



NYC Accelerator: PACE Financing Program Qualified Lender Application

Person Completing Application: _____
(insert full name)

Title: _____
(title of person completing application)

Email: _____
(insert email address)

Telephone No.: _____
(insert no.)

Date: _____
(month) (day), (year)

INSTRUCTIONS: Provide the following documents and complete all parts of the application.

1. If a question is not applicable, write: "n/a".
2. When submitting this application, be sure to also provide all required supplemental documents (see page 6).
3. Before submitting this application, be sure to read and sign the Certifications and Authorizations in Part F.
4. Capitalized terms used in this application have the meanings given in the Request for Qualifications for Qualified Lenders for the NYC Accelerator, PACE Financing Program, originally released April 22, 2021 and revised September 27, 2022 (the "RFQ").
5. You may email any questions to PACE@nyceec.com.

A. Applicant Information				
Full legal name:				
Legal structure <i>(check one)</i> : <input type="checkbox"/> Limited liability company <input type="checkbox"/> For-profit corporation <input type="checkbox"/> Not-for-profit corporation <input type="checkbox"/> General partnership <input type="checkbox"/> Limited partnership <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> S-corporation <input type="checkbox"/> Bank <input type="checkbox"/> CDFI <input type="checkbox"/> Other _____				
State of formation:		Date formed:		
Primary business address:		How many full time employees does Applicant have? _____ <i>(insert no.)</i>	Is Applicant a publicly-traded company? <input type="checkbox"/> Yes <input type="checkbox"/> No	
EIN #:		DUNS #:		
Qualified or registered to do business in the State of New York? <input type="checkbox"/> Yes <input type="checkbox"/> No		M/WBE certified? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Primary regulator(s):				
Management. List all individuals who are part of senior management and/or are officers of Applicant. <i>(Use a separate sheet if necessary)</i>				
Name	Title	E-Mail Address	Telephone No.	
Ownership information. If Applicant is <u>not</u> a publicly traded entity, provide the following information for all individuals and entities that own a 20% or greater ownership interest in the entity that is the Applicant. ¹ <i>(Use a separate sheet if necessary)</i>				
Name	U.S. Citizen?	Primary Business Address	% Owned	EIN
	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Yes <input type="checkbox"/> No			

¹ For individuals, Social Security Numbers, residential address and other information will be collected separately. Do not provide such information on this application.
C-PACE Qualified Lender Application v2.1 (Rev. 09-27-2022)

Insurance. What types of insurance does Applicant have? *(check all that apply and insert coverage amount)*

- General liability insurance Coverage amount: \$ _____
- Umbrella liability insurance Coverage amount: \$ _____
- Property insurance Coverage amount: \$ _____
- Worker's compensation, employer's liability and disability benefits Coverage amount: \$ _____
- Automobile liability insurance Coverage amount: \$ _____
- D&O insurance Coverage amount: \$ _____
- Errors and omissions / professional liability insurance Coverage amount: \$ _____
- Other: _____ Coverage Amount: \$ _____
(describe)

Geographic area. Describe the geographic area (e.g. City, State, region, etc.) in which most of Applicant's business is focused: _____
(insert description above)

Other PACE programs. Identify all PACE programs in which Applicant is currently qualified as a capital provider, lender or other similar party who is eligible to originate PACE loans. *(Use a separate sheet if necessary)*

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

Income Taxes. Unless waived in accordance with the RFQ, in order for an Applicant to be a Qualified Lender, the Applicant should be a "U.S. Person" for United States income tax purposes.

1. Is the Applicant a "U.S. Person" for United States income tax purposes? Yes No Unknown
2. If the Applicant becomes a Qualified Lender and originates PACE Loans under the Program, as those loans are repaid and the related loan payments are remitted to the Applicant, explain in the space below what such payments would constitute for United States income tax purposes (e.g. interest income, loan principal, etc.). *(Use a separate sheet if necessary)*

Financial Statements.

1. Does the Applicant customarily have its annual financial statements audited by an independent auditor in accordance with U.S. GAAP? Yes No
2. If the answer to the previous question is "No" provide, provide an explanation below *(Use a separate sheet if necessary)*

3. Does the Applicant anticipate that a Guarantor will or may be needed in order for the Applicant to meet all Qualification Requirements? Yes No Unknown

B. Key Person Information

Provide the following information on all Key Persons that Applicant intends to use in connection with its C-PACE lending operations under the Program. Attach additional pages to this application as necessary for additional Key Persons.

Total expected number of Key Persons: _____
(Insert no.)

