

ELECTRIC COOPERATIVE - PARTIAL CREDIT GUARANTEE (EC-PCG)

IMPORTANT: PLEASE READ GENERAL INSTRUCTIONS IN FILLING-UP GUARANTEE APPLICATION FORM AND PRINT LEGIBLY

- I. THIS APPLICATION FORM IS TO BE SUBMITTED TOGETHER WITH THE FOLLOWING DOCUMENTS IN TWO (2) SETS:**
- a. Originating Accredited Financing Institution Approval Memo
 - b. Business Registration documents of the borrower
 - c. Investment plan (PIP/REP) of the borrower
 - d. Board Resolution(s) to borrow, detailing terms and conditions of the loan availment
 - e. Pertinent regulatory approvals (e.g., NEA clearance, ECC, etc.)
 - f. Complete project feasibility study (with canvass of proposed capital expenditures to be acquired)
 - g. Latest available 5-year audited financial statements
 - h. Updated interim financial statements
 - i. Financial projections for 5 years
 - j. Certificate of Indebtedness with debt service schedules of all outstanding debts
- 2. THIS APPLICATION FORM IS TO BE SUBMITTED BY THE ELECTRIC COOPERATIVE (EC)-BORROWER AND ACCREDITED FINANCIAL INSTITUTION (AFI).**
- 3. THE EC AND THE AFI ARE LEGALLY BOUND BY ANY AND ALL INFORMATION OR REPRESENTATIONS MADE IN THIS APPLICATION FORM. IT BEING UNDERSTOOD THAT ANY SAID INFORMATION OR REPRESENTATION FORM PART OF THE GUARANTEE AGREEMENT. ANY MATERIAL MISREPRESENTATION, AS DETERMINED BY LGUGC, SHALL BE A SUFFICIENT GROUND FOR THE DENIAL OF THE GUARANTEE APPLICATION OR FOR THE INSTITUTION OF LEGAL ACTION AGAINST ERRING PARTY(IES) IF THE GUARANTEE WAS GRANTED IN RELIANCE ON FALSE OR MISLEADING INFORMATION HEREINSTATED.**
- 4. THIS APPLICATION FORM SHOULD BE CERTIFIED AND SWORN TO BY A DULY AUTHORIZED OFFICER OF THE EC AND THE ORIGINATING AFI.**

PART I - ELECTRIC COOPERATIVE INFORMATION

NAME OF ELECTRIC COOPERATIVE		
ADDRESS OF ELECTRIC COOPERATIVE		REGION:
NAME OF CONTACT PERSON(S)		DESIGNATION/POSITION OF CONTACT PERSON(S)
TELEPHONE NUMBER(S)	FAX NO.	E-MAIL ADDRESS

PART II - PROJECT INFORMATION

LIST OF PROJECTS:	
PROJECT SITES:	
PROJECT PROPONENT(S)	CONTACT PERSON(S)
TOTAL COST OF PROJECTS (in Php)	DURATION OF PROJECT START DATE _____ TARGET COMPLETION DATE _____
PROJECT OBJECTIVES IN TERMS OF: SYSTEM LOSS RATE REDUCTION: EFFICIENCY IMPROVEMENTS: MARKET EXPANSION:	

CERTIFIED CORRECT BY AUTHORIZED REPRESENTATIVES

ORIGINATING AFI:	_____	_____	_____
EC:	_____	_____	_____
	(Signature over printed name)	(Position)	(Date)

PART III - LOAN INFORMATION

NAME OF ORIGINATING AFI		
ADDRESS OF ORIGINATING AFI		
NAME OF CONTACT PERSON(S)		DESIGNATION/POSITION OF CONTACT PERSON(S)
TELEPHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS
TOTAL AMOUNT OF LOAN (PHP)	INTEREST RATE	TERMS OF REPRICING
LOAN TENOR (NO. OF YEARS)	TERMS OF AMORTIZATIONS(PERIOD/AMOUNT)	
LIST OF COLLATERAL(S)	LOAN CONDITIONS	

PART IV - EC'S FINANCIAL PROFILE

A. Actual Gross Revenue for the immediate past 3 year

Year	Gross Revenue	Growth Rate

B. Net Income (Loss) for the immediate part 3 years

Year	Net income before RAF***	Net Income after RAF***

***RAF - Reinvestment Allowance Fund

C. Long-Term Debt as of: (report date

Facility	Financing Institutor	Remaining Balance	Remaining Tenor	Status

D. Other Relevant Information (latest full year data:

Total Assets	System Loss Rate
Total Equity	Collection Efficiency
kWh Sold	NEA Rating
Ave. price/kWh	No. of Employees:
Peak Load (kWh)	

PART V - CUSTOMER PROFILE (LATEST DATA)

Type	No. of Connections	% to total serviceable area
1. Residential		
2. Commercial		
3. Industrial		
4. Others		

CERTIFIED CORRECT:

ORIGINATING AFI:	_____	_____	_____
EC:	_____	_____	_____
	(Signature over printed name)	(Position)	(Date)

PART VI - POWER SOURCE AND SUPPLY

Source	Terms of Payment	Status of Payment
1		
2		
3		
Source	Average Power Supply (kWh)	Share over total Power Supply (%)
1		
2		
3		

PART VII - EC'S PAST AND ON-GOING PROJECTS

B. List of on-going Projects (use additional sheets, if necessary).

Name of Project	Status of Project (estimated date of completion)	Cost of Project	Source of Funds

PART VIII - OFFICERS & CONSULTANTS

- | | |
|---|---|
| A. Board of Director
President : _____
Vice President : _____
Secretary : _____
Treasurer : _____
Other Members: (Position/name) _____ | Key Officers:
GM: _____
Finance Head: _____
Technical Head: _____
Institutional Head: _____
Corporate Planning Head: _____ |
|---|---|

PART IX - DEPOSITORY BANKS

Nature of Fund Deposits	Names of Banks/Financial Insitutions

PART X - CREDIT RELATIONSHIPS WITH FINANCING INSTITUTIONS(other than those listed under long-term debt)

Banks/Financial Insitution	Credit Facility	Outstanding Loan Balance	Security/Guaranty

CERTIFIED CORRECT:

ORIGINATING AFI:	_____	_____	_____
EC:	_____	_____	_____
	(Signature over printed name)	(Position)	(Date)