



U.S. DEPARTMENT OF THE TREASURY

Emergency Capital Investment Program

User Guide for Application Submission

The following guide is intended to aid users to access and submit an application for investment from the Department of the Treasury through the Emergency Capital Investment Program (ECIP). It is not the instructions for completing the substance of the application.

This Application for the Emergency Capital Investment Program and any supporting materials must be submitted to Treasury via the Program’s online application portal, available through the Treasury website at: [ECIP webpage](#). As part of the process to determine whether an Applicant may receive a capital investment under the Program, the Secretary may consult and share Application materials with an Appropriate Federal Banking Agency (the FDIC, FRB, OCC, NCUA, as applicable), and the Applicant’s State Regulator.

This Application and the Emergency Investment Lending Plan reference definitions and capitalized terms defined in the Program’s Application Instructions and the Community Development Banking and Financial Institutions Act of 1994, as amended by the Consolidated Appropriations Act, 2021.

Full instructions can be found on the Emergency Capital Investment Program (ECIP) webpage located here: [ECIP Homepage](#)

Contact the ECIP Team with any questions or concerns at ecip@treasury.gov.

Table of Contents

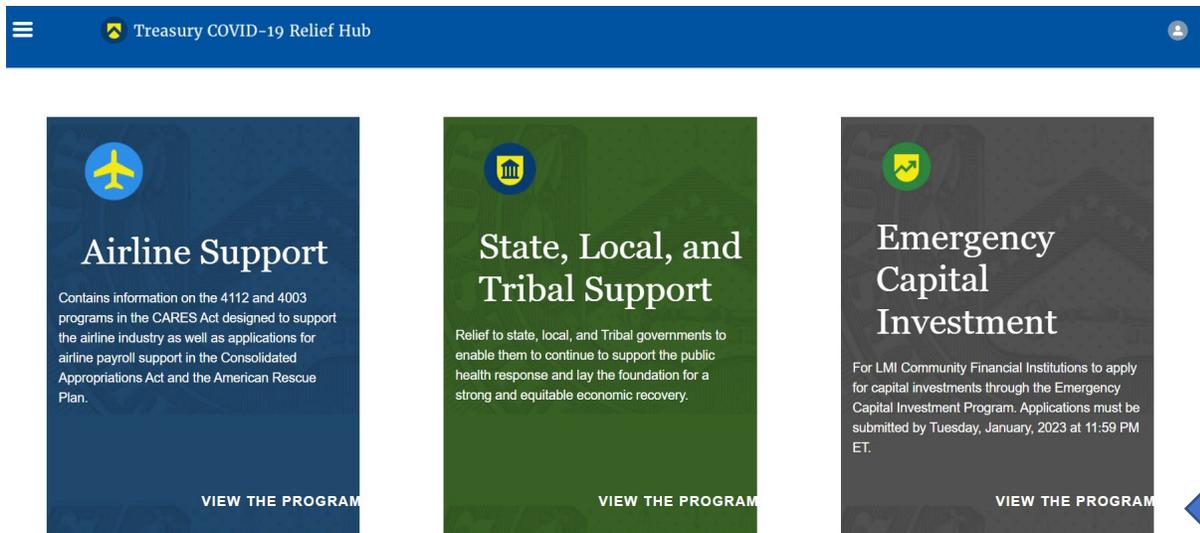
Getting Started.....	1
Application Submission	2

Getting Started

1. You will be required to log in using ID.me with this link: <https://portal.treasury.gov/cares/s/ecip>
 - a. More information on creating and using an ID.me account can be found at the following link: [ECIPApplicationPortalRegistration DetailedInstructions.pdf \(treasury.gov\)](#)
2. After logging in you will be taken to the Treasury COVID 19 Relief Hub page. You will see a warning message, please read and dismiss the message by clicking on the dismiss button below.



3. Next, under Program Areas, please click the Emergency Capital Investment box to view the program.



Application Submission

1. Once you have clicked the Emergency Capital Investment box to view the program, you will arrive at the application landing page, to start an application.