Key Person information	In the fields below, briefly describe what each Key Person would do in respect of the Program lending operations of Applicant										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Key Person #1</td> <td>Name:</td> </tr> <tr> <td></td> <td>Title:</td> </tr> <tr> <td></td> <td>Company:</td> </tr> <tr> <td></td> <td>Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown</td> </tr> <tr> <td></td> <td>Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> </table>	Key Person #1	Name:		Title:		Company:		Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Key Person #1	Name:										
	Title:										
	Company:										
	Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown										
	Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Key Person #2</td> <td>Name:</td> </tr> <tr> <td></td> <td>Title:</td> </tr> <tr> <td></td> <td>Company:</td> </tr> <tr> <td></td> <td>Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown</td> </tr> <tr> <td></td> <td>Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> </table>	Key Person #2	Name:		Title:		Company:		Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Key Person #2	Name:										
	Title:										
	Company:										
	Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown										
	Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Key Person #3</td> <td>Name:</td> </tr> <tr> <td></td> <td>Title:</td> </tr> <tr> <td></td> <td>Company:</td> </tr> <tr> <td></td> <td>Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown</td> </tr> <tr> <td></td> <td>Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> </table>	Key Person #3	Name:		Title:		Company:		Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Key Person #3	Name:										
	Title:										
	Company:										
	Work full time on Program lending? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown										
	Authorized signatory for Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No										
<p>Has Applicant taken reasonable steps to ensure that none of the Key Persons has ever engaged in Questionable Ethical Behavior? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown</p>											

C. Contractors, Advisors and Other Vendors

Provide the following information on all contractors, advisors and other vendors (if any) Applicant expects to use in connection with its C-PACE lending operations under the Program. Attach additional pages to this application as necessary.

Does Applicant anticipate using any contractors, advisors or other vendors in connection with its C-PACE lending operations? Yes No Unknown

How many separate contractors, advisors and other vendors does Applicant anticipate using in connection with its C-PACE lending operations? _____ (Insert no.)

	In the fields below, briefly describe what type of service or product each contractor, advisor or other vendor would provide for Applicant
Contractor/advisor/ other vendor #1	
Contractor/advisor/ other vendor #2	
Contractor/advisor/ other vendor #3	
Contractor/advisor/ other vendor #4	

D. References

Provide the names, contact and other information of three individuals who can serve as references for Applicant.

Reference #1	Name:	E-mail:
	Title:	Telephone:
	Company:	Nature of Relationship:
Reference #2	Name:	E-mail:
	Title:	Telephone:
	Company:	Nature of Relationship:
Reference #3	Name:	E-mail:
	Title:	Telephone:
	Company:	Nature of Relationship:

E. Legal Questions (only applicable if Applicant is not a publicly traded company)

Are there any outstanding judgments or liens filed against Applicant or any of its principal owners in any jurisdiction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has Applicant or any of its principal owners ever declared bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is Applicant party to any lawsuit, arbitration or similar legal action that is material?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has any officer or senior manager of Applicant ever been convicted of a felony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has Applicant ever changed its legal name?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has Applicant ever operated or done business under a different trade name or moniker?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you have answered “Yes” to any of these questions, please explain in the space below (attach additional sheets if necessary)

F. Certifications and Authorizations

By signing below, the undersigned hereby acknowledges, agrees and certifies to Administrator as follows:

1. I have the authority to complete, sign and submit this application for and on behalf of the Applicant specified above.
2. To the best of my knowledge, the information included in this application is true and accurate and this application does not omit or misrepresent any material information.
3. I will notify Administrator promptly if there is any material change to any of the information provided in this application and/or the supplemental documents submitted with it.
4. Acceptance of this application and any supplemental documents does not constitute a commitment by Administrator to approve Applicant as a Qualified Lender under the Program and does not create a binding or legally enforceable obligation on Administrator, the City of New York or any other person or entity in any way.
5. This application (and all supplemental documents submitted with it) will remain Administrator’s property.
6. Administrator may perform background checks on the individuals identified in this application to help Administrator determine whether the Applicant meets all Qualification Requirements. I authorize Administrator to perform such background checks and verify information provided in this application, and I agree that Administrator may contact third parties to verify any such information.
7. I have read and understand the RFQ, including (without limit) the Qualification Requirements in Exhibit A to the RFQ, and the Additional Terms and Conditions in Schedule 1 to the RFQ.

Signature: _____

Name: _____

Title: _____

Date: _____

Please submit this Application to Administrator by e-mailing it to PACE@nyceec.com with the supplemental documents in the form described in the RFQ.



Supplemental Documents

The application should be submitted along with the following supplemental documents, as required in the RFQ. If any of the required documents are not available or are not applicable, please check the appropriate box and attach an explanation on a separate page attached to this application.

ITEM	<i>Attached</i>	<i>Not Available</i>	<i>Not Applicable</i>
<i>(for each item, check one)</i>			
1. Required Documents for all Applicants			
Transmittal Letter			
Resumes or CVs of Key Persons			
Evidence of Good Standing			
Evidence of registration/qualification to do business in New York State			
Proof of registration with the Procurement and Sourcing Solutions Portal (“PASSPort”)			
Underwriting Policies and Procedures			
Expected Financing Terms			
Description of PACE Lending Experience			
PACE Capital Availability and Assets Under Management			
IRS Form W-9 (or, if applicable, relevant IRS Form W-8)			
Description concerning environmental justice experience and plans			
Evidence of insurance coverage			
CFO certificate regarding unaudited financial statements			
2. Required Documents for Non-Public Companies			
Financial Statements			
Organizational Documents			
3. Optional Documents			
Description of Other Financing Products			
Pipeline of Live Projects			
Request for Waiver(s)			
Other Information or Documents			
Proposed form of financing agreement			