California Pollution Control Financing Authority

Office Location: 901 P Street, 3rd Floor

Sacramento, CA 94209-0001

Mailing Address: P.O. Box 942809

Sacramento, CA 95814 <u>CalCAP@treasurer.ca.gov</u>



CalCAP FINANCIAL INSTITUTION APPLICATION

Name of Financial Institution:			
Taxpayer ID Number/EIN:			
Address:			
City:	State:	Zip:	
Contact Person Name:			
Title:			
Address:			
City:	State:	Zip:	
Phone:	Email Address:		
Type of Application:			
□ New Financial Institution Application		☐ Amended Financial Institution Application	
Program(s) Selected:			
□ CalCAP for Small Business		□ CalCAP Collateral Support	
□ CalCAP CARB ZEHDV		□ CalCAP CEC ZEHDI	
□ CalCAP SCE ZETBIF		□ CalCAP Seismic Safety	
□ CalCAP ADA			
Type of Institution:			
□ Bank, federal-chartered			
□ Bank, state-chartered			
□ Credit union, state-chartered			
□ Credit union, federal-chartered			
□ Community development financial institution: (Check all that apply)			
□ CDFI Fund Certified □ Non-Profit □ For Profit			
☐ Finance lender as defined pursuant to the California Financial Code Section 22009 making			
commercial loans as defined pursuant to the California Financial Code Section 22502			

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☐ Financial Development Corporation	
☐ Lending institution that has a current participation agreement	with the SBA for the 7(a), Microloan,
or 504 program.	
☐ Microbusiness lender as defined by the Government Code Se	ection 12100(b)(15)
□ Savings association, federal-chartered	
□ Savings association, state-chartered	
□ Small business investment company	
☐ Consortium of these foregoing entities	
Combined capital and surplus at most recent fiscal year en	d:
Number of lending branches:	
Regulatory Agency:	
Regulatory ID #:	
Insuring Agency:	
Provide a description of the Board of Directors, including nand gender, as an attachment.	names of all members, ethnicity,
☐ Attached is one document. ☐ Attach	ed is more than one document.
List of counties in which the organization lends:	
Term loans: ☐ Yes ☐ No	
Lines of credit: ☐ Yes ☐ No	
Please describe the organization's small business lending progression offered to small businesses:	ram, as well as any other services

Per Section 8071 of the CPCFA Regulations, by enrolling as a CalCAP Financial Institution:

• The applicant certifies that the applicant Financial Institution is not subject to a cease-and-desist

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order or other regulatory sanction with the appropriate federal or state regulatory body, which would impair its ability to participate in the Program.

- The Financial Institution agrees to follow the Program's procedures as set forth in the Law and the regulations regarding the Capital Access Program for Small Businesses.
- The Financial Institution agrees to permit an audit of any of its records relating to enrolled
 Qualified Loans, during normal business hours on its premises, by the Authority or its agents, and
 to supply such other information concerning enrolled Qualified Loans as shall be requested by the
 Executive Director.
- The Financial Institution acknowledges that the Authority and the State will have no liability to the Participating Financial Institution under the Program except from funds deposited in the Loss Reserve Account for the Participating Financial Institution.
- If this an amended application, the Participating Financial Institution certifies that there have been
 no changes to the status of the Participating Financial Institution since the original application
 which was submitted to CalCAP for approval, unless explained in a separate document on the
 Participating Financial Institution's letterhead.
- Note: all capitalized terms are defined in Section 8070 of the CPCFA Regulations.

Authorized Signature Printed Name Title Date

California Pollution Control Financing Authority Use Only		
S&P GMI's Rating	LACE Rating and/or Kroll	
CalCAP ID#	Establish Loan Loss Reserve Account at:	
	□ Trustee Bank	
	□ Participating Financial Institution	
Approval Signature	Enrollment Date	

When complete, please send to: CalCAP@treasurer.ca.gov

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