-Applicant to all of the obligations and requirements associated with receiving SSBCI funds
- Comply with reporting requirements

The Designation Documentation must include Tribal resolutions or other actions taken by each participating Tribal government to delegate such authority to the Implementing Entity. You may either submit one letter of designation listing all eligible Tribal governments in your joint application or submit letters of designation for each eligible Tribal government within your application.

Upload the Designation Documentation. (Required for Initiated Application)

* Upload Required Doc(s)
 Or drop files

- If you are a state, the District of Columbia, territory, or a Tribal government that is **not** submitting a joint application on behalf of multiple Tribal governments, upload the Implementing Entity Letter of Designation.

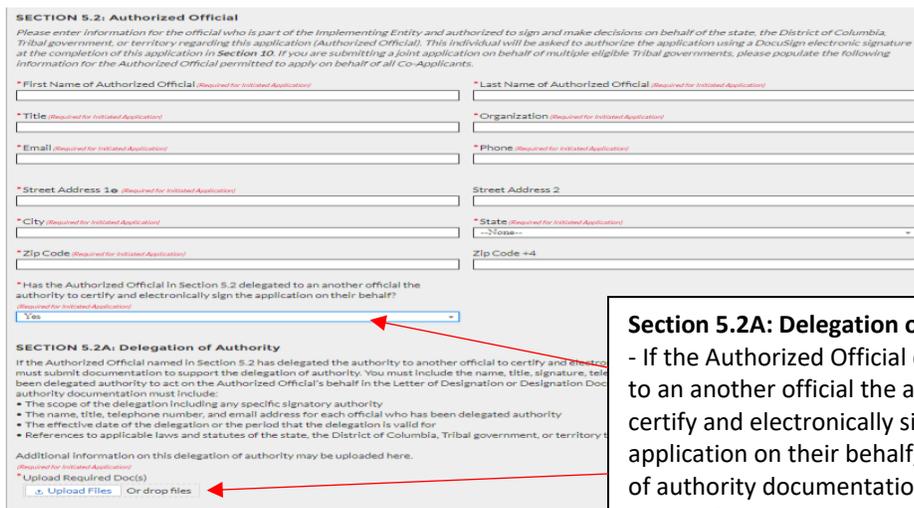


Section 5.2: Authorized Official (Required for Initiated Application)

Enter information for the official who is part of the Implementing Entity and authorized to sign and make decisions on behalf of the state, the District of Columbia, Tribal government, or territory regarding this application (Authorized Official). This individual will be asked to authorize the application using a DocuSign electronic signature at the completion of this application in **Section 10: Application Certification**. If you are submitting a joint application on behalf of multiple eligible Tribal governments, please populate the following information for the Authorized Official permitted to apply on behalf of all Co-Applicants.

Section 5.2A: Delegation of Authority (Required for Initiated Application)

Respond to the question on delegation of authority and if applicable, upload the documentation to support the delegation of authority.

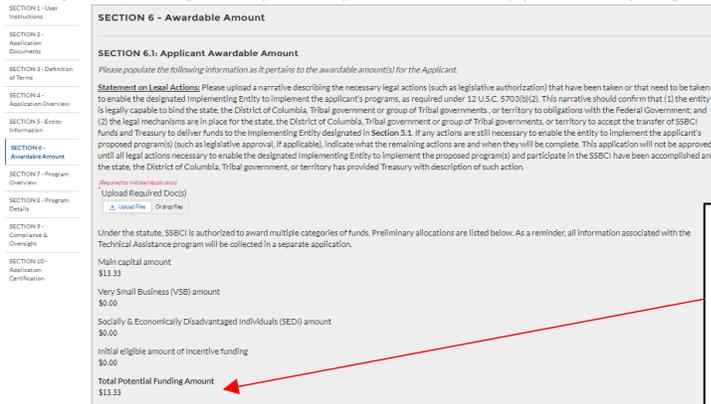


Section 5.2A: Delegation of Authority
- If the Authorized Official delegated to another official the authority to certify and electronically sign the application on their behalf, delegation of authority documentation is required.

Application Section 6: Awardable Amount

Section 6.1: Applicant Awardable Amount (Required for Initiated Application)

- **Statement on Legal Actions:** Upload a narrative describing the necessary legal actions (such as legislative authorization) that have been taken or that need to be taken to enable the designated Implementing Entity to implement the applicant's programs.



SECTION 6 - Awardable Amount

SECTION 6.1: Applicant Awardable Amount

Please populate the following information as it pertains to the awardable amount(s) for the Applicant.

Statement on Legal Actions: Please upload a narrative describing the necessary legal actions (such as legislative authorization) that have been taken or that need to be taken to enable the designated Implementing Entity to implement the applicant's programs, as required under 12 U.S.C. 5703(b)(2). This narrative should confirm that (1) the entity is legally capable to bind the state, the District of Columbia, Tribal government or group of Tribal governments, or territory to obligations with the Federal Government; and (2) the legal mechanisms are in place for the state, the District of Columbia, Tribal government or group of Tribal governments, or territory to accept the transfer of SSBCI funds and Treasury to deliver funds to the Implementing Entity (designated in Section 5.1, if any actions are still necessary to enable the entity to implement the applicant's proposed program(s) such as legislative approval, if applicable). Indicate what the remaining actions are and when they will be complete. This application will not be approved until all legal actions necessary to enable the designated Implementing Entity to implement the proposed program(s) and participate in the SSBCI have been accomplished and the state, the District of Columbia, Tribal government, or territory has provided Treasury with description of such action.

Under the statute, SSBCI is authorized to award multiple categories of funds. Preliminary allocations are listed below. As a reminder, all information associated with the Technical Assistance program will be collected in a separate application.

