1. Please provide the following applicant information:			
Please provide street address. PO Box is not acceptable.			
V =			
Your First Name:			
Your Last Name:			
Legal Business Name:			
Street Address:			
Address 2:			
City/Town:			
State:			
ZIP:			
Email Address:			
Phone Number:			
Are you the Company	O Yes O No		
Owner/President:	res No		
County			
3. Please provide the following in	nformation about the com	pany Accounting/Finance contact:	
First Name:			
Last Name:			
Email Address:			
Phone Number:			
4. Company website:			
5. Federal EIN:			
6. Primary NAICS code (6 Digit):			

7. Primary Industry:
v
8. Unique Entity ID (UEID):
The federal government requires companies doing business with the government or receiving grants to have a Unique Entity Identification (UEID) number. You can obtain a free UEID number at the federal government website SAM.gov .
9. Year established:
10. Number of employees in Maine:
11. What % of your total sales are from out of state?
%
12. Is this business an affiliate or subsidiary?
○ Yes
O No
13. Are the principal operations of this company located in Maine?
○ Yes
O No
14.1 Is your business classified as Disadvantaged?
Select all that apply
Social + Economic Disadvantaged
□ Women
☐ Veteran
☐ Disabled Veteran
☐ Rural
☐ Not Disadvantaged
14.2 Indicate the appropriate eligible industry sector for the activity. (Only one industry sector per application.)
v

15. Project Name:			
16. Indicate the appropriate category for the activity. (Only one category funding in more than one category.)	ory per application. Please submit separate applications to request		
Market Research and Diversification Assistance			
Training and Industry Events			
Compliance and Certification Assistance			
Please provide the total estimated project cost.			
17. Project description:			
Briefly describe how the funds will be used to expand and increase your domestic sales activity. (NOTE: Please submit separate applications for each project. Only one activity per application is permitted. A total cost estimate for the activity is required.)			
18. Please select the top target States for the project (up to 4 choices) Control/Command key. Alabama Alaska American Samoa Arizona Arkansas). To select multiple states on the list, hold down the		
	9.1 Proposed End Date for project		
20. Brief description of company's products/services and intended do	mestic market development:		
	le de la companya de		

21. List the name, address, email, and website for any organization or vendor (e.g., consultants, trade show organizers, etc.) whose costs will be reimbursed by you with award funds.
22. Have you received a previous DTEP Financial Assistance Award for this activity?
O Yes
○ No
23. Would you describe your company as a '"new to domestic trade" business, having little or no previous sales experience outside of Maine?
○ Yes
O No
24. Is your business currently selling outside of Maine to one or more domestic markets (i.e., beyond Maine) and:
Expanding into new US markets
Expanding into a new region or new segment or new product line within an existing market (i.e., beyond Maine)
O N/A
25. MITC would like to give eligible small businesses the opportunity to expand your knowledge and resources of other programs that are offered by affiliated economic development agencies. Please check the appropriate box if you would like for your company's name and contact information to be shared with other MITC partners which may be helpful to your business. Your choice to participate or not will not change the status of your participation with DTEP.
○ Yes
O No

An officer of the company must submit this application. By submitting this application, the applicant certifies that:

- 1. To the best of my/our knowledge, the data in this application is correct and that supporting documentation will be available to MITC for review upon request.
- 2. I/we certify that we have not applied for or received public funding for any of the activities listed in the project application from Maine APEX, Maine International Trade Center, Maine Made, the Greater Portland Council of Governments, the Maine Technology Institute, or FoodExportUSA. MITC and DECD will be reviewing all Domestic Trade Recovery Grant investments to ensure that there are no duplicate requests.
- 3. I/we understand that submitting false or misleading information may result in being found ineligible for reimbursement and permanent disqualification form any future use of this program.
- 4. Maine Domestic Trade Expansion funds will only be used for those activities included in the project budget.
- 5. At least 51% of the manufactured value of the product or the performance value of the service will be produced in Maine.
- 6. I/we that all receipts and surveys must be submitted 60 days after completion of grant activity.
- 7. I/we understand that MITC will conduct confidential surveys following the completion of the activity and at 6 and 12 months and agree to answer those surveys in a timely manner.
- I certify that this application meets all of the above guidelines.

Pursuant to MITC's enabling statute (10 MRSA 107-B, section 945-J), certain information may be exempt from FOAA requirements upon request. As this application and underlying project meets the statutory definition of 'proprietary information", i.e. 'trade secret or production, commercial, or financial information the disclosure of which would impair the competitive position of the center of the person submitting the information and would make available information not otherwise publicly available," I/we request that any information regarding this application remain confidential, except for reporting purposes to the Maine Department of Economic & Community Development as it relates to its obligations to the Federal Government.

I certify that the information provided is truthful and accurate.

Electronic Signature Required: Please sign on the line and provide your contact information below.