2. There will be a menu list to the left to access information related to the application, such as the application, introduction, application process, eligibility, term sheets, aggregate amounts, conflicts of interest, termination of investment authority, and paperwork reduction act notice. Please read the details of the content.

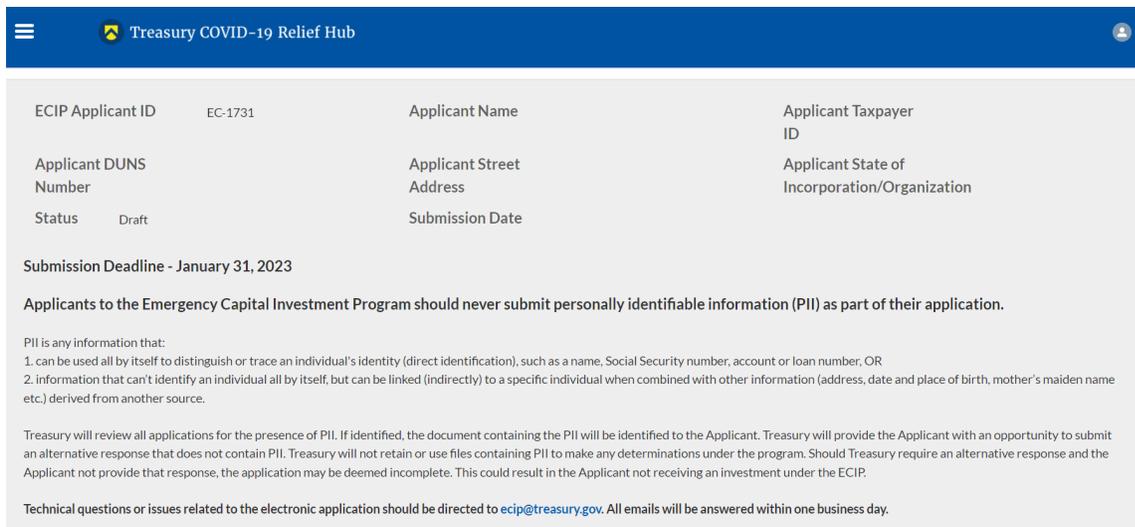
- Applications
- Introduction
- Application Process
- Eligibility
- Term Sheets
- Definitions
- Aggregate Amounts
- Conflicts of Interest
- Termination of Investment Authority
- Collection of Data
- Paperwork Reduction Act Notice



3. To start, click the “Start an Application” button.



4. Please note the application details in the header of the application, such as the ECIP Applicant ID, Applicant name, Applicant Taxpayer ID, Applicant Duns Number, Applicant Street Address, Applicant State of Incorporation/Organization, and Status. Please also note that the application will be in draft form until the application is submitted. The submission deadline is January 31, 2023. Lastly, **applicants should never submit Personally Identifiable Information (PII).**



5. To the bottom left of the application details, there will be a menu list to access information related to the application, such as User Instructions, Term Sheets, Definitions, Applicant Information, Applicant Organization,

Affiliates, Financial Positions, Emergency Lending Plan, and Certification and Submission. Please click each tab starting with the User Instructions and ending with the Certifications and Submission tab. Please save after entering information on each of the tabs.

User Instructions
Term Sheets
Definitions
Applicant Information
Applicant Organization
Affiliates
Financial Positions
Emergency Lending Plan
Certification & Submission



6. User Instructions:

Please read the User Instructions and complete each field, if required, please also provide supporting explanations and documentation. Please also note that the application has several sections which were listed above.

If you are collaborating on this application with someone else, send an email to the caresitforms@treasury.gov to request that your co-workers id.me profile be merged so that you may collaborate together on this ECIP form.

If someone's access needs to be revoked, you can send an email to caresitforms@treasury.gov in order to request that your co-workers profile be removed.

