

#### CENTRAL BANK OF BARBADOS

P. O. Box 1016, Bridgetown, Barbados

# FOREIGN EXCHANGE & EXPORT CREDITS DEPARTMENT APPLICATION RECEIPT FORM

### Section A Name of Applicant: Address: Email: Phone Project Summary: Amount: **BDS**\$..... Signature: N.B. A full assessment of this application will be undertaken by the Financial Intermediary. **Section B FACILITY REQUESTED** Credit Guarantee Scheme for Businesses Tourism Loan Guarantee Facility **Export Credit Insurance** Trade Receivables Liquidity Facility **Export Finance Guarantee Facility ICF** DOCUMENTATION SUBMITTED Copies of Confirmed Orders Management Summary Bank's Credit Assessment Marketing/Sales Plan Details of Security Other **Environmental Assessment Project Benefits** Financial Analysis Project Cost & Financing Plan **Financial Projections Project Overview**

**Financial Statements** 

Statement of Affairs

## **Section C**

#### SELECTED FINANCIAL INTERMEDIARIES

Please	tick preferred option (s):		
$\circ$	BWU Cooperative Credit Union	0	First Citizens Bank (Barbados) Limited
0	Caribbean Financial Services	0	Fund Access
	Corporation	0	Globe Finance Inc.
$\circ$	CIBC FirstCaribbean	0	Republic Bank (Barbados) Limited
$\circ$	Citicorp Merchant Bank Limited	0	RBC Royal Bank (Barbados) Limited
$\bigcirc$	COB Credit Union	0	Signia Financial Group Inc.
$\bigcirc$	Consolidated Finance	0	The Bank of Nova Scotia
$\circ$	Enterprise Growth Fund Limited		
Section D			
PROCESSING DETAILS			
Date Received by Central Bank or Intermediary: (dd/mm/yyyy)			
Date Submitted to Financial Intermediary by Central Bank			
Date Received for Approval by Central Bank:			
Date Completed by Central Bank:			
Central Bank of Barbados			
Name of Officer:			
Signature: Date:			
Email:		Phon	e:
Financial Intermediary			
Name	of Intermediary:		
Name of Officer:			
Signature:Date:			
Email:		Phor	ne: