

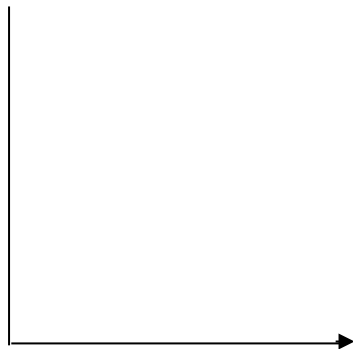


Making a Difference for Maine Communities

FINANCIAL APPLICATION

for Municipal Borrowers

Low-Interest Loans for



Clean Water

Improvement

Projects

Kelley Wheeler, Program Officer

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127 Community Drive, P.O. Box 2268, Augusta, Maine 04338-2268

1-800-821-1113 207-622-9386 Fax: 207-623-5359

MAINE MUNICIPAL BOND BANK
SRF - CLEAN WATER PROGRAM APPLICATION
FOR MUNICIPAL BORROWERS

Borrower Type: This application is designed for the purpose of obtaining financial information from sewer districts, municipalities and other governmental units. As a result, different information will be required for each type of unit. In certain cases it may be appropriate to note that a particular section is not applicable to the specific district or town. The following is a brief summary of the sections that are applicable to a specific type of borrower:

MUNICIPALITIES/GOVERNMENTAL UNITS: The application should be filled out with information concerning the specific municipality and/or governmental unit. If the system has any stand-alone debt, it should be reflected as part of the debt information. The same would hold true for any stand-alone system financial information. In most instances, the municipal applicant will complete the *Municipal Borrower* "Financial Information" section only.

DISTRICTS: If the district or system debt is backed by a General Obligation pledge of the municipality or municipalities in the district, both district and municipal financial information will be required. Each municipality being served by the system must provide their financial information so that the district can complete pages 11, 12 and 13. The district will complete pages 14 and 15. If the district stands on its own (*without a General Obligation pledge*), the district will leave pages 11, 12 and 13 blank, turn to, and complete pages 14 and 15 entitled "District Financial Information". The debt information will be handled in the same manner.

Repayment Source: Loan applications and supporting financial information will be reviewed for evidence of a dedicated source of revenue that is sufficient to cover repayment of the proposed loan, plus all existing indebtedness and operating costs of the borrower. Where the dedicated source of repayment is anticipated to be an increase in existing user charges, please note that new rates must be in place prior to the execution of a binding loan agreement.

DEP Approval: Attached to the back page of this Application is a Project Authorization form to be signed by the Department of Environmental Protection. This Authorization must be completed and signed by DEP before the Bond Bank can provide financing to the applicant. If DEP determines the project to be eligible, complete the application and

- 1) Mail a copy of the application to: Department of Environmental Protection, Division of Water Quality Management at 17 State House Station, Augusta, Maine 04333-0017.
- 2) Mail the original application and supporting documentation listed on the "Statement of Default" page of the Application to: Kelley Wheeler, SRF – Clean Water Program Officer, Maine Municipal Bond Bank, 127 Community Drive, P.O. 2268, Augusta, Maine 04338-2268.

Once the project is approved, DEP will forward the signed "Project Authorization" form to the Bond Bank. The Bond Bank will begin its review of the financing request once the Authorization is received.

Application Instructions: Line-by-line instructions to help you fill out the SRF - Clean Water application are available. When completing the application, please use black ink, printer or a typewriter. To obtain the most current version of the SRF - Clean Water application and line-by-line instructions, please visit our website: www.mmbb.com. The application and instructions can be downloaded to your PC by using the Adobe Acrobat Reader. There is also an Excel fillable application form on the website.

Careful completion of the application will contribute to quick processing of your loan request. Please bring to our attention any additional information that is not disclosed in the Application or the supporting documentation. If you have any questions or need help completing the application form, please call Kelley Wheeler at 1-800-821-1113 or (207)622-9386 (*Augusta*).

The undersigned Governmental Unit hereby requests the Maine Municipal Bond Bank to purchase the following described obligation of the applicant. This application shall not constitute a contract or commitment to enter into a contract.