After the application is completed and submitted successfully, the primary contact person listed in the application will receive an automated confirmation email from the Treasury.

7. Term Sheets:

Please click and read the Term Sheets by selecting the bullet. Based on the type of applicant and other factors, Treasury's investment under the ECIP may take the form of senior preferred stock or subordinated debt.

User Instructions	<p>Depending on the type of applicant and other factors, Treasury's investment under the ECIP may take the form of senior preferred stock or subordinated debt.</p> <ul style="list-style-type: none"> • Senior Preferred Stock Term Sheet • Subordinated Debt Term Sheet for Mutual Institutions and S Corporations • Subordinated Debt Term Sheet for Credit Unions
Term Sheets	
Definitions	
Applicant Information	
Applicant Organization	
Affiliates	
Financial Positions	
Emergency Lending Plan	
Certification & Submission	

8. Definitions:

Please click and read the Definitions by selecting Quick Links. The definitions are applicable the guidelines, the Emergency Capital Investment Lending Plan, and the Application Form.

User Instructions	The following definitions apply to these guidelines, the Emergency Investment Lending Plan, and to the application form:
Term Sheets	
Definitions	
Applicant Information	
Applicant Organization	
Affiliates	<p style="text-align: center;"><u>Quick Links</u></p> <p> Act Affiliate Applicant Appropriate Federal Banking Agency Bank Holding Company C Corporation CDFI Fund Control Community Development Financial Institution Emergency Capital Investment Fund Emergency Capital Investment Program Emergency Investment Lending Plan Eligible Institution Equity Interest Executive Department Family Member FDIC FRB Federally Insured Credit Union Government Official Historically Disadvantaged Individual Insured Depository Institution Low-Income Low-Income Credit Union Low- and/or Moderate-Income Low- and Moderate-Income Community Financial Institution Low-Income Area/Community Member of Congress Metropolitan Area Minority Minority Business Minority Community Minority Depository Institution Mutual Institution NCUA Non-Metropolitan Area OCC Other Targeted Population Parent Company S Corporation Savings and Loan Holding Company Secretary State Regulator Subsidiary Total Assets Troubled Condition Underserved Area/Community Urban </p>
Financial Positions	
Emergency Lending Plan	
Certification & Submission	

9. Applicant Information:

Please complete each field of the Applicant Information tab. The term “Applicant” refers to the eligible institution that is seeking to apply to receive a capital investment under the Program.

User Instructions	Reminder: The term “Applicant” refers to the eligible institution that is seeking to apply to receive a capital investment under the Program.	
Term Sheets		
Definitions		
Applicant Information		
Applicant Organization	Name	Chief Executive Officer (or individual performing a similar function) Name
Affiliates	Taxpayer ID (EIN) Number (XX-XXXXXXX)	Chief Executive Officer (or individual performing a similar function) Phone
Financial Positions	DUNS Number (XX-XXX-XXXX)	Chief Executive Officer (or individual performing a similar function) Email
Emergency Lending Plan	Fiscal Year End Date (MM/DD)	Chief Financial Officer (or individual performing a similar function) Name
Certification & Submission	Street Address	Chief Financial Officer (or individual performing a similar function) Phone
	City	Chief Financial Officer (or individual performing a similar function) Email
	State	Primary Contact
	Zip Code	--None--

Once all fields are completed, please reminder to “Save this page” which is located on the bottom right of the page.

<input type="text" value="--None--"/> Zip Code <input type="text"/> County <input type="text"/> Applicant's State of Incorporation or Organization <input type="text" value="--None--"/>	Primary Contact <input type="text" value="--None--"/> Primary Contact Person Name <input type="text"/> Primary Contact Person Title <input type="text"/> Primary Contact Person Phone <input type="text"/> Primary Contact Person Email <input type="text"/>
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[Save this page](#)



10. Applicant Organization:

Please complete each field of the Applicant Organization tab.

<ul style="list-style-type: none"> User Instructions Term Sheets Definitions Applicant Information <li style="background-color: yellow;">Applicant Organization Affiliates Financial Positions Emergency Lending Plan Certification & Submission 	Select the option that describes the Applicant. <input type="text" value="--None--"/> Is the Applicant a Minority Depository Institution? <input type="text" value="--None--"/> Is the Applicant a certified CDFI that originally applied for certification on or before September 30, 2021? <input type="text" value="--None--"/> Is the Applicant a Low Income Credit Union, (if applicable)? <input type="text" value="--None--"/> Was the Applicant eligible to apply for an ECIP investment on September 1, 2021? <input type="text" value="--None--"/>	Name of Applicant Primary Federal Regulator <input type="text" value="--None--"/> Is Applicant a Holding Company? <input type="text" value="--None--"/>
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Once all fields are completed, please reminder to “Save this page” which is located on the bottom right of the page.

OCC Charter No.

NCUA Charter No.

State Regulator, if applicable

Identifier for state-chartered credit union

Total Assets (\$, most recent quarter for which data is available)*

*If the Applicant is a BHC or SLHC that does not report total consolidated assets, the Applicant BHC or SLHC should report its Total Assets and the Total Assets of any Subsidiary Insured Depository Institution.

[Save this page](#)



11. Affiliates:

Please complete each field by selecting the drop-down box. This tab has two areas to “Save this page.” There is a “Save this page” button near the top right and a button near the bottom right side of the page. Please click each button after providing the requested information.



Please follow each prompt on the page as instructed to complete the requested information. For example, a response of yes to the “Add more Affiliates” prompts additional fields to complete to add the affiliate information. Next, click the “Create Affiliate” button.



Please select the save button once the information populates. Create additional affiliates repeating the steps above if more affiliates are needed.



Please provide a chart that identifies the Applicant’s ownership structure and all Affiliate relationships and upload the files or drop the files.

Provide a chart that identifies the Applicant's ownership structure and all Affiliate relationships.

Upload Required Doc(s)

 **Upload Files** Or drop files

Additionally, if the Applicant is a BHC, a SLHC, or the Affiliate of a BHC/SLHC, the Applicant may skip the question if it uploads its most recent FR Y-6.

Upload Required Doc(s)

 **Upload Files** Or drop files

Lastly, please click the "Save this page" button near the bottom right side of the page.



12. Financial Positions:

Please provide the following information on the Applicant by selecting the drop-down box.

User Instructions	Please provide the following information on the Applicant.
Term Sheets	
Definitions	Is the Applicant able to issue preferred stock to Treasury in connection with its participation in the Program?
Applicant Information	--None--
Applicant Organization	Is the Applicant (or its Parent Company) a publicly traded company?
Affiliates	--None--
Financial Positions	
Emergency Lending Plan	Corporate Structure
Certification & Submission	--None--
	PROPOSED AGGREGATE PRINCIPAL AMOUNT (OR COMPARABLE AMOUNT) OF SENIOR PREFERRED STOCK OR OTHER FINANCIAL INSTRUMENT

Lastly, please click the "Save this page" button near the bottom right side of the page.

Financial Positions

Emergency Lending Plan

Certification & Submission

Corporate Structure
--None--

PROPOSED AGGREGATE PRINCIPAL AMOUNT (OR COMPARABLE AMOUNT) OF SENIOR PREFERRED STOCK OR OTHER FINANCIAL INSTRUMENT

Provide information on the financial instrument that the Applicant seeks to issue under the Program. Select the term sheet applicable to the type of investment that the Applicant is requesting under the Program.

--None--

Provide the aggregate dollar amount of financial instruments or senior preferred stock that the Applicant seeks to issue to the Treasury Department under the Program (rounded down to the nearest thousand dollar increment; e.g., \$453,000 not \$453,611)

Save this page



13. Emergency Lending Plan:

The Applicant must provide documentation that supports its responses to questions 1 through 4 of the Emergency Investment Lending Plan. **Please click the “Save this page” button near the bottom right side of the page each time you enter information.**

If the Applicant is a BHC or a SLHC, the information provided in response to questions 1 through 4 must be based on information aggregated across all of the Applicant’s Subsidiary Insured Depository Institutions.

The definitions of the capitalized terms contained in the Emergency Investment Lending Plan appear in the Community Development Banking and Financial Institutions Act of 1994, as amended by the Consolidated Appropriations Act, 2021, and the Application Instructions for the Emergency Capital Investment Program.

User Instructions
Term Sheets
Definitions
Applicant Information
Applicant Organization
Affiliates
Financial Positions
Emergency Lending Plan
Certification & Submission

ATTENTION:

- The Applicant must provide documentation that supports its responses to questions 1 through 4 of the Emergency Investment Lending Plan.
- If the Applicant is a BHC or a SLHC, the information provided in response to questions 1 through 4 must be based on information aggregated across all of the Applicant’s Subsidiary Insured Depository Institutions
- The definitions of the capitalized terms contained in the Emergency Investment Lending Plan appear in the Community Development Banking and Financial Institutions Act of 1994, as amended by the Consolidated Appropriations Act, 2021, and the Application Instructions for the Emergency Capital Investment Program.
- The Consolidated Appropriations Act, 2021, indicates that the ECIP is intended to support low- and moderate-income communities, minority communities, rural communities, underserved areas, consumers, small businesses, and nonprofit organizations, among others. Treasury will take factors such as these statutory considerations into account when it determines the investment amount that eligible institutions will receive under the ECIP, particularly if the aggregate amounts requested by eligible institutions exceed available program funds. Using information provided in ECIP applications, Treasury will determine a methodology for allocating available funds and determining investment amounts. Treasury will make its methodology public prior to making any investments under the ECIP. In addition, Treasury may determine, based on the volume and types of applications that are submitted, to withhold a portion of the available ECIP funds for a subsequent round of investments to be made at a future date.

Please follow each prompt on the page as instructed to complete the requested information.

Question 1: Lending to LMI and Other Targeted Populations.

Question 1(a). Loans originated refers to all new extensions of credit funded by the Applicant during the referenced fiscal year. Please **provide exact whole numbers** to the extent possible. Please note which figures used for FY2020 and FY2021, if any, are estimated and submit supporting documentation for any estimates in the upload box below. If the Applicant is a BHC or a SLHC, the information provided must be information aggregated across all of the Applicant’s Subsidiary Insured Depository Institutions.

	Loans originated during FY 2019		Loans originated during FY 2020		Loans originated during FY 2021		Estimated loans originated during FY 2022		Projected loans to be originated during FY 2023		Projected loans to be originated during FY 2024	
	Number of Loans	\$ Amount of Loans	Number of Loans	\$ Amount of Loans	Number of Loans	\$ Amount of Loans	Number of Loans	\$ Amount of Loans	Number of Loans	\$ Amount of Loans	Number of Loans	\$ Amount of Loans
1. Applicant’s Total Loans	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00
2. Applicant’s lending made directly to LMI borrowers	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00
3. Applicant’s lending made directly to Other Targeted Populations* not already included in 2	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00
4. Applicant’s lending made to borrowers or projects that create direct benefits for LMI populations** not already included in 2 and 3	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00
5. Applicant’s lending made to borrowers in census tracts that are majority Other Targeted Populations not already included 2, 3, and 4	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00

Applicants must provide supporting documentation that indicates which figures used for FY 2020 and FY 2021 are estimated and provide the methodology and information used to make such estimates.

Please upload the files or drop the files.

Upload Required Doc(s)

↑
Upload Files
Or drop files

Question 1(b). For loans originated by the Applicant over the past 2 fiscal years to “borrowers and projects that create direct benefits for LMI populations” counted towards figures reported in Question 1(a), provide the following information for up to the five largest of such borrowers served by the Applicant.

