



USTDA-Funded Feasibility Study, Technical Assistance, or Training Grant

**Government-Owned Company and Parastatal
Grantee Information Form**

This form is designed to enable the U.S. Trade and Development Agency ("USTDA") to obtain information about entities and individuals proposed for participation in USTDA-funded activities. Information in this form is used to conduct screening of entities and individuals to ensure compliance with legislative and executive branch prohibitions on providing support or resources to, or engaging in transactions with, certain individuals or entities with which USTDA must comply.

USTDA Activity Number [*To be completed by USTDA*]

Activity Type [<i>To be completed by USTDA</i>]	Feasibility Study	Technical Assistance	Other (specify)
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Activity Title [*To be completed by USTDA*]

Full Legal Name of Grantee

Business Address (street address only)

Telephone	Fax	Website
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Year Established (include any predecessor company(s) and year(s) established, if appropriate).
Please attach additional pages as necessary.

Please provide a list of directors and principal officers as detailed in Attachment A. Attached?	Yes
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Type of Formation	Created by Statute. Please attach statute. Attached?	Yes
	Other (specify and attach supporting documentation). Attached?	Yes

If applicable, provide a list of shareholders and the percentage of their ownership. In addition, for each shareholder that owns 15% or more shares in Grantee, please complete Attachment B.

Is the Grantee a wholly-owned or partially owned subsidiary?	Yes
	No

If so, please provide the name of the Grantee's parent company(s). In addition, for any parent identified, please complete Attachment B.

Project Manager

Name	Surname
	Given Name

Address

Telephone

Fax

Email

Grantee may attach additional sheets, as necessary.



Grantee's Representations

Grantee shall certify to the following (or provide any explanation as to why any representation cannot be made):

1. Grantee is a *[check one]*

<input type="checkbox"/>	Government-Owned Corporation
<input type="checkbox"/>	Other (please specify) _____

duly organized, validly existing and in good standing under the laws of: _____ .

The Grantee has all the requisite power and authority to conduct its business as presently conducted. The Grantee is not debarred, suspended, or to the best of its knowledge or belief, proposed for debarment or ineligible for the award of government contracts under the laws of the U.S. or any other law.
2. The Grantee has included herewith, a copy of its authorizing legislation or Articles of Incorporation (or equivalent charter or document issued by a designated authority in accordance with applicable laws that provides information and authentication regarding the legal status of an entity), as well as an English translation of such documentation. The Grantee commits to notify USTDA if it becomes aware of any change in its status in the jurisdiction in which it is a legal entity. Attached? Yes
3. Neither the Grantee nor any of its principal officers have, within the three-year period preceding the submission of these representations, been convicted of or had a judgment rendered against them for: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a government contract or subcontract under the laws of the U.S. or any other law; violation of antitrust statutes under the laws of the U.S. or any other law relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, violating criminal tax laws, or receiving stolen property.
4. Neither the Grantee, nor any of its principal officers, is presently indicted for, or otherwise criminally or civilly charged with, commission of any of the offenses enumerated in paragraph 3 above.
5. There are no tax liens pending against the assets, property or business of the Grantee. The Grantee, has not, within the three-year period preceding the submission of this proposal, been notified of any delinquent federal or state taxes in an amount that exceeds US\$3,000 for which the liability remains unsatisfied. Taxes are considered delinquent if (a) the tax liability has been fully determined, with no pending administrative or judicial appeals; and (b) a taxpayer has failed to pay the tax liability when full payment is due and required.
6. The Grantee has not commenced a voluntary case or other proceeding seeking liquidation, reorganization or other relief with respect to itself of its debts under any bankruptcy, insolvency or other similar law. The Grantee has not had filed against it an involuntary petition under any bankruptcy, insolvency or similar law.

The Grantee shall notify USTDA if any of the representations are no longer true and correct.

Grantee certifies that the information provided in this form is true and correct. Grantee understands and agrees that the U.S. Government may rely on the accuracy of this information in processing a request to participate in a USTDA-funded activity. If at any time USTDA has reason to believe that any person or entity has willfully and knowingly provided incorrect information or made false statements, USTDA may take action under applicable law. The undersigned represents and warrants that he/she has the requisite power and authority to sign on behalf of the Grantee.

Name		Signature	
Title		Date	
Organization			



ATTACHMENT B

USTDA-Funded Feasibility Study, Technical Assistance, or Training Grant

**Government-Owned Company and Parastatal
Grantee Information Form**

This form shall be completed for each shareholder that owns 15% of more shares in Grantee, as well as any parent corporation of the Grantee ("Shareholder"). In addition, this form shall be completed for each Shareholder identified in Attachment B that owns 15% or more shares in Shareholder, as well as any parent identified in Attachment B.

USTDA Activity Number [<i>To be completed by USTDA</i>]	
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Activity Title [<i>To be completed by USTDA</i>]	
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Full Legal Name of Grantee	
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Full Legal Name of Shareholder	
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Business Address of Shareholder (street address only)	
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Telephone number		Fax Number	
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Year Established (include any predecessor company(s) and year(s) established, if appropriate). Please attach additional pages as necessary.	
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Please provide a list of directors and principal officers as detailed in Attachment A. Attached?	Yes
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Type of Ownership	<input type="checkbox"/>	Publicly Traded Company (i.e., offers securities for sale to the general public through a stock exchange)
	<input type="checkbox"/>	Private Company
	<input type="checkbox"/>	Other (please specify)

If Shareholder has shareholders, provide a list of such shareholders and the percentage of their ownership. In addition, for each shareholder that owns 15% or more shares in Shareholder, please complete Attachment B.	
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Is the Shareholder a wholly-owned or partially owned subsidiary?	Yes
	No

If so, please provide the name of the Shareholder's parent(s). In addition, for any parent identified, please complete Attachment B.	
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Shareholder may attach additional sheets, as necessary.