GENERAL INFORMATION

Name of Applicant:

Mailing Address:

Physical Address:

Type of Unit: Municipality District Other

	Chief Administrative Officer	Contact Person (<i>if different</i>)	Project Engineer
Name:	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>
Title:	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>
Telephone:	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>
Fax:	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>
Email:	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>
Mailing Address:	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>

Purpose of Borrowing:

Status of the Project:

Are the engineering specifications completed? Yes No
 If no, what date will they be complete?

Have construction bids been awarded? Yes No
 If no, what is the projected bid date?

NOTE: Attached to this application is a blank Project Authorization form. Please mail the form and a copy of the completed application to your SRF Project Manager at the Department of Environmental Protection.

Have you obtained all permits and authorizations required for this project? NOTE: DEP technical staff will provide you with a list of the permits and authorizations needed for your project.

	Yes	No	N/A	Date Obtained	Date Expected
DEP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 100%; height: 15px;" type="text"/>
U.S. Corp of Engineers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 100%; height: 15px;" type="text"/>
Local Planning Board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 100%; height: 15px;" type="text"/>
Public Utilities Commission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 100%; height: 15px;" type="text"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 100%; height: 15px;" type="text"/>

Are there additional state or local approvals required? Yes No

What is the expected project completion date?

GENERAL INFORMATION *(continued)*

Do you have interim financing? Yes No
 If no, do you need interim financing? Yes No

If you have interim financing please provide the following information:

Amount	Maturity	Rate	Lender
\$ -	___/___/___	%	

How much of the SRF loan, if any, will be used to refinance existing debt? \$ -

If applicable, what is the original issue date of the loan being refinanced? ___/___/___

Form of Authorization Referendum Council Town Meeting Other _____

Authorized Amount \$ - Date Authorized ___/___/___

NOTE: SRF Program issuance costs, from the table below, must be factored into the authorization amount, in addition to the other costs of construction.

A current listing of approved Bond Counsel can be found on our website under program information.

Bond Counsel: _____
 Telephone: _____ Fax: _____
 Mailing Address: _____

Source of Funds		Project Cost Breakdown	
Amount Requested from Bond Bank (this application)	\$ A	Land	\$
Federal grant or loan- specify	\$	Design	\$
State grant or loan- specify	\$	Engineering	\$
Applicant's share	\$	Contractors	\$
Other Specify	\$	Contingency	\$
Other Specify	\$	Other Specify	\$
Other Specify	\$	Other Specify	\$
Other Specify	\$	Other Specify	\$
Total Source of Funds	\$ B -	Sub-Total of Project Costs	\$ C -

Cost of Bond Issuance	Bond Bank Loan Amount	N/A	x 2%*	N/A
Total Issuance Costs				D \$ -

Sub-Total of Project Costs (C)	\$ -
Plus Total Issuance Costs (D)	\$ -
Total Project and Issuance Costs (C+D) E	\$ -

*NOTE: The costs of issuance is only an estimate and it may not apply in all cases. Upon review of your application, the CWSRF Program Officer will contact you with a more accurate cost estimate associated with your borrowing.

ISSUANCE INFORMATION

Since your last Annual Report or Audited Financial Statement

Have you issued/authorized any:

- | | | |
|---|------------------------------|-----------------------------|
| New long-term debt? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Notes or loans for operating purposes? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Bond Anticipation Notes? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Grant Anticipation Notes? (<i>Federal or State</i>) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered yes to any of the above questions, please provide the following information:

Type of Debt	Issue Date	Amount	Maturity	Rate	Lender
	___/___/___		___/___/___	%	
	___/___/___		___/___/___	%	
	___/___/___		___/___/___	%	
	___/___/___		___/___/___	%	

Check off any factors that have occurred since the date of your last Audited Financial Statements or Annual Report that would significantly affect your revenue, expenditures or overall financial condition, such as:

- Pending litigation in excess of \$10,000. *If checked, we will need a statement from your local legal counsel about any such lawsuit.*

- In place or pending before the governing body, a limitation on the ability of the governmental unit to raise, through taxes or rates or expend from revenues, funds necessary to pay the costs incurred if you issue the debt called for in this application. *If checked, please provide a copy of the ordinance or proposed governmental unit action explaining the possible limitation.*

Other-please explain

Is there any reason that the Bond Bank could not take a mortgage or first lien pledge of the general revenue of the system?

- Yes No

Type of debt requested: General Obligation Revenue Combination

State Dedicated source(s) of revenue for repayment of the Bond Bank loan:

- General Taxes User Charges Special Assessments

Do you have long-term take out from another source? Yes No

If yes, please explain:

Do you wish to capitalize interest on the Bond Bank loan, once construction is complete? Yes No

If yes, how long: (a maximum of 12 months)

Are there any limitations (e.g., local ordinance, statutory, or regulation) governing the amount of bonded or general obligation debt that you may incur? Yes No

If yes, please explain:

ISSUANCE INFORMATION *(continued)*

How many years do you wish to have to repay this loan?

Payments should commence in what year?

NOTE: The maximum repayment term is thirty (30) years.

*** The Bond Bank can assist you in completing the maturity schedule.**

Payment Date (Yr)	Principal Payment Amount

ECONOMIC INFORMATION

Fiscal Year End: / /

When are the charges for services due and payable?

- Monthly
 Quarterly
 Semi-Annually
 Annually

What is the interest rate penalty for late payments? %

List all the cities and/or towns your system serves:

Town/City	Estimated # of People Being Served (<i>Customers</i>)

Populations:

2000 Census: people
 Most Recent Estimate: people

List any significant users or potential users who utilize more than 5% of the system with approximate percentage of capacity attributed to each user.

Name of Individual/Business	Annual User Charge	Percentage of Capacity
		%
		%
		%
		%
		%
		%
		%

Facility and Rate Information for the Current and Past 5 years

	Previous Year	Previous Year	Previous Year	Previous Year	Previous Year	Current Year
<i>Enter Year ==></i>						
# of Facility Customers <i>(hook-ups)</i>						
# of Employees <i>(operating the facility)</i>						
Rate Schedule <i>(may attach approved schedule for current year)</i>	c.f.	c.f.	c.f.	c.f.	c.f.	c.f.
Planned Rate Increases <i>(during the next 2 years)</i>						

ECONOMIC INFORMATION *(continued)*

Ten Largest Taxpayers of Municipality (District will need to supply information for each City/Town served)

Taxpayer	Type of Business	Current Year Assessed Value	<i>% of Total Levy taxpayer assessed value divided by town/city's total assessed value</i>
			%
			%
			%
			%
			%
			%
			%
			%
			%
			%

Are you anticipating any changes in the largest taxpayer? Yes No

If yes, why? _____

Five Largest Employers in your Community

Employer	Type of Business	# of Employees

Are any of these employers expected to make major changes in workforce or operations? Yes No

If yes, why? _____

DEBT INFORMATION

Debt Statement - Most current as of: / /

GENERAL OBLIGATION BONDS		Principal Amount Outstanding
Issued Through the Bond Bank		
	\$	-
	\$	-
Other Issuances, outside the Bond Bank <i>(list principal & interest info on next page)</i>		
	\$	-
	\$	-
LOAN REQUESTS		Principal Amount Outstanding
Loan amount being requested through the Bond Bank		
	\$	-
	\$	-
Loan amount being requested through other sources		
	\$	-
	\$	-

Total Direct Debt \$ -

Overlapping Debt

List all governmental units that have overlapping jurisdiction (*county, school district, town, fire district, water, sewer, utility, etc.*) with your own unit and the amount of debt owed by each. Please indicate the amount and percent of outstanding debt for which your community is liable.

Name of Governmental Unit	Outstanding Bonded Debt	Your % of	Your \$ share of
	\$ -	%	\$ -
	\$ -	%	\$ -
	\$ -	%	\$ -
	\$ -	%	\$ -
	\$ -	%	\$ -

Total Overlapping Debt \$ -

Total Direct Debt and Overlapping Debt \$ -

Do you belong to the Maine State Retirement System?

Yes No

If yes, what is the amount of the unfunded liability?

\$ -

If no, does the system provide a retirement program?

Yes No

If yes, please provide the most current estimate of any unfunded pension liability.

\$ -

OUTSTANDING DEBT NOT WITH THE BOND BANK

Combined Debt Service Payment Schedule

List all your current outstanding long-term debt that **is not** with the Maine Municipal Bond Bank. Provide a schedule of all future principal and interest payments, by year, until debt is retired, or attach a copy of the amortization schedule for each loan.

Fiscal Year Ending	Principal	Interest
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
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	\$ -	\$ -
	\$ -	\$ -
Total Payments	\$ -	\$ -

Total principal payments should equal "Other Issuances", outside the Bond Bank under Debt Information on previous page.

FINANCIAL INFORMATION

Summary of Balance Sheet for Last Three Fiscal Years and Two Years Projected (*General Fund Only*)

<i>Enter Year==></i>	Enter Year	Enter Year	Enter Year	Enter Year	Enter Year
Cash and Cash Equivalents					
Investments					
Accounts Receivable (<i>Net</i>)					
Allowances for uncollectibles					
Taxes Receivables (<i>Net</i>)					
Allowances for uncollectibles					
Due from other funds					
Due from other governments					
TOTAL ASSETS	\$	-	\$	-	\$
					-

LIABILITIES					
Bonds Payable					
Accounts Payable					
Due to other funds					
Other- <i>Explain</i>					
Deferred Revenue					
Reserve					
TOTAL LIABILITIES	\$	-	\$	-	\$
					-

FUND BALANCE					
Designated					
Undesignated					
TOTAL FUND BALANCE	\$	-	\$	-	\$
					-
TOTAL LIABILITIES AND FUND BALANCE	\$	-	\$	-	\$
					-

FINANCIAL INFORMATION *(continued)*

Summary Statement of Revenue and Expenditures for General Fund For Last Three Years and for Two Years Projected (*General Fund Only*)

REVENUES

	Enter Year	Enter Year	Enter Year	Enter Year	Enter Year
<i>Enter Year==></i>					
Local Tax Revenues					
Licenses & Permits					
Taxes Receivables (<i>Net</i>)					
State Subsidy for Schools					
Charges for Services					
Other State Subsidies					
Other- <i>Explain</i>					
Investment Income					

TOTAL REVENUES \$ - \$ - \$ - \$ - \$ -

EXPENDITURES

All Departments <i>Operations</i>					
Debt Service					
Other- <i>Explain</i>					

TOTAL EXPENDITURES \$ - \$ - \$ - \$ - \$ -

Tax Receivables (<i>Net</i>)					
Excess of Revenues Over/Under Expenditures	\$ -	\$ -	\$ -	\$ -	\$ -
Other Financing Sources (<i>Uses</i>)					
*Operating Transfer In:					
*Operating Transfer Out:					

BEGINNING FUND BALANCE \$ - \$ - \$ - \$ - \$ -

***PRIOR PERIOD ADJUSTMENTS** \$ - \$ - \$ - \$ - \$ -

ENDING FUND BALANCE \$ - \$ - \$ - \$ - \$ -

*Please Explain: _____

BUDGETED EXPENDITURES FOR LAST THREE FISCAL YEARS

	_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____
Gross Budgeted Dollars	\$ -	\$ -	\$ -

DISTRICT FINANCIAL INFORMATION

Summary of Balance Sheet for Last Three Fiscal Years and Two Years Projected

ASSETS

	Enter Year	Enter Year	Enter Year	Enter Year	Enter Year
<i>Enter Year==></i>					
Cash and Cash Equivalents					
Investments					
Accounts Receivable (<i>Net</i>)					
Property, Plant & Equipment					
Other- <i>Explain</i>					

TOTAL ASSETS \$ - \$ - \$ - \$ - \$ -

LIABILITIES

Bonds Payable					
Accounts Payable					
Notes Payable					
Other- <i>Explain</i>					

