

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

Private Sector Grantee Information Form										
in USTDA-funded	ned to enable the U.S. Trade a activities. Information in this as on providing support or reso	form is used to co	nduct	screening of entiti	es and i	ndividuals to ens	ure cor	mpliance v	vith I	egislative and executive
USTDA Activity Number [To be completed by USTDA]										
Activity Type [To be completed by USTDA]			Feasibility Study		Technical Assistance				Other (specify)	
Activity Title [To be completed by USTDA]										
Full Legal Name of Grantee										
Business Address (street address only)										
Telephone		Fax				Website				
	ed (include any predecessor co	ompany(s) and year	(s) es	tablished, if appropr	riate).		•			
	intee's Principal Place of	Business								
Please provide a list of directors and principal officers as detailed in Attachment A. Attached? Yes					es					
Type of Owner	rship	Publicly Trac	ded	Company (i.e., off	ers secu	rities for sale to t	ne gene	eral public	thro	ugh a stock exchange)
		Private Com	npany							
Other (please			e specify)							
If Grantee 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 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 Manag	ger									
Name			Sui	rname						
			Giv	ven Name						
Address										
Telephone										
Fax										
Email Cranton may attach additional shoots as no										
Grantee may attach additional sheets, as necessary.										



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	Granton's Donuscoutations								
Grantee's Representations Grantee shall certify to the following (or provide any explanation as to why any representation cannot be made):									
	Grantee is a [check one]	Corporation	ily dily represen	itation carmot be made).					
`		Other (please specify)							
	duly organized, validly existing and in good standing under the laws of:								
	The Grantee has all the requisite corporate 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.	· ·								
	designated authority in accordance with applicable laws that provides information and authentication regarding the legal								
:	status of an entity) and a Certificate of Good Standing (or equivalent document) issued within 1 month of the date of signature								
	below under the laws of:								
	The Grantee has also included herewith, an English translation of such documentation. The Grantee commits to notify USTDA								
		change in its status in the jurisdiction in w							
		ny of its principal officers have, within the	• •	•					
	•	, ,		ommission of fraud or a criminal offense in					
		attempting to obtain, or performing a government							
	•	tion of antitrust statutes under the laws o							
	offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements,								
		nal tax laws, or receiving stolen property.	diatad fan an an	otherwise criminally or civilly charged with,					
		ffenses enumerated in paragraph 3 above	· ·	otherwise criminally or civilly charged with,					
				ee. The Grantee, has not, within the three-					
				ent 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.								
	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			Jigilatare						
Orga	anization		Date						



ATTACHMENT A USTDA-Funded Feasibility Study, Technical Assistance, or Training Grant Private Sector Grantee Information Form Provide a list of all directors and principal officers (e.g., President, Chief Executive Officer, Vice-President(s), Secretary, Treasurer, or other applicable title). Please provide full names including surname and given name. USTDA Activity Number [To be completed by USTDA] Activity Title [To be completed by USTDA] Full Legal Name of Entity

Title	Name				
(e.g., Director, President, Chief Executive Officer, Vice-President(s), Secretary, Treasurer, or other applicable title) * Please place an asterisk (*) next to the names of those principal officers who will be involved in the USTDA-funded activity	Surname	Given Name	Middle Name		



ATTACHMENT B

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

Private Sector 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.

15% of more shares in Shareholder, a	s well as ally par	ent identined in	Attaciiiieiit b.				
USTDA Activity Number [To be comple							
Activity Title [To be completed by UST							
Full Legal Name of Grantee							
Full Legal Name of Shareholder							
Business Address of Shareholder (stronly)							
Telephone number			Fax Number				
Year Established (include any predecessor appropriate). Please attach additional pages a	(s) established, if						
Country of Shareholder's Principal Pla							
Please provide a list of directors and I	orincipal officers	as detailed in At	tachment A. Attached?	Yes			
Type of Ownership	Publicly Tra	ded Company (i.	e., offers securities for sale to the gene	eral public through a stock exchange)			
	Private Com	npany	_				
	e specify)						
If Shareholder has shareholders, prov such shareholders and the percentag							
ownership. In addition, for each shar							
owns 15% or more shares in Shareho							
complete Attachment B.							
Is the Shareholder a wholly-owned or	Yes						
owned subsidiary?	No						
If so, please provide the name of the							
parent(s). In addition, for any parent							
please complete Attachment B.							
Shareholder may attach additional sheets, as necessary.							