Please enter the text and select the drop-down box.

Descriptions of borrowers to LMI	County	State	Estimated # of LMI individuals benefited	# of loans originated to borrowers	Total \$ of loans outstanding to borrowers	Description of borrower or project
<input type="text"/>	<input type="text"/>	--None-- ▼	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	--None-- ▼	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	--None-- ▼	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	--None-- ▼	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	--None-- ▼	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
						<input type="text"/>

Question 1(c). If the Applicant is unable to show that it meets the 30% threshold as required by the Act in Question 1(a), please provide other data and information that can be used as a proxy to demonstrate that not less than 30 percent of the lending of the Applicant over the past 2 fiscal years was made directly to LMI borrowers, to borrowers or projects that create direct benefits for LMI populations, to Other Targeted Populations, or any combination thereof, as measured by the total number and dollar amount of loans. Lending made to borrowers in census tracts that are majority Other Targeted Populations (see row 5 in Question 1(a)) is an example of a geography-based proxy for lending “directly to Other Targeted Populations” (see row 3 in Question 1(a)). In responding to this Question 1(c), borrowers may provide additional proxies for lending to LMI or Other Targeted Populations, including data with respect to the past two fiscal years, and provide a 2- year track record based on that data and a three-year projection for lending.

Please upload the files or drop the files.

Upload Required Doc(s)

↑
Upload Files
Or drop files

Question 2: Business Strategy to Address Community Development Needs.

Please describe how the business strategy and operating goals of the Applicant will address the community development needs in communities that may be disproportionately impacted by the economic effects of COVID-19, which includes the needs of small businesses, consumers, nonprofit organizations, community development, and other projects providing direct benefits to LMI communities, Low-Income individuals, and Minorities within the Minority, Rural, and Urban Low-Income and Underserved Areas served by the Applicant. Provide measurable factors for how the community has been impacted by COVID-19, such as increases in unemployment, the number of businesses closed due to the pandemic, or mortgage delinquencies.

The response to this question should also include up to five examples of particular business activities that the Applicant will perform in FY 2023-24 to address community development needs in communities that may be disproportionately impacted by the economic effects of COVID-19.

For each example, provide quantitative estimates and anticipated timing information that illustrate how the relevant community development needs will be met, what particular groups and communities (e.g. small

businesses, Low-Income individuals) will benefit, and the overall planned economic impact to those groups/communities and in Minority, Rural, and Urban Low-Income and Underserved Areas served by the Applicant. Where appropriate, address how an investment received under the ECIP will support the described activities.

Each Applicant should provide data and information that support its belief that business strategy and operating goals are realistic and achievable and will address the Community Development needs in communities that may be disproportionately impacted by the economic effects of COVID-19.

Please upload the files or drop the files.

Upload Required Doc(s)

 **Upload Files** Or drop files

Question 3: Emergency Lending Plan.

Question 3(a) - Aggregate Growth Strategy

Please provide the additional aggregate dollar amount of qualified and deep impact loans, grants, and forbearance projects that the Applicant, as a direct result of issuing the full amount of financial instruments or senior preferred stock to the Treasury Department that it is seeking to issue under the Program, would provide over the 10 year term of the financial instrument

Please provide the amount in the box below.

Additional Aggregate Amount

Treasury will consider county level data in evaluating Emergency Investment Lending Plans. Accordingly, applicants must provide projections of aggregate growth in each county in their target market(s).

Using the template provided, provide the percentage of the aggregate dollar amount of qualified and deep impact loans, grants and forbearance (from above) that the applicant projects will occur in each county in their target market(s). (The total percentage must equal 100% for all counties.)

Select "Download Template" to access the template.

[Download Template](#) 

Please upload the files or drop the files.

Upload Required Doc(s)

 [Upload Files](#) Or drop files

Question 3(b) - Minority and Disadvantaged Growth Strategy.