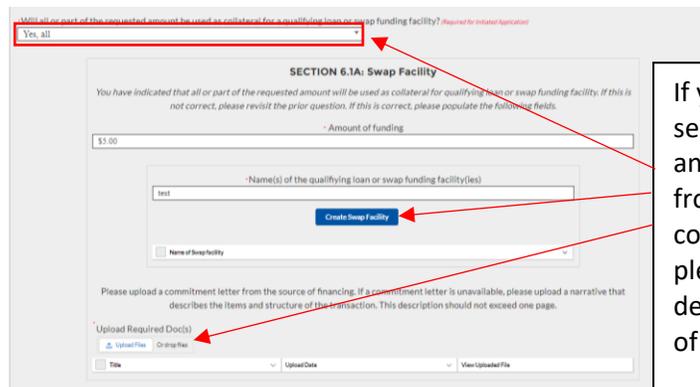
Main capital amount	\$13.33
Very Small Business (VSB) amount	\$0.00
Socially & Economically Disadvantaged Individuals (SEDI) amount	\$0.00
Initial eligible amount of incentive funding	\$0.00
Total Potential Funding Amount	\$13.33

Note: The Total Potential Funding Amount must equal the applicant's Total Allocated Funding Amount entered in Section 7.1: Program Overview.

- **Underserved Narrative:** Upload a narrative detailing how you plan to use the federal contributions for your approved programs to help provide access to capital for small businesses in low- and moderate-income, minority, and other underserved communities, including women- and minority-owned small businesses.

Section 6.1A: Swap Facility (Required for Initiated Application)

Please respond to the question on whether all or part of the requested amount be used as collateral for a qualifying loan or swap funding facility and, if applicable, upload the commitment letter from the source of financing.



SECTION 6.1A: Swap Facility

You have indicated that all or part of the requested amount will be used as collateral for qualifying loan or swap funding facility. If this is not correct, please revisit the prior question. If this is correct, please populate the following fields.

Amount of funding: \$3.00

Name(s) of the qualifying loan or swap funding facility(ies): test

Create Swap Facility

Name of Swap Facility

Please upload a commitment letter from the source of financing. If a commitment letter is unavailable, please upload a narrative that describes the items and structure of the transaction. This description should not exceed one page.

Upload Required Doc(s)

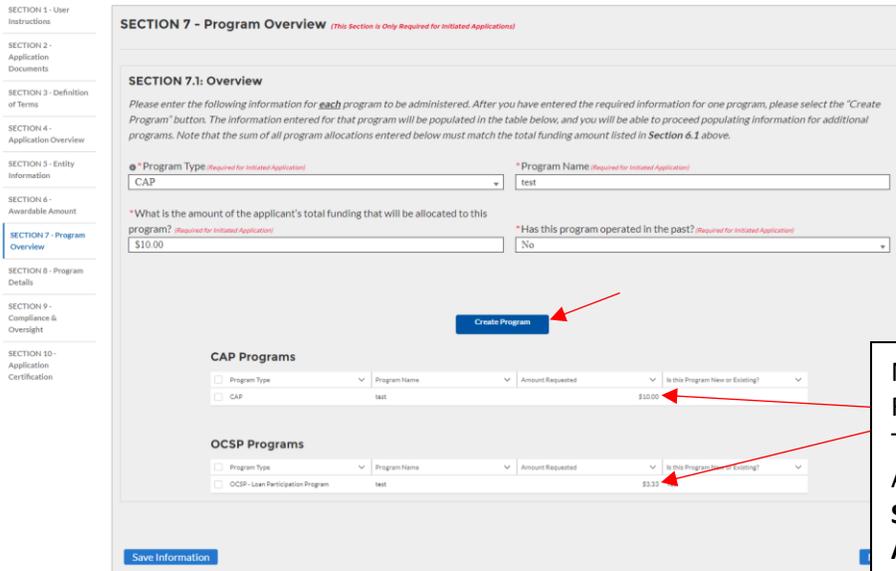
Title	Upload Date	View Uploaded File

If you select "Yes", fill out this section, click "Create Swap Facility" and upload a commitment letter from the source of financing. If a commitment letter is unavailable, please upload a narrative that describes the items and structure of the transaction.

Application Section 7: Program Overview

Section 7.1: Program Overview (Required for Initiated Application)

Enter the information for **each** program to be administered. After you have entered the required information for one program, please select the “Create Program” button. The information entered for that program will be populated in the table below, and you will be able to proceed populating information for additional programs.



SECTION 7 - Program Overview (This Section is Only Required for Initiated Applications)

SECTION 7.1: Overview

Please enter the following information for **each** program to be administered. After you have entered the required information for one program, please select the “Create Program” button. The information entered for that program will be populated in the table below, and you will be able to proceed populating information for additional programs. Note that the sum of all program allocations entered below must match the total funding amount listed in Section 6.1 above.

* Program Type (Required for Initiated Application): CAP
 * Program Name (Required for Initiated Application): test
 * What is the amount of the applicant's total funding that will be allocated to this program? (Required for Initiated Application): \$10.00
 * Has this program operated in the past? (Required for Initiated Application): No

Create Program

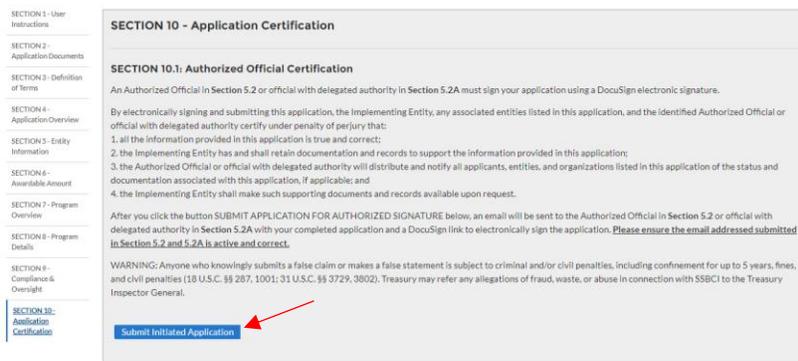
CAP Programs			
Program Type	Program Name	Amount Requested	Is this Program New or Existing?
CAP	test	\$10.00	

OCSP Programs			
Program Type	Program Name	Amount Requested	Is this Program New or Existing?
OCSP - Loan Participation Program	test	\$3.33	

Save Information

Note: The Total Allocated Funding Amount equals the Total Potential Funding Amount populated in Section 6.1: Applicant Awardable Amount

All sections required for an “Initiated Application” have now been completed. Proceed to **Section 10: Application Certification** and click “Submit Initiated Application”.



SECTION 10 - Application Certification

SECTION 10.1: Authorized Official Certification

An Authorized Official in Section 5.2 or official with delegated authority in Section 5.2A must sign your application using a DocuSign electronic signature.

By electronically signing and submitting this application, the Implementing Entity, any associated entities listed in this application, and the Identified Authorized Official or official with delegated authority certify under penalty of perjury that:

- all the information provided in this application is true and correct;
- the Implementing Entity has and shall retain documentation and records to support the information provided in this application;
- the Authorized Official or official with delegated authority will distribute and notify all applicants, entities, and organizations listed in this application of the status and documentation associated with this application, if applicable; and
- the Implementing Entity shall make such supporting documents and records available upon request.

After you click the button SUBMIT APPLICATION FOR AUTHORIZED SIGNATURE below, an email will be sent to the Authorized Official in Section 5.2 or official with delegated authority in Section 5.2A with your completed application and a DocuSign link to electronically sign the application. **Please ensure the email addressed submitted in Section 5.2 and 5.2A is active and correct.**

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil penalties (18 U.S.C. §§ 287, 1001; 31 U.S.C. §§ 3729, 3802). Treasury may refer any allegations of fraud, waste, or abuse in connection with SSBCI to the Treasury Inspector General.

Submit Initiated Application

After submitting an “Initiated Application,” all remaining sections, also referred to as the “Full Application” of the capital program application are due by February 11 at 11:59 p.m. ET, 2022.

Applicants may also amend their submitted “Initiated Application” from December 12, 2021, to February 11 at 11:59 p.m. ET, 2022.

Application Portal - (Sections Required for the Full Application)

Before moving to **Section 8: Program Details**, the following sections must be completed or updated.

- **Section 4.2: Application Contacts** – A secondary contact may be added, if not entered in the “Initiated Application.”
- **Section 5.3: Contracted Entity** – Please enter information below for each organization or entity that is not a department, agency, or political subdivision of the Applicant that will be responsible for administering one or more programs.

SECTION 5.3: Contracted Entity

Please enter information below for each organization or entity that is not a department, agency, or political subdivision of the Applicant that will be responsible for administering one or more programs. Please populate all fields in the Contracted Entity section before proceeding to click on 'Create Contracted Entity' button.

*Contracted Entity Type: Existing, approved program of another eligible jurisdiction. | *Contracted Entity Name: Test

*Contracted POC First Name: Test | *Contracted POC Last Name: Test

*Contracted POC Email: test@test.com | *Contracted POC Phone: 4444444444

*Street Address 1: Test | Street Address 2:

*City: Test | *State: RI | *Zip Code: 44444 | Zip code +4:

(Once created, the Entity Information is saved and displayed within the table shown below)

<input type="checkbox"/>	Name...	Contract...	Contract...	Contract...	Contract...	Street A...	Street A...	City	State	Zip Code	Zip Code...
<input type="checkbox"/>	test	existing app...	test	test	test	test	test	test	RI	44444	44444

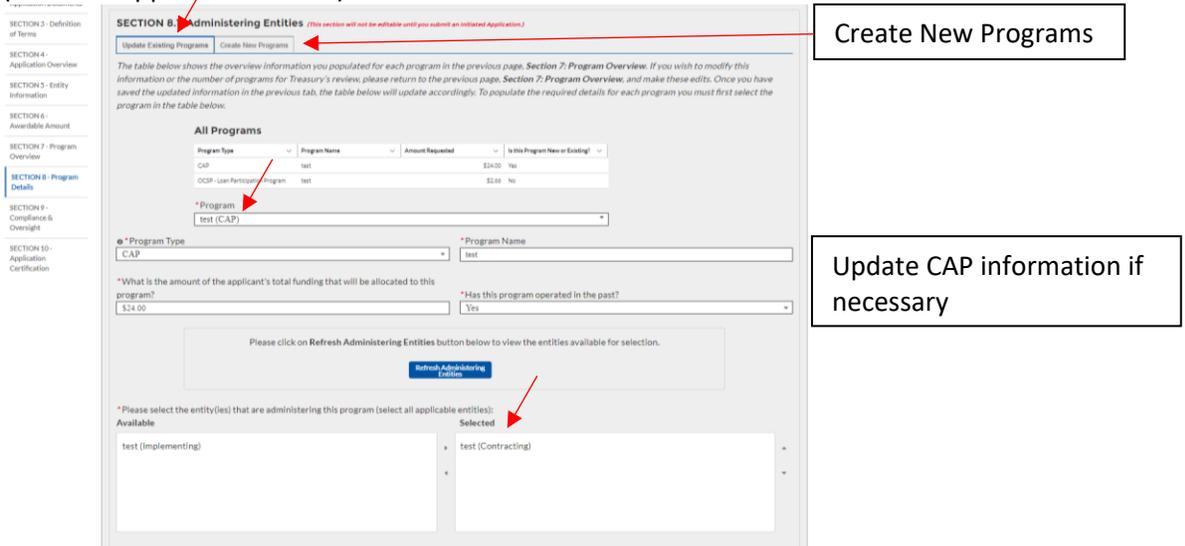
Please populate all fields in the Contracted Entity section before proceeding to click on “Create Contracted Entity” button.

- **Section 6.2: Financial Institution Information** – Provide information about the financial institution and bank account to which you want your SSBCI funds to be paid electronically, if approved.

Application Section 8: Program Details

Section 8.1: Administering Entities

- Update a Capital Access Program (CAP) by going to the “Update Existing Programs” tab, selecting the CAP program to be updated, and select the entity(ies) that are administering this program (select all applicable entities). CAPs can also be deleted.



SECTION 8.1: Administering Entities (This section will not be editable until you submit an Initiated Application.)

Update Existing Programs | Create New Programs

The table below shows the overview information you populated for each program in the previous page. Section 7: Program Overview. If you wish to modify this information or the number of programs for Treasury's review, please return to the previous page, Section 7: Program Overview, and make these edits. Once you have saved the updated information in the previous tab, the table below will update accordingly. To populate the required details for each program you must first select the program in the table below.

Program Type	Program Name	Amount Requested	Is this Program New or Existing?
CAP	test	\$24.00	Yes
OCSF-Loan Participation Program	test	\$2.00	No

*Program: test (CAP)

*Program Type: CAP | *Program Name: test

*What is the amount of the applicant's total funding that will be allocated to this program? \$24.00 | *Has this program operated in the past? Yes

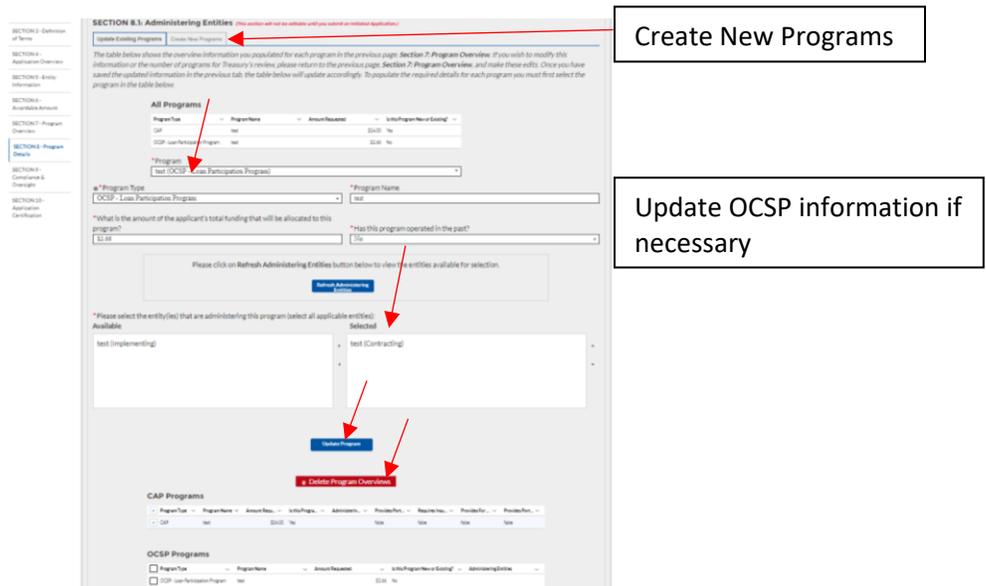
Please click on Refresh Administering Entities button below to view the entities available for selection.

*Please select the entity(ies) that are administering this program (select all applicable entities):

Available: test (Implementing) | Selected: test (Contracting)

Buttons: Refresh Administering Entities, Update Program Overview, Delete Program Overview

- Update an Other Credit Support Program (OCSF) by going to the “Update Existing Programs” tab, selecting the OCSF program to be updated, and select the entity(ies) that are administering this program (select all applicable entities). OCSFs can also be deleted.



SECTION 8.1: Administering Entities (This section will not be editable until you submit an Initiated Application.)

Update Existing Programs | Create New Programs

The table below shows the overview information you populated for each program in the previous page. Section 7: Program Overview. If you wish to modify this information or the number of programs for Treasury's review, please return to the previous page, Section 7: Program Overview, and make these edits. Once you have saved the updated information in the previous tab, the table below will update accordingly. To populate the required details for each program you must first select the program in the table below.

Program Type	Program Name	Amount Requested	Is this Program New or Existing?
OCSF-Loan Participation Program	test	\$2.00	No

*Program: test (OCSF-Loan Participation Program)

*Program Type: OCSF-Loan Participation Program | *Program Name: test

*What is the amount of the applicant's total funding that will be allocated to this program? \$2.00 | *Has this program operated in the past? No

Please click on Refresh Administering Entities button below to view the entities available for selection.

*Please select the entity(ies) that are administering this program (select all applicable entities):

Available: test (Implementing) | Selected: test (Contracting)

Buttons: Refresh Administering Entities, Update Program Overview, Delete Program Overview

CAP Programs

Program Type	Program Name	Amount Requested	Is this Program New or Existing?	Administering Entities	Created On	Updated On	Deleted On
CAP	test	\$24.00	Yes	Yes	Yes	Yes	Yes

OCSF Programs

Program Type	Program Name	Amount Requested	Is this Program New or Existing?	Administering Entities
OCSF-Loan Participation Program	test	\$2.00	No	

Section 8.1A: Capital Access Program (CAP) Criteria - This will only be displayed if updating CAP Program in Section 8.1: Administering Entities

- If you indicated that one of the programs to be administered is a CAP, confirm by checking the boxes that your CAP satisfies each criterion.
- Applicants establishing CAP programs that have not operated before will be required to provide detailed assumptions for their estimates of total enrolled loans, total loan amounts, and the estimated total Federal contributions over the lifespan of the program. Applicants with programs that have operated before should provide up to five (5) years of historical data for total enrolled loans, total loan amounts, and total public subsidies for these loans, and use this historical data as a reference to estimate total enrolled loans, total loan amounts, and the estimated total Federal contributions over the lifespan of the program.
- Articulate any assumptions or provide a brief narrative to support the data uploaded.

SECTION 8.1A: Capital Access Program (CAP) Criteria

You have indicated that one of the programs to be administered is a CAP. If this is not correct please revisit Section 7.1. If this is correct please populate the following fields.

Confirm by checking the boxes below that the Applicant's CAP satisfies each criteria:

Provides portfolio insurance for business loans based on a separate loan-loss reserve fund for each financial institution.

Requires insurance premiums to be paid by the participating financial institution lenders and by the business borrowers to the CAP-created reserve fund to have their loans enrolled in such reserve fund.

Provides for contributions to be made by the jurisdiction to the CAP-created reserve fund in amounts at least equal to the sum of the amount of the insurance premium borrower and the financial institution to the reserve fund for any newly enrolled loan.

Provides portfolio insurance solely for loans that meet both the following requirements:
 (a) the borrower has 300 employees* or less at the time the loan is enrolled in the CAP; and
 (b) the loan amount does not exceed \$5,000,000.
*The definition at 32 CFR 83.23.101 should be used to calculate the number of employees

Enrolled Loan Data Tables: Applicants establishing CAP programs that have not operated before will be required to provide detailed assumptions for their estimates of total enrolled loans, total loan amounts, and the estimated total Federal contributions over the lifespan of the program. Applicants with programs that have operated before should provide up to five (5) years of historical data for total enrolled loans, total loan amounts, and total public subsidies for these loans, and use this historical data as a reference to estimate total enrolled loans, total loan amounts, and the estimated total Federal contributions over the lifespan of the program. Applicants should download and populate the enrolled loan data template tables for each CAP program. Please note that all fields shaded in blue require data to be inputted, while those fields shaded in white are auto-calculated. Please ensure you submit historical performance data, where applicable, to help support your enrolled loan projections.

[download template](#)

*Upload Required Docs)

[Upload Files](#) | [Or drag files](#)

Title	Upload Date	View Uploaded File

*Use the space below to articulate any assumptions or provide a brief narrative to support the data uploaded in the previous field.

[Update Program](#)

[Delete Program Overview](#)

CAP Programs

Program Type	Program Name	Amount Requested	Intro Prgms.	Adminstr.	Provide Fnd.	Require Fnd.	Provide Fnd.
CAP		\$0.00	No	No	No	No	No

OCSP Programs

Program Type	Program Name	Amount Requested	Intro Program New or Existing	Administering Entity
OCSP - use for transition program		\$0.00	No	not Comencing

Section 8.1B: Other Credit Support Programs (OCSF) Criteria - *This will only be displayed if updating an OCSF Program in Section 8.1: Administering Entities*

If you indicated at least one of the programs to be administered is an OCSF, which includes the following types of programs: collateral support program, loan participation program, loan guarantee program, loan participation program, loan guarantee program, equity capital program (direct), and other, then do the following:

- Upload a narrative describing the OCSF
- Upload a narrative describing the OCSF Additional Considerations such as the management team, operational capacity, and internal accounting and administrative controls systems
- Upload a copy of the most recent independent financial audit or financial statements for the OCSF if it has operated before. If no independent financial audit or program financial statements exist for the OCSF, then the applicant must attach a copy of the independent financial audit or program financial statements for the entity(ies) administering the program.

SECTION 8.1B: Other Credit Support Programs (OCSF) Criteria

You have indicated that at least one of the programs to be administered is an OCSF which includes the following types of programs: collateral support program, loan participation program, loan guarantee program, equity capital program (direct), and other. If this is not correct, please revisit Section 7.1. If this is correct, please complete the following for each OCSF:

OCSF Program Information: Please use the link here to download a template narrative describing the OCSF. Please complete the template and upload your narrative that addresses the information in the downloadable template, including:

1. A description of the background of the program, including historic performance of the program (the programs that have operated before) and expected performance.
2. A description summarizing the program guidelines, include information on the credit/investment characteristics and the operating mechanics of the OCSF such as:
 - a. qualifications or eligibility requirements for small business borrowers/investors and lenders/investors
 - b. minimum and maximum loan/investment amounts
 - c. standard loan types (e.g., term loans, lines of credit, etc.) and investments (e.g., equity, preferred equity, subordinated debt, etc.) and processes for reviewing non-standard transactions
 - d. limitations on use of loan/investment proceeds
 - e. other standard terms required in loan, collateral support or guarantee provided, or investment agreement terms
 - f. sources for loan participations or investment opportunities in the program
 - g. processes for negotiating and approving loan/investment terms
 - h. processes for determining and documenting the "cause and effect" of private capital leverage related to the loan or investment
 - i. kinds of and rates of fees (e.g., application and origination fees, guarantee fees, management fees, etc.) that may be charged
 - j. processes for monitoring compliance and performance of outstanding loans/investments
 - k. processes for addressing loan defaults or investment write-offs

Also, provide the following information relevant to the type of OCSF as follows:

Loan Participation Program (LPP) - Describe how the program is structured, that is, explain whether the program purchases participation (the state, territory, the District of Columbia, or Tribal government purchases a portion of a loan originated by a lender), or originates competition loans (or co-lending participation or parallel loans in which a lender originates a senior loan and the state, territory, the District of Columbia, or Tribal government originates a second loan to the same borrower). Also, include the maximum percentage of the loan that the state, territory, the District of Columbia, or Tribal government can participate.

Collateral Support Program (CSP) - include information on the maximum percentage of the loan amount that may be covered by the collateral, the terms of collateral to be provided, and where the collateral will be held.

Loan Guarantee Program (LGP) - include information on the maximum percentage of the loan that the guarantee will cover and describe how the reserve fund would work.

Equity Capital Program (Fund) and Equity Capital Program (Direct) - Describe the structure of the Equity Capital Program and the capital deployment model.

3. A description of the anticipated benefits of the state, territory, the District of Columbia, or Tribal government's in-state and out-of-state loans and investments to the state, territory, the District of Columbia, or Tribal government, to businesses, and to residents including the extent to which the resulting small business lending and investing will expand economic opportunities. For example, climate transition investments may result in efficient energy use, sustainable jobs, or economic growth in sustainable manufacturing and industrial decarbonization, sustainable agriculture, bio-materials, and electric vehicles and charging infrastructure. Another example is that investments in areas such as small and mid-size enterprise (SME) manufacturing and supply chain resiliency may result in stronger economic growth, high-quality jobs, and innovation. Also, investments focused on innovation in supply chains of critical products such as semiconductors, critical minerals and materials, and advanced pharmaceuticals may provide long-term national and economic security benefits.

4. A description of how the OCSF will, at a minimum, "cause and effect" \$1 of new private credit for every \$1 of SSBCI funds used by the OCSF. For example, for OCSFs involving equity capital, applicants may specify such safeguards as limiting investments to anchor investments, prohibiting SSBCI participation after a fund's initial close, or restricting investments to be in funds for which private capital is likely to be catalyzed by SSBCI participation based on the fund's age, size, or experience. In addition, please complete the average ratio table for this OCSF program in Section 8.1C below.

5. A description of how the OCSF will ensure a meaningful amount of lender/investor capital is at risk. If the OCSF provides credit/equity support through a financial institution or non-financial institution lender or investor, such lender or investor must have a meaningful amount of capital resources at risk. The term "meaningful amount" may vary for lenders and investors in different programs. Guidelines for OCSFs are contained in the SSBCI Capital Program Policy Guidelines.

6. A description of how the OCSF will provide credit support that meets all of the following requirements:

- a. targets an average borrower or investee size of 500 employees or less;
- b. does not extend support to borrowers or investees that have more than 750 employees;
- c. targets support towards loans or investments with an average principal amount of \$5,000,000 or less; and
- d. does not extend credit support to loans or investments that exceed a principal amount of \$20,000,000.

 *The default of 12 OCSF 8.1B.156 should be used to calculate the number of employees.

Upload Required Docs

2 Upload Files | Or Drop Files

OCSF Additional Considerations: Please use the link here to download a template narrative describing the OCSF management team, operational capacity, and internal accounting and administrative controls systems. Please complete the template and upload your narrative that addresses the information in the downloadable template, including:

1. A description of the OCSF's operational capacity, skills, and experience of the OCSF program management team. For example, address whether the OCSF has adequate organizational resources, infrastructure systems, and standard operating policies and procedures to administer the OCSF.
2. A description of the ability of the OCSF to manage increases in the volume of its small business lending or investing. For example, describe the OCSF organizational infrastructure, resources, and the management team's skills and experience to handle increases in small business lending or investing.
3. A description of the internal accounting and administrative controls systems of the OCSF and the extent to which such systems can provide reasonable assurance that the SSBCI funds will be safeguarded against waste, loss, unauthorized use, and misappropriation. For example, provide evidence of one or more of the following:
 - a. periodic internal audits
 - b. annual independent audits (including management letters)
 - c. program financial statements current within the past year
 - d. adequate accounting and financial management systems
4. A description of the soundness of the OCSF program design and implementation plan. For example, address whether research and market surveys have been conducted to determine program demand, whether successful programs that have operated before have been modified to meet SSBCI requirements, and whether the OCSF incorporates industry best practices.

Upload Required Docs

1 Upload Files | Or Drop Files

Title: _____ Upload Date: _____ View Uploaded File

OCSF Independent Financial Audit Upload: Please upload a copy of the most recent independent financial audit or financial statements for the OCSF if it has operated before. If no independent financial audit or program financial statements exist for the OCSF, then the applicant must attach a copy of the independent financial audit or program financial statements for the entity(ies) administering the program as identified in Section 8.1.

Upload Required Docs

1 Upload Files | Or Drop Files

Title: _____ Upload Date: _____ View Uploaded File

Update/Repeat

Details Program Overview

CAP Programs

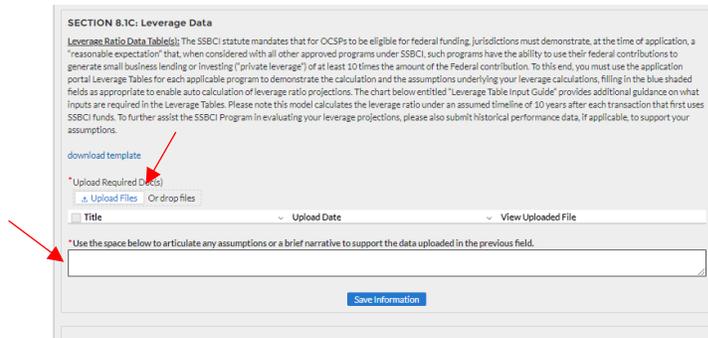
Program Type	Program Name	Amount Requested	Initial Program New or Existing	Administering Entity	Program Type	Program Name	Amount Requested	Initial Program New or Existing	Administering Entity
OCSF	test	\$200,000	No	test	OCSF	test	\$200,000	No	test

OCSF Programs

Program Type	Program Name	Amount Requested	Initial Program New or Existing	Administering Entity
OCSF - Loan Participation Program	test	\$200,000	No	test

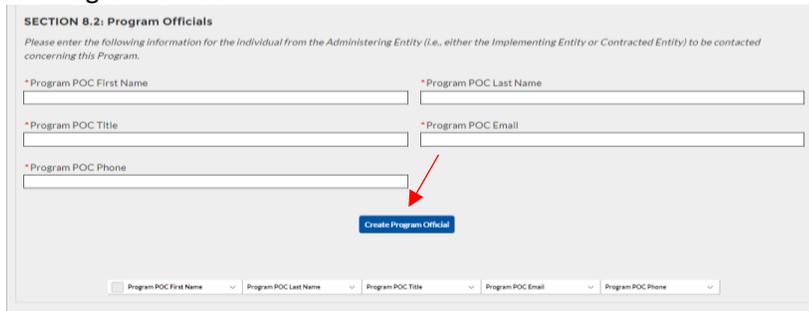
Section 8.1C: Leverage Data

- Leverage Ratio Data Table(s):** The SSBCI statute mandates that for OCSPs to be eligible for federal funding, jurisdictions must upload data that demonstrates, at the time of application, a “reasonable expectation” that, when considered with all other approved programs under SSBCI, such programs have the ability to use their federal contributions to generate small business lending or investing (“private leverage”) of at least 10 times the amount of the Federal contribution.
- Articulate any assumptions or a brief narrative to support the data uploaded.



Section 8.2: Program Officials

- Please enter information for the individual from the Administering Entity (i.e., either the Implementing Entity or Contracted Entity) to be contacted concerning the Program and click “Create Program Official”.

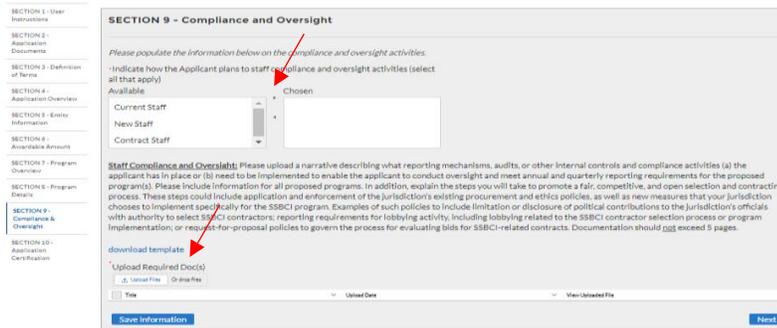


Application Section 9: Compliance and Oversight

Indicate how the Applicant plans to staff compliance and oversight activities (select all that apply).

Staff Compliance and Oversight:

Upload a narrative describing what reporting mechanisms, audits, or other internal controls and compliance activities (a) the applicant has in place or (b) need to be implemented to enable the applicant to conduct oversight and meet annual and quarterly reporting requirements for the proposed program(s). Please include information for all proposed programs. In addition, explain the steps you will take to promote a fair, competitive, and open selection and contracting process.



SECTION 9 - Compliance and Oversight

Please populate the information below on the compliance and oversight activities.

Indicate how the Applicant plans to staff compliance and oversight activities (select all that apply)

Available Chosen

Current Staff
New Staff
Contract Staff

Staff Compliance and Oversight: Please upload a narrative describing what reporting mechanisms, audits, or other internal controls and compliance activities (a) the applicant has in place or (b) need to be implemented to enable the applicant to conduct oversight and meet annual and quarterly reporting requirements for the proposed program(s). Please include information for all proposed programs. In addition, explain the steps you will take to promote a fair, competitive, and open selection and contracting process. These steps could include application and enforcement of the jurisdiction's existing procurement and ethics policies, as well as new measures that your jurisdiction chooses to implement specifically for the SSBCI program. Examples of such policies to include limitation or disclosure of political contributions to the jurisdiction's officials with authority to select SSBCI contractors; reporting requirements for lobbying activity, including lobbying related to the SSBCI contractor selection process or program implementation; or request-for-proposal policies to govern the process for evaluating bids for SSBCI-related contracts. Documentation should not exceed 5 pages.

download template

Upload Required Docs

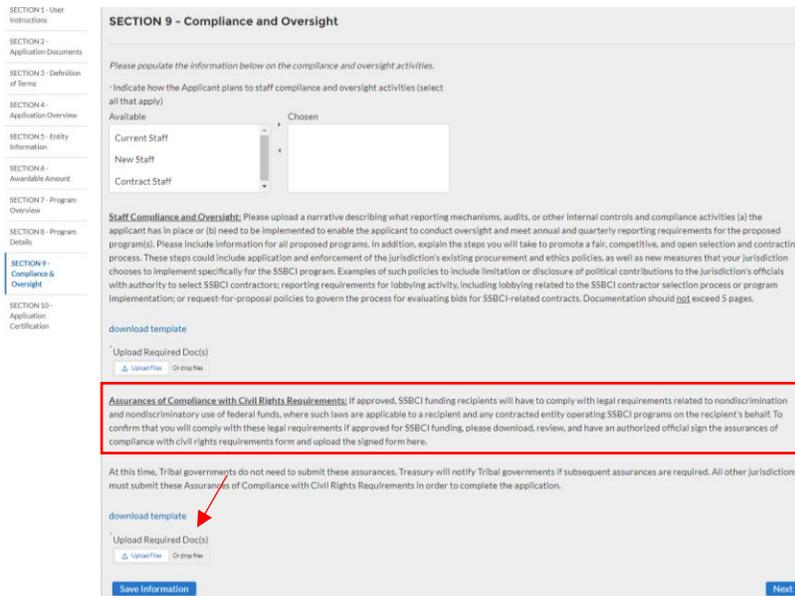
Title	Upload Date	View/Unrated File

Save Information Next

Assurances of Compliance with Civil Rights Requirements:

This will only be displayed for states, territories, and the District of Columbia. At this time, Tribal governments do not need to submit these assurances. Treasury will notify Tribal governments if subsequent assurances are required. All other jurisdictions must submit these Assurances of Compliance with Civil Rights Requirements in order to complete the application.

If approved, SSBCI funding recipients will have to comply with legal requirements related to nondiscrimination and nondiscriminatory use of federal funds, where such laws are applicable to a recipient and any contracted entity operating SSBCI programs on the recipient’s behalf. To confirm that you will comply with these legal requirements if approved for SSBCI funding, please download, review, and have an authorized official sign the assurances of compliance with civil rights requirements form and upload the signed form.



SECTION 9 - Compliance and Oversight

Please populate the information below on the compliance and oversight activities.

Indicate how the Applicant plans to staff compliance and oversight activities (select all that apply)

Available	Chosen
Current Staff	
New Staff	
Contract Staff	

Staff Compliance and Oversight: Please upload a narrative describing what reporting mechanisms, audits, or other internal controls and compliance activities (a) the applicant has in place or (b) need to be implemented to enable the applicant to conduct oversight and meet annual and quarterly reporting requirements for the proposed program(s). Please include information for all proposed programs. In addition, explain the steps you will take to promote a fair, competitive, and open selection and contracting process. These steps could include application and enforcement of the jurisdiction's existing procurement and ethics policies, as well as new measures that your jurisdiction chooses to implement specifically for the SSBCI program. Examples of such policies to include limitation or disclosure of political contributions to the jurisdiction's officials with authority to select SSBCI contractors; reporting requirements for lobbying activity, including lobbying related to the SSBCI contractor selection process or program implementation; or request-for-proposal policies to govern the process for evaluating bids for SSBCI-related contracts. Documentation should not exceed 5 pages.

[download template](#)

Upload Required Doc(s)

[Upload File](#) [Or drag file](#)

Assurances of Compliance with Civil Rights Requirements: If approved, SSBCI funding recipients will have to comply with legal requirements related to nondiscrimination and nondiscriminatory use of federal funds, where such laws are applicable to a recipient and any contracted entity operating SSBCI programs on the recipient’s behalf. To confirm that you will comply with these legal requirements if approved for SSBCI funding, please download, review, and have an authorized official sign the assurances of compliance with civil rights requirements form and upload the signed form here.

At this time, Tribal governments do not need to submit these assurances. Treasury will notify Tribal governments if subsequent assurances are required. All other jurisdictions must submit these Assurances of Compliance with Civil Rights Requirements in order to complete the application.

[download template](#)

Upload Required Doc(s)

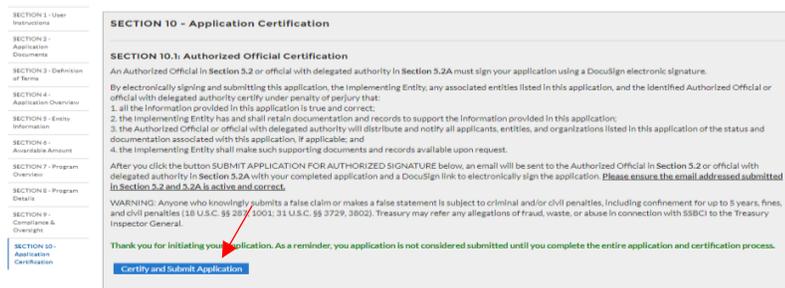
[Upload File](#) [Or drag file](#)

[Save Information](#) [Next](#)

Application Section 10: Application Certification

Section 10.1: Authorized Official Certification

- An Authorized Official in **Section 5.2** or official with delegated authority in **Section 5.2A** must sign your application using a DocuSign electronic signature.
- By electronically signing and submitting this application, the Implementing Entity, any associated entities listed in this application, and the identified Authorized Official or official with delegated authority certify under penalty of perjury that:
 - all the information provided in this application is true and correct;
 - the Implementing Entity has and shall retain documentation and records to support the information provided in this application;
 - the Authorized Official or official with delegated authority will distribute and notify all applicants, entities, and organizations listed in this application of the status and documentation associated with this application, if applicable; and
 - the Implementing Entity shall make such supporting documents and records available upon request.
- Please ensure the email address submitted in **Sections 5.2** and **5.2A** is active and correct.
- Click “Certify and Submit Application.”



SECTION 10 - Application Certification

SECTION 10.1: Authorized Official Certification

An Authorized Official in **Section 5.2** or official with delegated authority in **Section 5.2A** must sign your application using a DocuSign electronic signature.

By electronically signing and submitting this application, the Implementing Entity, any associated entities listed in this application, and the Identified Authorized Official or official with delegated authority certify under penalty of perjury that:

1. all the information provided in this application is true and correct;
2. the Implementing Entity has and shall retain documentation and records to support the information provided in this application;
3. the Authorized Official or official with delegated authority will distribute and notify all applicants, entities, and organizations listed in this application of the status and documentation associated with this application, if applicable; and
4. the Implementing Entity shall make such supporting documents and records available upon request.

After you click the button **SUBMIT APPLICATION FOR AUTHORIZED SIGNATURE** below, an email will be sent to the Authorized Official in **Section 5.2** or official with delegated authority in **Section 5.2A** with your completed application and a DocuSign link to electronically sign the application. **Please ensure the email address submitted in **Section 5.2** and **5.2A** is active and correct.**

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil penalties (18 U.S.C. §§ 287, 1001; 31 U.S.C. §§ 3729, 3802). Treasury may refer any allegations of fraud, waste, or abuse in connection with SSBCI to the Treasury Inspector General.

Thank you for initiating your application. As a reminder, your application is not considered submitted until you complete the entire application and certification process.

[Certify and Submit Application](#)

- After you click the “Certify and Submit Application”, an email will be sent to the Authorized Official in **Section 5.2** or official with delegated authority in **Section 5.2A** along with your application and a DocuSign link to electronically sign the application.
- Your application is not official until Treasury receives the electronically signed application. Please make sure your Authorized Official in **Section 5.2** or official with delegated authority in **Section 5.2A** retrieves and responds to the email with the DocuSign electronic signature link.

WARNING: *Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil penalties (18 U.S.C. §§ 287, 1001; 31 U.S.C. §§ 3729, 3802). Treasury may refer any allegations of fraud, waste, or abuse in connection with SSBCI to the Treasury Inspector General.*

Version History

Version	Publish Date	Revisions
v1	11/24/2021	First Draft