TOTAL LIABILITIES \$ - \$ - \$ - \$ - \$ -

FUND BALANCE

Contribution in aid of construction					
Retained Earnings					
Other- <i>Explain</i>					

TOTAL FUND BALANCE \$ - \$ - \$ - \$ - \$ -

TOTAL LIABILITIES AND FUND BALANCE \$ - \$ - \$ - \$ - \$ -

DISTRICT FINANCIAL INFORMATION *(continued)*

Summary Statement of Revenue and Expenditures for last three years
and for two years projected

REVENUES

	Enter Year	Enter Year	Enter Year	Enter Year	Enter Year
<i>Enter Year==></i>					
Residential					
Commercial					
Deferred Charges					
Other- <i>Explain</i>					

TOTAL REVENUES \$ - \$ - \$ - \$ - \$ -

EXPENDITURES

Operations & Maintenance					
Depreciation & Amortization					
Other- <i>Explain</i>					

TOTAL EXPENDITURES \$ - \$ - \$ - \$ - \$ -

TOTAL OPERATING INCOME \$ - \$ - \$ - \$ - \$ -

OTHER INCOME

Interest					
Other- <i>Explain</i>					

TOTAL OTHER INCOME \$ - \$ - \$ - \$ - \$ -

INCOME DEDUCTIONS

Interest on Debt					
Debt Retired					
Other- <i>Explain</i>					

TOTAL INCOME DEDUCTIONS \$ - \$ - \$ - \$ - \$ -

NET OPERATING INCOME \$ - \$ - \$ - \$ - \$ -

STATEMENT OF DEFAULT

We hereby certify that (*System Name*) _____ has not defaulted on any payment of matured Principal and/or Interest. If default has occurred, please provide details on a separate page.

Is the system under any regulatory or court compliance order? Yes No

If yes, please describe on a separate page, including issuance and compliance requirement date.

The applicant must enclose the following documentation with the completed application. *Please indicate whether it is enclosed or not applicable.*

- | Enclosed | N/A | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | One copy of District's Charter, with amendments, if any. |
| <input type="checkbox"/> | <input type="checkbox"/> | One copy of each of the last three annual Audited Financial Statements. If there is no operational history, please submit an analysis demonstrating financial feasibility. |
| <input type="checkbox"/> | <input type="checkbox"/> | If the latest Audited Financial Statement is more than 12 months old, please submit the most recent unaudited financial statement (<i>e.g., trial balance, balance sheets, statement of revenue and expenditures</i>). |
| <input type="checkbox"/> | <input type="checkbox"/> | One copy of the latest Budget. |
| <input type="checkbox"/> | <input type="checkbox"/> | Schedule of current and/or proposed rates required for financing the project under consideration, and a schedule for adopting those rates, if they are not in place. |
| <input type="checkbox"/> | <input type="checkbox"/> | Most recent copy of proposed construction drawdown schedule. |

Any material facts that amplify the financial effect on the community, not requested in this application, should be noted here:

The facts and representations in this application form are from the official records of this unit and are correct in all material aspects to the best of our knowledge.

Chief Administrative Officer: _____
(name) (title)

Signature: _____

Treasurer: _____

Date: _____

PROJECT AUTHORIZATION

Attach this Project Authorization form to a copy of the completed Clean Water Loan Application and mail to:

SRF Project Manager
State of Maine Environmental Protection
Division of Water Quality Management
17 State House Station
Augusta, Maine 04333-0017

The State of Maine Department of Environmental Protection hereby certifies the following:

- That the applicant is entitled to immediate financing or assistance through the State Revolving Fund – Clean Water Program for the amount requested; and
- That the project to be financed is listed on the most current Department of Environmental Protection Project Priority List; and

FOR DESIGN/CONSTRUCTION PROJECTS

- That the applicant has addressed the capitalization grant requirements and review, as outlined on the Department of Environmental Protection checklist.

Applicant's Name	Project Number	Total Eligible Costs
		\$ -

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Authorized Signature

TITLE

DATE