Please explain how the Applicant plans to expand or maintain significant lending or investment activity in LMI Minority communities, especially those that may be disproportionately impacted by COVID-19, to historically disadvantaged borrowers, and to Minorities that have significant unmet capital or financial services needs.

The response should include quantifiable details on the Applicant's planned approach to expanding or maintaining significant levels of lending or investment in these communities related to current/projected types of lending and investment (e.g., small business loans, loans to consumers), current/projected types of projects that will be funded (e.g., housing), and the community needs that projected lending or investment activities would serve.

Please upload the files or drop the files.

Upload Required Doc(s)

 [Upload Files](#) Or drop files

Question 4: Community Outreach and Communication.

Please provide a detailed plan describing how the Applicant will engage in community outreach and communication in communities and with borrowers as identified in the Act, specifically including small businesses, Minority-owned businesses, and consumers, especially in low-income and underserved communities, including persistent poverty counties and limited English proficient populations, that may be disproportionately impacted by the economic effects of the COVID-19 pandemic. The Applicant's plan for community outreach and communication may be provided or described through a community benefits agreement between the Applicant and organizations, trade associations, and individuals that represent or work within Minority or LMI communities.

The response should include quantitative details on how particular aspects and features of the Applicant's planned community outreach and communication approach (e.g., advertisements to be purchased, sales personnel hired) may help the Applicant achieve the projected FY 2023-2024 lending and/or investment activity amounts set forth in response to Question 1(a).

Please upload the files or drop the files.

Upload Required Doc(s)

 [Upload Files](#) Or drop files

Lastly, please click the "Save this page" button near the bottom right side of the page.

Save this page



14. Certification & Submission

The Chief Executive Officer and Chief Financial Officer or authorized representative performing similar function must certify and submit the application.

User Instructions	
Term Sheets	
Definitions	
Applicant Information	
Applicant Organization	
Affiliates	
Financial Positions	
Emergency Lending Plan	
Certification & Submission	<p>By signing below, I hereby certify that I have the authority to execute this application for the Applicant on whose behalf I am : all current representations made are true and correct to the best of my knowledge, and that all projections made are accurate reasonable to the best of my knowledge. I further acknowledge that on behalf of the Applicant I have also submitted an Incur Certificate attached hereto. I further acknowledge that on behalf of the Applicant I have also submitted the Applicant's most year-end audited financial statements attached hereto. I further acknowledge that any false statements made to the Department Treasury can result in criminal prosecution under 18 U.S.C. 1001, 15 U.S.C. 645, and other provisions and imposition of civil penalties under 31 U.S.C. 3729.</p> <p>The authorized representative of the Applicant must certify in good faith to all of the below by checking each one and certify application below:</p> <p>The Applicant has attached below additional information not provided elsewhere in this application in support of its Emergency Investment Lending Plan, including Applicant's most recent fiscal year-end audited financial statement (or explanation why an audit will not be provided). The Applicant hereby verifies the accuracy of this information.</p>

Please upload the files or drop the files for additional information not provided elsewhere in this application in support of its Emergency Investment Lending Plan, including the Applicant's most recent fiscal year-end audited financial statement (or explanation why an audit will not be provided). The Applicant hereby verifies the accuracy of this information.

Upload Required Doc(s)

 **Upload Files** Or drop files

Please upload the files or drop the files for the Incumbency Certificate.

Upload Required Doc(s)

 **Upload Files** Or drop files

The Chief Executive Officer and Chief Financial Officer or authorized representative must certify in good faith to the message on the page by reading and signing. Each individual must sign to certify and save.

Please sign and save only one signature per individual.

Sign Here



Save Clear

Please sign and save only one signature per individual.

Sign Here



Save Clear

When both signatures are saved, please select the submit button.

Submit Application ←

Contact the ECIP Team with any questions or concerns at ecip@treasury.gov.

Resources on the ECIP Application are available on the ECIP webpage: [ECIP webpage link](#)